***Welcome to Stillman Translations preliminary onboarding assessment!***

*This assessment has 5 sections. Make sure to follow the instructions and complete all the information needed.*

*The goal of this request is to analyze your performance and your potential.*

*Breathe in and out, and do your best. Hope we can count on you soon!*

**SECTION 1. INSTRUCTIONS**

Below you will find a special instruction for section 3:

\*Please make sure target text mirrors source format.

\*Normalize spaces.

**SECTION 2. GLOSSARY**

*In this section, you are required to complete this task:*

*\*Extract four terms (cells 1 to 4) from the text in Section 3 that you consider are worth being in the glossary.*

|  |  |  |
| --- | --- | --- |
|  | **Source** | **Target** |
| 1 | UNK | Información desconocida |
| 2 | CBC | Hemograma completo |
| 3 | CMP | Análisis bioquímico |
| 4 | BID | Dos veces al día |

**SECTION 3. TRANSLATION**

Please, add your sample translation below (between 300-500 words). Bear in mind this should be the best sample of your work!

|  |  |
| --- | --- |
| **Source** | **Target** |
| **CHRONIC MYELOGENOUS LEUKEMIA**  A report has been received from a Study Investigator concerning a 68-year-old Caucasian, Male subject, Height: 69.0 Inches; Weight: 196.0 Pounds, enrolled in study H8O-MC-GWDQ; A Randomized, Placebo Controlled Trial to Evaluate Cardiovascular Outcomes After Treatment with Exenatide Once Weekly in Patients with Type 2 Diabetes Mellitus.  The patient's medical history included percutaneous coronary intervention and alcohol use.  The patient's concurrent diseases included diabetic neuropathy, coronary artery stenosis, hyperlipidemia, dyslipidemia, non-smoker and type 2 diabetes mellitus.  **CONCOMITANT DRUGS**:  1. GLYBURIDE(GLIBENCLAMIDE): Dates: SEP-2013 continuing - Duration: UNK - Dose: 10 mg DAILY - Route: Oral  2. (METFORMIN HCL): Dates: 10-JUL-2012 continuing Duration: UNK - Dose: 1000 mg BID - Route: Oral  **History:**  Percutaneous coronary intervention; alcohol use.  **DESCRIBE REACTION(S) (including relevant tests/lab data)**  Concomitant medications included glibenclamide and metformin hcl for type 2 diabetes mellitus, acetylsalicylic acid for cardiac prevention, losartan for hypertension, ergocalciferol for osteoporosis prevention, insulin glargine for diabetes mellitus and tadalafil for erectile dysfunction.  The patient experienced severe chronic myelogenous leukemia (Preferred Term: Chronic myeloid leukemia) which started on 05-Nov-2014. The Subject has been following up with Oncologist. Patient showed presence of significant leukocytosis on routine CBC 22-Oct-2014. The patient underwent bone marrow aspiration 05-Nov-2014 that showed results consistent with clinical diagnoses of Chronic Myeloid Leukemia (CML). Patient started on Sprycel 100mg and also given allopurinol 300 mg for 21 days during initial phase of treatment. The CBC, CMP and uric acid weekly checked.  Study product therapy was discontinued.  The Patient was started on ferrous sulfate. With regard to his diabetes, patient was currently taking Lantus along with Humalog to cover his lunch with 6-8 units plus an additional 4 units with dinner to avoid severe hyperglycemia. Patient had visit with oncologist 16-Jan-2015. Ferrous Sulfate increased to BID. | **LEUCEMIA MIELÓGENA CRÓNICA**  Hemos recibido por parte de un investigador el informe de un estudio acerca de un paciente caucásico de 68 años, de sexo masculino, estatura: 1.75 m, peso: 76.66 kg, inscrito en el estudio de tipo H8O-MC-GWDQ; se realizó un ensayo aleatorizado, controlado con placebo para evaluar los resultados cardiovasculares luego de haber aplicado una dosis de exenatida una vez a la semana a los pacientes con diabetes mellitus tipo II.  Por medio de la historia clínica del paciente, se pudo observar que el paciente consumía alcohol y fue sometido a una intervención coronaria percutánea.  Las enfermedades concurrentes del paciente comprendían la neuropatía diabética, la estenosis de la arteria coronaria, la hiperlipidosis y la diabetes mellitus tipo II.  **MEDICAMENTOS CONCOMITANTES:**  1. GLIBURIDA (GLIBENCLAMIDA): Fechas: SEP-2013 a la actualidad - Duración: ID (Información desconocida) - Dosis: 10 mg diaria - Vía de administración: Oral  2. METFORMINA HCl: Fechas: 10-JUL-2012 a la actualidad - Duración: ID - Dosis: 1000 mg dos veces al día - Vía de administración: Oral  **Antecedentes:**  Intervención coronaria percutánea; consumo de alcohol.  **REGISTRO DE DATOS (incluyendo análisis relevantes/información de laboratorio)**  Los medicamentos concomitantes administrados son la glibenclamida y la metformina HCl para la diabetes mellitus tipo II, el ácido acetilsalicílico para la prevención de insuficiencia cardíaca, el losartán para la hipertensión, el ergocalciferol para la prevención de la osteoporosis, la insulina glargina para la diabetes mellitus, y el tadalafilo para la disfunción eréctil.  El paciente padeció de leucemia mieloide crónica, cuyo comienzo se registró el día 05-Nov-2014. El seguimiento del sujeto fue realizado por un oncólogo. Se observaron niveles significantes de leucocitos en el hemograma del paciente realizado el día 22-Oct-2014. El paciente fue sometido a una aspiración de la médula ósea el día 05-Nov-2014, los resultados obtenidos de este procedimiento fueron compatibles con aquellos de los diagnósticos clínicos de la Leucemia mielógena crónica (LMC). Se le suministró 100 mg de Sprycel y 300 mg de Alopurinol por el término de 20 días durante la fase inicial del tratamiento. Se realizaron semanalmente los siguientes análisis al paciente, hemograma completo, análisis bioquímico y de ácido úrico.  La terapia con medicamentos fue interrumpida.  Al comienzo del estudio, se le suministró al paciente sulfato ferroso. En lo que respecta a la diabetes, el paciente estaba tomando de 6 a 8 comprimidos de Lantus y Humalog durante el almuerzo, y además 4 comprimidos durante la cena para evitar la hiperglicemia severa. El paciente realizó una visita al oncólogo el día 16-Ene-2015. La dosis de sulfato ferroso aumentó a dos veces por día. |

