



MEDICAL DIAGNOSIS INTERPRETER



Point, mark, translate & communicate +



www.gayther.com

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GDI282021-05

NORTH AMERICA AND THE CARIBBEAN

Edition





In our hour of need, our words and how we communicate can be the difference between life and death. Quickly express how you are feeling to get the help and support you need.

Stay safe, protected and return home safely

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Conversion Table

MASS	
microgram (mcg) / milligram (mg) / gram (g)	
500mcg	0.5mg
600mcg	0.6mg
700mcg	0.7mg
800mcg	0.8mg
900mcg	0.9mg
1mg	0.001g
500mg	0.5g
600mg	0.6g
700mg	0.7g
800mg	0.8g
900mg	0.9g
1g	1g

VOLUME	
teaspoon (tsp) / tablespoon (tbsp) / millilitre (ml) / litre (l)	
1 tsp	6ml
1 tbsp	3tsp or 15ml
100ml	0.1l
200ml	0.2l
300ml	0.3l
400ml	0.4l
500ml	0.5l
600ml	0.6l
700ml	0.7l
800ml	0.8l
900ml	0.9l
1l	1l

TEMPERATURE			
celsius (°C) / fahrenheit (°F)			
38°C	100.4°F	41.5°C	106.7°F
38.5°C	101.3°F	42°C	107.6°F
39°C	102.2°F	42.5°C	108.5°F
39.5°C	103.1°F	43°C	109.4°F
40°C	104°F	43.5°C	110.3°F
40.5°C	104.9°F	44°C	111.2°F
41°C	105.8°F	44.5°C	112.1°F

kontakt | nødstilfælde | emergency contact | personne à contacter en cas d'urgence | contacto de emergencia

jeg har brug for hjælp | ik heb hulp nodig | j'ai besoin d'aide | necesito ayuda

In the event of an emergency, please contact any of the individuals, insurance companies or other services/providers listed in the sections below. When completing this section, please ensure that you use **BLOCK CAPITALS** (e.g. ABC)

CONTACT kontaktoplysninger | contact details | détails du contact | detalles de contacto

NAME

navn | naam | prénom | nombre

TELEPHONE NUMBER

telefon nummer | telefoon nummer | numéro de téléphone | número de teléfono

+ -

(e.g. 1 - United States)

COUNTRY CODE **NUMBER**

landekode | landcode | code postal | código de país nummer | aantal | nombre | número

INSURANCE forsikring | verzekering | assurance | seguro

COMPANY

selskab | bedrijf | compagnie | empresa

POLICY NUMBER


policenummer | polisnummer | numéro de police | número de póliza

OTHER andet | anders | autre | otro



EMERGENCY

nødsituation | noodgeval | urgence | emergencia



DOCTOR

læge | doctor | docteur | doctor



MEDICAL TREATMENT

lægebehandling | medische behandeling | traitement médical | tratamiento médico



HOSPITAL

sygehus | ziekenhuis | hôpital | hospital

The information contained in this document is classified as personal and sensitive and should be kept safe at all times. The information should only be viewed by the owner (detailed in Section A), medical professionals or whomever the owner gives expressed permission. In the scenario that this document has been lost and is found, please contact

+ -

(e.g. 1 - United States)

COUNTRY CODE **NUMBER**

landekode | landcode | code postal | código de país nummer | aantal | nombre | número

3

THREE ELEMENTS OF INFORMATION THAT COULD SAVE YOUR LIFE

When in need of medical assistance, receiving treatment or in the event of an emergency, getting help is crucial. Communicating your current state of health, allergies or pre-existing medical conditions quickly to a medical professional can be a matter of life and death. This situation can be made worse when travelling and speaking to non-native English speakers. Medically trained individuals can provide you with the urgent care you need but who might be struggling to understand what is being explained to them. To help you in this situation, we created the Medical Diagnosis Interpreter (MDI).

