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Unit 4: Activity 4: Listening Comprehension

Hello everyone, and welcome back to our online clinical nursing module. I'm Nurse Instructor Elena. Today, we are exploring how modern hospital departments operate and how nurses interact with essential medical equipment throughout a typical shift.

When you walk into a major hospital, it can initially feel like a maze. However, every facility is carefully structured to balance emergency care, diagnostic testing, and long-term treatment. Let's trace a patient's journey to see how these departments and tools interconnect.

Our journey begins in the Emergency Department, or ED. This is the main gateway for acute care. As a nurse in the ED, your primary duty during intake is triage. Triage is the rapid process of assessing incoming patients to determine clinical urgency. A patient presenting with minor cuts remains in the waiting room, while someone with severe chest pain or traumatic injuries is immediately rushed to an acute treatment bay.

If a patient's condition is life-threatening, they are transferred directly to the Intensive Care Unit—the ICU. The ICU is a specialized high-acuity environment where patients require continuous, invasive monitoring and advanced life support. At every ICU bedside, you will operate a multiparameter patient monitor. This essential device continuously measures and displays vital signs: heart rate, blood pressure, electrocardiogram rhythms, and arterial oxygen saturation, or SpO_2 . If a patient experiences severe respiratory failure and cannot breathe on their own, we connect them to a mechanical ventilator, which delivers precise oxygen volumes directly into their lungs.

Once patients stabilize, they are moved to general inpatient medical or surgical wards. Here, nurses handle daily recovery care, wound management, and medication administration. Precision is critical on the ward. To administer intravenous fluids, vasopressors, or antibiotics safely, nurses use smart infusion pumps and syringe drivers.

These devices allow us to set exact flow rates in milliliters per hour, dramatically reducing the risk of dosage errors.

Despite careful monitoring, a patient's condition on a general floor can deteriorate rapidly. If a patient experiences a cardiac arrest, calling a code blue brings the mobile crash cart directly to the bedside. Every ward crash cart is standardized and checked at the start of every shift. It contains emergency resuscitation drugs, airway management kits, and an Automated External Defibrillator, or AED. Applying the defibrillator pads to the patient's chest allows the device to analyze cardiac rhythm and deliver a precise electrical shock to reset lethal arrhythmias like ventricular fibrillation.

Finally, clinical units cannot function without diagnostic support departments. The Radiology Department uses advanced imaging equipment—such as digital X-rays, CT scanners, and MRIs—to help physicians identify internal bleeding, fractures, or tumors. At the same time, the Clinical Laboratory analyzes blood, tissue, and fluid samples. To send urgent blood samples from the ward to the lab without leaving your patients, modern hospitals rely on a pneumatic tube system. Nurses simply load the sample into a padded capsule, enter a location code, and air pressure transports the capsule through the hospital walls directly to the lab within seconds.

Mastering these department workflows and feeling confident with medical technology is what enables us to deliver safe, effective, and life-saving patient care every single day.