**SECTION 4. QUESTIONS AND COMMENTS**

We also need to check your capacity to spot potential issues beforehand.

In the table below, please list your questions and comments in relation with this test:

1. Challenging sections from the source text or sections you are unsure of should be copied or inserted into the **Source Text** column.

2. Write your translation in the **Target Text** column.

3. Doubts and comments should be written in English.

|  |  |  |
| --- | --- | --- |
| Source Text | Target Text | Question / Comment  (in English) |
| […]Height: 69.0 Inches; Weight: 196.0 Pounds[…] | […]estatura: 1.75 m, peso: 76.66 kg[…] | Can we modify and translate the units, or do we have to translate them? |
| The CBC, CMP and uric acid weekly checked. | Se realizaron semanalmente los siguientes análisis al paciente, hemograma completo, análisis bioquímico y de ácido úrico. | Can we translate acronyms (CBC and CMP) by writing the full name, or do we have to include the spanish abbreviation between brackets? |
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|  |  |  |

**SECTION 5. REFERENCES**

In the table below, please list the reference material you have consulted to carry out this test.

1. Please introduce the **Reference source** (including publisher and full title as appropriate) in the first column.
2. Specify if your reference source is general or specific. If specific, clarify which term or section the reference covers.

|  |  |
| --- | --- |
| Reference Source | General / Specific (Term) |
| Idea Translations project – Clinical Trial - CHRONIC MYELOGENOUS LEUKEMIA | General |
|  |  |
|  |  |

Thanks!