The MDI is an innovative way in which you only need to point or mark how you are thinking and feeling, using the many illustrations and translated terms. The tool enables the medical professional to use what is being shown to them to help them diagnose any underlying problems. The MDI is grouped in logical sections. Some can be completed before seeking medical attention (sections A, B, C, D and H). The remaining sections can be used during an emergency (section E, F and G). All of the vital information needed to help the medical professional make an informed diagnosis. A diagnosis that will ultimately help in treating the condition, virus or illness.

A successful diagnosis typically requires three elements of crucial information: -

- Details of any pains, conditions or symptoms you have been experiencing, what hurts, where and for how long
- Any medications you have already taken and how long ago
- Any allergies, pre-existing conditions and important information about you to help with the diagnosis and treatment

DRUGS / MEDICATION USED G

anvendt medicin | medicijn gebruikt | médicament utilisé | medicina usada

PAIN
SYMPTOM
MEDICATION
DURATION
MEASUREMENT

MINUTES
HOURS
WEEKS
MONTHS
HUNDREDS
THOUSANDS

Any medications taken in the past 24 hours

<input type="checkbox"/> PARACETAMOL paracetamol paracetamol paracétamol paracetamol	<input type="checkbox"/> IBUPROFEN ibuprofen ibuprofen ibuprofène ibuprofeno	<input type="checkbox"/> CANNABIS cannabis hennep cannabis canabis
<input type="checkbox"/> ANTIBIOTICS antibiotika antibiotica antibiotiques antibióticos	<input type="checkbox"/> ASPIRIN aspirin aspirine aspirine aspirina	
<input type="checkbox"/> OTHER <hr/> <hr/> <hr/>		

(tsp)

 teaspoon

teske | theelepel | cuillère à café | cucharilla

(tbsp)

 tablespoon

spiseskefuld | eetlepel | cuillère à soupe | cucharada

(ml)

 millilitre

milliliter | milliliter | millilitre | mililitro

(l)

 litre

liter | liter | litre | litro

(mcg)

 microgram

mikrogram | microgram | microgramme | micrograma

(mg)

 milligram

milligram | milligram | milligramme | miligramo

(g)

 gram

gram | gram | gramme | gramo

(-)

 other

andet | anders | autre | otro


F SYMPTOMS



symptom | symptoom | symptôme | sintoma


- 1
ONE
- 2
TWO
- 3
THREE
- 4
FOUR
- 5
FIVE
- 6
SIX
- 7
SEVEN
- 8
EIGHT
- 9
NINE
- 10
TEN

TREMBLING / TINGLING



rysten / prikken | beven / tintelingen | tremblements / picotements | temblor / hormigueo

LOSS OF BALANCE




ustabil / tab af balance | instabil / verlies van evenwicht | instable / perte d'équilibre | inestable / pérdida de equilibrio

VOMIT / NAUSEA

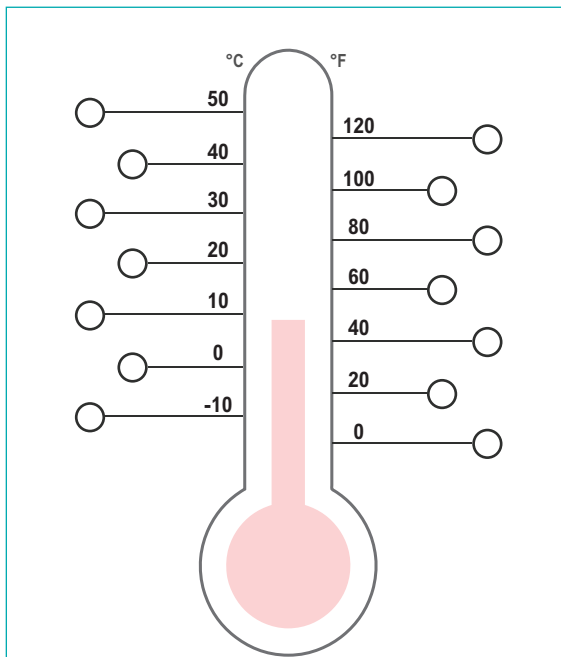


opkast / kvalme | braken / misselijkheid | vomissements / nausées | vómito / náuseas

WEAK / LACK OF ENERGY



svag / mangel på energi | zwak / gebrek aan energie | faible / manque d'énergie | débil / falta de energía



HIGH TEMPERATURE

høj temperatur | hoge temperatuur | haute température | alta temperatura

OTHER

.....

