

**'Talking Pictures'**  
**SPANISH**

This product is **NOT** designed to replace the service of an Interpreter. For an interpreter, please contact your local Health Care Interpreter Service. SWSAHS ph: 9828 6088

[AHS-7390]

**TIENE DERECHO DE PEDIR UN INTÉRPRETE, O LLAMAR A UNO/A POR TELÉFONO  
USTED MISMO/A**

**YOU HAVE THE RIGHT TO ASK FOR AN INTERPRETER OR TELEPHONE ONE YOURSELF**

**¿NECESITA UN INTÉRPRETE?  
DO YOU NEED AN INTERPRETER?**

**YA VIENE EL/LA INTÉRPRETE  
AN INTERPRETER IS ON THE WAY**

**¿QUIERE QUE YO LLAME POR TELÉFONO A SU FAMILIA/AMIGOS?  
DO YOU WANT ME TO TELEPHONE FAMILY/FRIENDS?**

**SÍ  
YES**

**NO  
NO**



**INTÉRPRETE  
INTERPRETER**



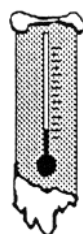
**RAYOS-X  
XRAY**



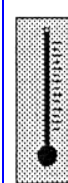
**ENFERMERA  
NURSE**



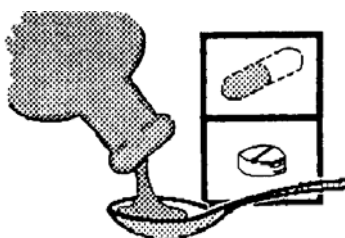
**MÉDICO  
DOCTOR**



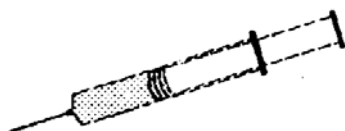
**FRIO  
COLD**



**CALOR  
HOT**



**MEDICACIÓN  
MEDICATION**



**INYECCIÓN  
INJECTION**



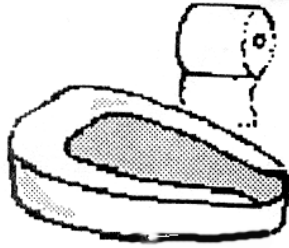
**AUDÍFONO  
HEARING AID**



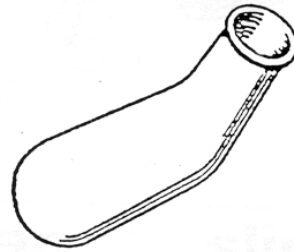
**GAFAS, LENTES  
GLASSES**



**INODORO,  
RETRETE  
TOILET**



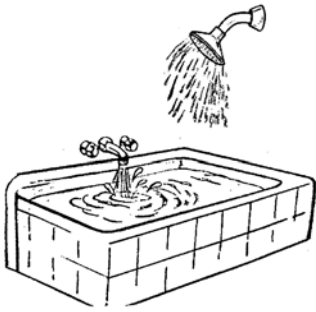
**CHATA  
BED PAN**



**BOTELLA  
PARA ORINAR  
URINE BOTTLE**



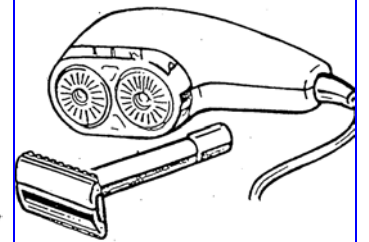
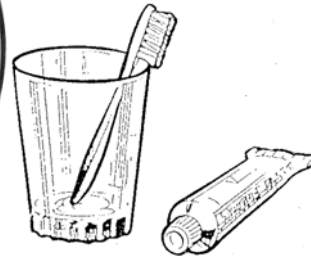
**LAVAR LAS  
MANOS  
WASH HANDS**