.....

.....

.....

ABOUT THE NORTH AMERICA AND CARIBBEAN EDITION

The North America and Caribbean edition uses translated terms for five of the most common and spoken languages in that area or region. The information below outlines all of the featured languages and the countries in which they are spoken



FLAG	LANGUAGE	LANGUAGE SPOKEN IN
	Danish (da)	Greenland
	Dutch (du)	Caribbean Netherlands, Netherland Antilles, Saint Martin (Dutch)
	English (en)	Anguilla, Antigua and Barbuda, The Bahamas, Barbados, Bermuda, British Virgin Islands, Canada, Caribbean Netherlands, Cayman Islands, Dominica, Grenada, Guam, Jamaica, Netherlands Antilles, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Martin (Dutch), Saint Vincent and the Grenadines, Turks and Caicos Islands, Trinidad and Tobago, United States of America (USA), United States Virgin Islands
	French (fr)	Canada, Haiti, Martinique, Saint Barthelemy, Saint Martin (French), Saint Pierre and Miquelon
	Spanish (es)	Cuba, Dominican Republic, Guadeloupe, Puerto Rico

A PERSONAL INFORMATION

personlig information | persoonlijke informatie | informations personnelles | informacion personal

NAME

navn | naam |
prénom | nombre

NATIONALITY




nationalitet |
nationaliteit |
nationalité |
nacionalidad

AGE

alder | leeftijd | âge
| años

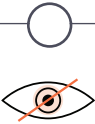

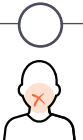
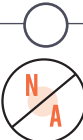
GENDER

køn | geslacht | le genre | género

		
MALE	FEMALE	OTHER
han- mannetje mâle masculino	kvinde vrouw femelle femenino	andet anders autre otro

SPECIAL REQUIREMENTS

særlige krav | speciale vereisten | besoins spéciaux | requisitos especiales

			
BLIND unable or have difficulty seeing	DEAF unable or have difficulty hearing	MUTE unable or have difficulty speaking	NOT APPLICABLE
blind (ude af stand eller har svært ved at se) blind (niet in staat of moeilijk te zien) aveugle (incapable ou ayant du mal à voir) ciego (incapaz o tiene dificultad para ver)	døve (ikke i stand til eller har svært ved at høre) doof (niet in staat of moeilijk te horen) sourd (incapable ou ayant des difficultés à entendre) sordo (incapaz o tiene dificultad para oír)	lydløs (kan ikke eller har svært ved at tale) mute (niet in staat of moeite met spreken) muet (incapable ou a du mal à parler) silencio (incapaz o tiene dificultad para hablar)	ikke anvendelig niet toepasbaar n'est pas applicable no aplica



PAIN

SYMPTOM

MEDICATION

DURATION

MEASUREMENT

MINUTES


















HOURS

WEEKS

MONTHS

I feel or have...

jeg føler eller har det | ik voel of heb | je ressens ou j'ai | siento o tengo

<input type="checkbox"/> ACHES / PAINS  ømhed / smerter pijn / pijn aches / pains dolores	<input type="checkbox"/> ANXIETY  angst angst anxiété ansiedad	<input type="checkbox"/> BLURRED / FOGGY  sløret / tåget wazig / mistig flou / brumeux borroso / brumoso
<input type="checkbox"/> BROKEN / STRAINED  ødelagt / anstrengt gebroken / gespannen cassé / tendu roto / tenso	<input type="checkbox"/> BURNS  forbrændinger brandwonden brûlures quemaduras	<input type="checkbox"/> CHILLS / SHIVERING  kulderystelser / rysten koude rillingen / rillingen frissons / frissons escalofrios / escalofrios
<input type="checkbox"/> CONFUSED  forvirret verward confus confuso	<input type="checkbox"/> COUGH  hoste hoesten toux tos	<input type="checkbox"/> DRY / THIRSTY  tør / tørstig droog / dorstig sec / assoiffé seco / sediento
<input type="checkbox"/> FATIGUE / DROWSY  træthed / døsigt vermoeidheid / sufheid fatigue / somnolence fatiga / somnolencia	<input type="checkbox"/> IRRITABLE  irriteret prikkelbaar irritable irritable	<input type="checkbox"/> LIGHTHEADED / DIZZY  lethet / svimmel duizelig / duizelig étourdi / étourdi aturdido / mareado
<input type="checkbox"/> LOSS OF APPETITE  mistet appetiten verlies van eetlust perte d'appétit pérdida de apetito	<input type="checkbox"/> LOSS OR SHORT OF BREATH  tab eller åndenød verlies of kortademigheid perte ou essoufflement pérdida o falta de aliento	<input type="checkbox"/> RASH / ITCHY  udslæt / kløende uitslag / jeuk éruption cutanée démangeaisons erupción / picor
<input type="checkbox"/> SORE / SWOLLEN  øm / hævet pijnlijk gezwollen douloureux / enflé dolor / hinchazón	<input type="checkbox"/> SWEATING / WARM  sved / varm sweating / warm transpiration / chaud sudoración / calor	

F SYMPTOMS



symptom | symptoom | symptôme | sintoma



I cannot...

jeg kan ikke | ik kan niet | je ne peux pas | no puedo

<input type="checkbox"/>	BREATH	<input type="checkbox"/>	SWALLOW	<input type="checkbox"/>	SMELL
	åndedrag adem soufflé aliento		sluge slikken avaler golondrina		lugt geur odeur oler
<input type="checkbox"/>	TASTE	<input type="checkbox"/>	SEE / VISION	<input type="checkbox"/>	HEAR
	smag smaak goût gusto		se / vision zie / visie see / vision ver / visión		høre horen entendre oír
<input type="checkbox"/>	FEEL	<input type="checkbox"/>	PASS URINE	<input type="checkbox"/>	PASS A BOWEL
	føle voelen ressentir sensación		passere urin plassen passer l'urine orinar		passere en tarm een darm passeren passer un intestin pasar un intestino
<input type="checkbox"/>	MOVE	<input type="checkbox"/>	WALK	<input type="checkbox"/>	TALK
	bevæge sig verhuizing bouge toi movimiento		gå lopen marche caminar		tale praten parler hablar
<input type="checkbox"/>	LIFT				
	løfte op lift ascenseur ascensor				

ALLERGIES

for detailed allergies see section B

allergi | allergieën | allergies | alergias

<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
	ja ja oui sí		ingen nee non no

BLOOD GROUP

blodgruppe | bloedgroep | groupe sanguin | grupo sanguíneo

A POSITIVE	A NEGATIVE	AB POSITIVE	AB NEGATIVE
a positiv een positief un positif un positivo	a negativ een negatief un négatif un negativo	ab positiv ab positief ab positif ab positivo	ab negativ ab negatief ab négatif ab negativo
B POSITIVE	B NEGATIVE	O POSITIVE	O NEGATIVE
b positiv b positief b positif b positivo	b negativ b negatief b négatif b negativo	o positiv o positief o positif lo positivo	o negativ o negatief o négatif o negativo
UNKNOWN			
ukendt onbekend inconnu desconocido			

B ALLERGIES

allergi | allergieën | allergies | alergias

Please mark or tick (✓) -all of the allergies you have or have had in the past. Any allergies you may have can have a severe impact on any treatment or medication you receive.