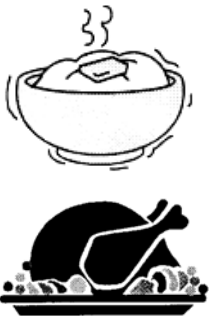
**DUCHA -BAÑO  
SHOWER/BATH**



**CEPILLAR LOS DIENTES  
BRUSH TEETH**



**AFEITAR  
SHAVE**



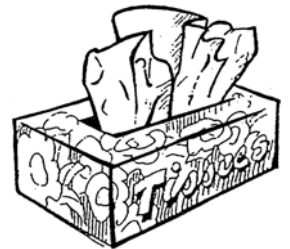
**COMIDA  
FOOD**



**BEBIDA  
DRINK**



**TE/CAFÉ  
TEA/COFFEE**



**TISÚ  
TISSUES**



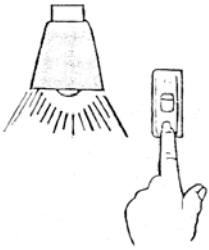
**VOLTÉESE  
TURN OVER**



**SIÉNTESE  
SIT-UP**



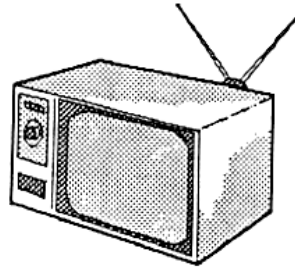
**RECUÉSTESE  
LIE DOWN**



**LUZ**  
**LIGHT**



**TELÉFONO**  
**TELEPHONE**



**TELEVISIÓN**  
**TELEVISION**



**CASA**  
**HOME**

**LUNES**  
**MONDAY**

**MARTES**  
**TUESDAY**

**MIÉRCOLES**  
**WEDNESDAY**

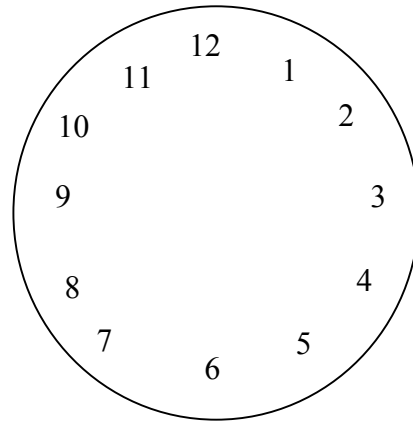
**JUEVES**  
**THURSDAY**

**VIERNES**  
**FRIDAY**

**SÁBADO**  
**SATURDAY**

**DOMINGO**  
**SUNDAY**

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20

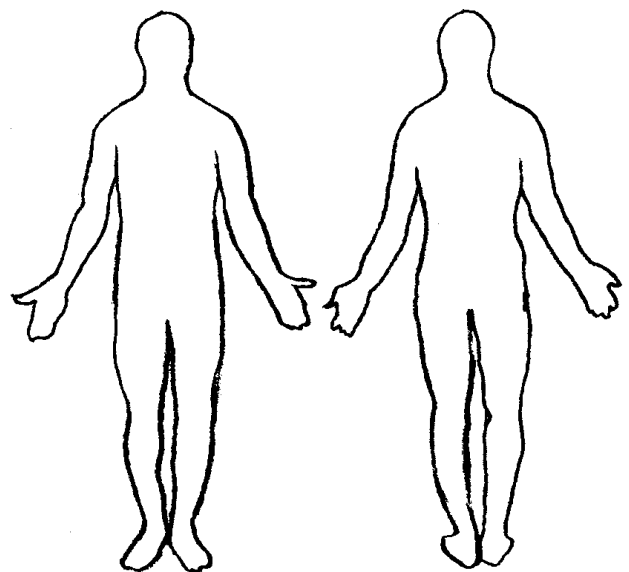


**¿SIENTE DOLOR?**  
**HAVE YOU GOT PAIN?**

**¿DÓNDE SIENTE DOLOR?**  
**WHERE IS THE PAIN?**

**¿NECESITA ALGO PARA EL DOLOR?**  
**DO YOU NEED A PAINKILLER?**

**SEÑALE DONDE SIENTE EL DOLOR**  
**POINT TO WHERE THE PAIN IS**



**DELANTE**  
**FRONT**

**DETRÁS**  
**BACK**

**A PARTIR DE AHORA NO COMA NI BEBA**  
**PLEASE DO NOT EAT OR DRINK ANYTHING FROM NOW ON**

**¿COMIÓ O BEBIÓ ALGO ESTA MAÑANA?**  
**HAVE YOU HAD ANYTHING TO EAT OR DRINK THIS MORNING?**

**¿COMIÓ O BEBIÓ ALGO DESDE LAS 10:00PM DE AYER?**  
**HAVE YOU HAD ANYTHING TO EAT OR DRINK SINCE 10PM LAST NIGHT?**

**A PARTIR DE AHORA PUEDE COMER Y BEBER**  
**YOU ARE PERMITTED TO EAT AND DRINK FROM NOW ON**

**¿PODRÍA USTED ORINAR?**  
**WOULD YOU PLEASE PASS URINE?**

**TENEMOS QUE HACERLE ANÁLISIS DE SANGRE**  
**WE NEED TO COLLECT BLOOD FOR TESTS**