<input type="checkbox"/>	PENICILLIN	<input type="checkbox"/>	ASPIRIN	<input type="checkbox"/>	CHEMICAL
	penicillin penicilline pénicilline penicilina		aspirin aspirine aspirine aspirina		kemisk chemisch chimique químico
<input type="checkbox"/>	POLLEN	<input type="checkbox"/>	DUST	<input type="checkbox"/>	MOULD
	pollen stuifmeel pollen polen		støv stof poussière polvo		skimmel gietvorm moule molde
<input type="checkbox"/>	ANIMALS	<input type="checkbox"/>	FISH	<input type="checkbox"/>	DAIRY
	dyr dier animal animal		fisk vis poisson pescado		mejeri zuivel laitier lechería
<input type="checkbox"/>	NUTS	<input type="checkbox"/>	BITE	<input type="checkbox"/>	STING
	nødder Noten des noisettes nueces		bid beet mordre mordedura		stik steek piquer picadura
<input type="checkbox"/>	OTHER				
<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>					



BACK

tilbage | terug | arrière | espalda

PAIN	<input type="checkbox"/>	SYMPTOM	<input type="checkbox"/>	MEDICATION	<input type="checkbox"/>	DURATION	<input type="checkbox"/>	MEASUREMENT	<input type="checkbox"/>
MINUTES	<input type="checkbox"/>	HOURS	<input type="checkbox"/>	WEEKS	<input type="checkbox"/>	MONTHS	<input type="checkbox"/>		

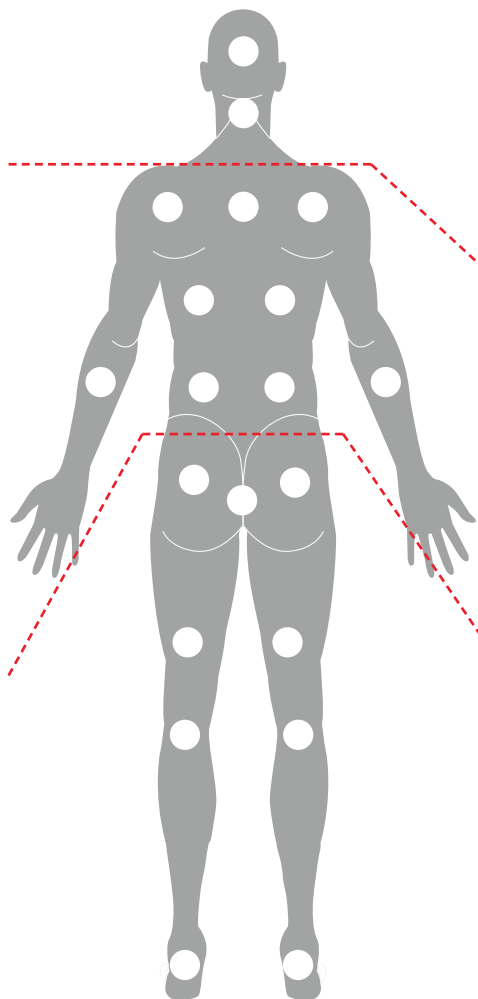
	THROAT		TOOTH		NECK		GLAND		
hals keel gorge garganta		tand tand dent diente		hals nek cou cuello		kirtel klier glande glándula			
	BREAST		SPINE		ARM		HAND		
bryst borst sein pecho		rygrad wervelkolom colonne vertébrale espina		arm arm bras brazo		hånd hand- main mano			
	THIGH		HIP		FOOT		TOE		
lår dij cuisse muslo		hofte heup hanche cadera		fod voet pied pie		tå teen doigt de pied dedo del pie			
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
1	2	3	4	5	6	7	8	9	10





















smerte | pijn | douleur | dolor

preexist | preexist | préexister | preexistir

- 1
ONE
- 2
TWO
- 3
THREE
- 4
FOUR
- 5
FIVE
- 6
SIX
- 7
SEVEN
- 8
EIGHT
- 9
NINE
- 10
TEN



 SKULL kranium schedel crâne cráneo	 BRAIN hjerne hersenen cerveau cerebro
 SKIN hud huid peau piel	 KIDNEYS nyrer niertjes reins riñones
 BUTTOCKS balder zitvlak fesses nalgas	 RECTUM anus anus anus ano

<input type="checkbox"/> CANCER 1 2 3 4  kræft kanker cancer cáncer	<input type="checkbox"/> DIABETES 1 2  diabetes suikerziekte diabète diabetes	<input type="checkbox"/> LEUKAEMIA 1 2 3 4  leukæmi leukemie leucémie leucemia
<input type="checkbox"/> PREGNANCY 0-3 4-6 7-9  graviditet zwangerschap grossesse el embarazo	<input type="checkbox"/> ASTHMATIC ASTHMA COPD  astmatiker astmatisch asthmatique asmático	<input type="checkbox"/> LUPUS SLE CLE DLE  lupus lupus lupus lupus
<input type="checkbox"/> HIV / AIDS  hiv / aids hiv / aids vih / sida vih / sida	<input type="checkbox"/> EPILEPSY  epilepsi epilepsie épilepsie epilepsia	<input type="checkbox"/> MENTAL HEALTH  mentalt helbred mentale gezondheid santé mentale salud mental
<input type="checkbox"/> HEART DISEASE  hjerte sygdom hartziekte maladie cardiaque enfermedad del corazón	<input type="checkbox"/> HIGH CHOLESTEROL  højt kolesteroltal hoge kolesterol taux de cholestérol élevé colesterol alto	<input type="checkbox"/> HIGH BLOOD PRESSURE  blodtryk bloeddruk tension artérielle presión sanguínea
<input type="checkbox"/> OTHER _____ _____ _____ _____		

D MEDICATION

medicin | geneesmiddel | des médicaments | medicación

Please list all of the medications that you frequently take concerning your allergies or pre-existing conditions. Medical professionals must be made aware of any medications that you may take as it will affect decisions relating to any medication prescribed when you seek treatment

	MEDICATION	FREQUENCY	MEASUREMENT
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>

hourly | hver time | elk uur | toutes les heures | cada hora
daily | daglige | dagelijks | du quotidien | diario

tsp | teske | theelepel | cuillère à café | cucharilla
tbsp | spiseskefuld | eetlepel | cuillerée à soupe | cucharada
mcg | mikrogram | microgram | microgramme | micrograma
mg | milligram | milligram | milligramme | miligramo
g | gram | gram | gramme | gramo
ml | milliliter | milliliter | millilitre | mililitro
l | liter | liter | litre | litro



FRONT

foran | voorkant | de face | frente

PAIN	SYMPTOM	MEDICATION	DURATION	MEASUREMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MINUTES <input type="checkbox"/>	HOURS <input type="checkbox"/>	WEEKS <input type="checkbox"/>	MONTHS <input type="checkbox"/>	

NOSE

næse | neus- | nez | nariz

EAR

øre | oor | oreille | oreja

MOUTH

mund | mond | bouche | boca

TONGUE

tunge | tong | langue | lengua

SHOULDER

skulder | schouder | épaule | hombro

CHEST

bryst | borst | poitrine | pecho

LIVER

lever | lever | foie | hígado

STOMACH

mave | maag | estomac | estómago

LEG

ben | been | jambe | pierna

PELVIS

bækken | bekken | bassin | pelvis

ANKLE

ankel | enkel | cheville | tobillo

HEEL

hæl | hiel- | talon | tacón

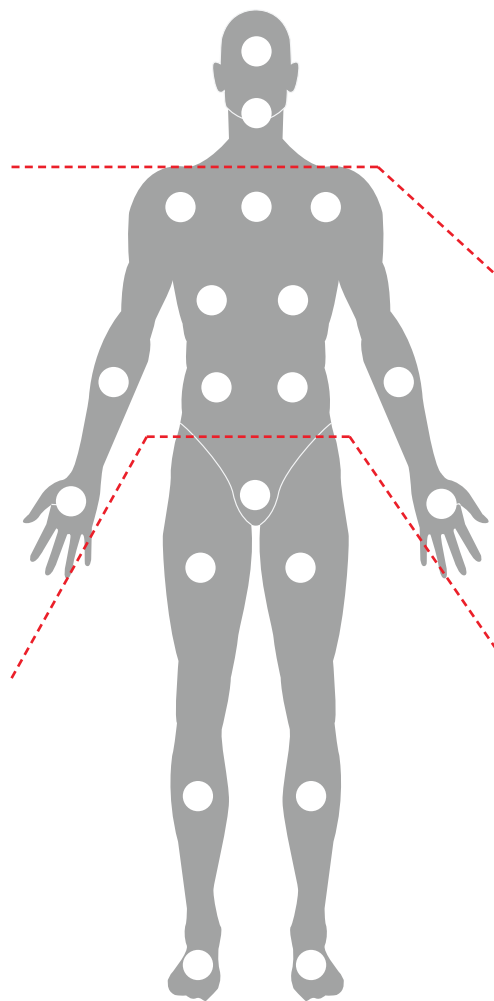
1	2	3	4	5	6	7	8	9	10



smerte | pijn | douleur | dolor

under en nødsituation | tijdens een noodgeval | en cas d'urgence | durante una emergencia

1 ONE	2 TWO	3 THREE	4 FOUR	5 FIVE	6 SIX	7 SEVEN	8 EIGHT	9 NINE	10 TEN
----------	----------	------------	-----------	-----------	----------	------------	------------	-----------	-----------



 HEAD hoved hoofd tête cabeza	 EYE øje oog œil ojo
 HEART hjerte hart- cœur corazón	 LUNG lunge long poumon pulmón
 VAGINA vagina vagina vagin vagina	 PENIS penis penis pénis pene

The following sections have been designed to help you communicate any pains, symptoms you are experiencing or any medication you have taken when speaking to a medical professional. You can either point or mark the relevant boxes, describing your symptoms quickly and easily using the Medical Diagnosis Interpreter (MDI).

HOW TO COMMUNICATE

Communicating in a four-step process, let us start by going to section E or the areas of pain to begin

Step 1 - Please go to the numbers bar at the top of section E, where you can either point or tick (✓) the number of pains you are experiencing. One for a single area of pain, two for the second pain and so on



Step 2 - When ready to describe your first or only pain, you can either point or tick the region of the body (front or back) or specific body parts where the pain is located. When you have finished highlighting all of the areas, you can either point to the stop or next marker if you have more than one pain. Both markers can found at the top right-hand side of the page



Step 3 – Next, you will need to indicate how long you have been experiencing the pain. You do this by selecting the duration marker, followed by the minutes, hours or days markers (for example, 10 + minutes). If you are trying to describe multiples, such as 30 minutes, you could point to the ten marker three times (e.g., 10 plus 10 plus 10), followed by the minute marker



Step 4 – Finally, we will highlight the pain level on a scale from 1 to 10. If you are suffering multiple pains, go back to the beginning of section E, select two from the number scale to describe the subsequent pain and so on.








You will follow a similar process for symptoms (section F) and any drugs/medication taken (section G). In the medication taken section, you will also be required to use the numbering system to describe measurements, such as 1 + 2 + thousand + mg, which would represent one 2000mg tablet)

Important: During an emergency, you must convey areas of pain, symptoms and any drugs or medication you have taken quickly and efficiently. If a pain, symptom or drug/medication is not listed, write it within the relevant 'other' box, remembering to use BLOCK CAPITAL letters. Providing any information that is not listed helps the medical professional to look it up and translate the terms quickly to form a diagnosis

1 ONE	2 TWO	3 THREE	4 FOUR	5 FIVE	6 SIX	7 SEVEN	8 EIGHT	9 NINE	10 TEN
en een un uno	to twee deux dos	tre drie trois tres	fire vier quatre cuatro	fem vijf cinq cinco	seks zes six seis	syv zeven sept siete	otte acht huit ocho	ni negen neuf nueve	ti tien dix diez

PAIN	smerte pijn douleur dolor	HOURS	time uur heure hora
SYMPTOM	symptom symptoom symptôme síntoma	WEEKS	uge week la semaine semana
MEDICATION	medicin geneesmiddel des médicaments medicación	MONTHS	måned maand mois mes
DURATION	varighed looptijd durée duración	HUNDREDS	hundrede honderd cent cien
MEASUREMENT	måling meting la mesure medición	THOUSANDS	tusind duizend mille mil
MINUTES	minut minuut minute minuto		

-  Danish (da)
-  Dutch (du)
-  English (en)
-  French (fr)
-  Spanish (es)