

# Caduceus



Publication of the Medical Division of the American Translators Association



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## LETTER FROM OUR ADMINISTRATOR

### Dear medical division members,

The Medical Division's Caduceus team is presenting another edition of the Caduceus Newsletter. Once again you can find some excellent articles from some great authors in this edition. The Caduceus Editorial team has worked so hard to choose the best for you and we hope you enjoy it. You can always send us an article to [caduceusnewsletter@ata-md.org](mailto:caduceusnewsletter@ata-md.org) or [divisionMD@atanet.org](mailto:divisionMD@atanet.org), and we will be happy to help with editing and share it with your colleagues. We also welcome volunteers to join the Caduceus Editorial team as new editors or to help with layout. Medical interpreters are welcomed to write for the "Interpreter's Corner" column which will appear in upcoming editions. I encourage the medical interpreters to contribute and write to us, we love to be your voice. I have no doubt that you have lots of great stories that can be shared with your colleagues without violating any HIPAA rules or regulations. For this edition, we have devoted this space to present impressions from ATA63 written by few Conference attendees, including a first-time attendee. They have shared their honest experience and memories with you, hoping it helps, whether you are debating going to the next year's conference or not, or if you missed this conference and would like to know how it was. You can also find ATA63 pictures from the MD events and Distinguished Speaker sessions on our website.

The Medical Division Leadership Council members are excited to continue to serve in 2023 and improve the division. We are planning to add new programs and activities for our members. We are going to continue hosting our networking events and add the "after-hours meet-up" sessions for our members. Join us to hear from colleagues around the globe, talk about the latest news in translation and interpreting, meet new friends and explore new options in your career. I highly recommend that you join the next MD after hour meet-up and enjoy a friendly chat with your colleagues in the upcoming long winter nights and find new friends, build relationships, and hear about potential work opportunities.

The MD webinar team is stronger now with the addition of a new member, and we are hoping to bring you some fantastic webinars and wonderful speakers in 2023. You can always email us and share about your favorite speaker, and we will do our best to reach out and invite them to present and will work to add them to the list of speakers. Furthermore, there are several openings in the MD social media moderation team, please join us if you have a little bit of time to volunteer and help this team. We would love to have your expertise in expanding our presence on social media, since there is plenty of room to improve. You can email me at [divisionMD@atanet.org](mailto:divisionMD@atanet.org) to volunteer. The Medical Division website is being updated routinely with the latest division news, so make sure you check the website often during the week. In addition to our wonderful webmaster, we now have an excellent medical sources coordinator who recently joined our team.



In addition to our wonderful webmaster, we now have an excellent medical sources coordinator who recently joined our team. You may have attended her presentation at the ATA63 Conference. She had a great presentation on vaccines that was highly rated by attendees. Check out the Medical Division website in December to get to know her better and check the website routinely thereafter for the updates that she is going to post for you on the medical sources page <https://ata-md.org>.

Lastly, I would like to wish you all a wonderful holiday season full of joy and health. The Medical Leadership Council is looking forward to hearing from you to plan accordingly to create a productive 2023 for our members

*Yasha Saebi*

## UNDERSTANDING FORMAT AND CONTENTS OF DIFFERENT MEDICAL TEXT GENRES



*Luciana Ramos is a professional translator and interpreter with a long-standing presence in the Language and Technology industry. Based on her sound linguistic background, broad experience in every link of the translation and localization supply chain, her specialized knowledge of language technologies, and her research skills, she offers a comprehensive array of professional services: scientific translation, software localization, telephone/on-site interpreting, professional training and coaching (for translators, vendor managers and project managers), as well as consulting on business organization and processes, Quality Assurance, and investments on technology.*

*Luciana Ramos holds a Master's Degree in Biomedical Translation from the Universitat Jaume I in Castellon, Spain, and a Technical-scientific and Literary Translator Degree for English into Spanish, and Consecutive and Simultaneous Interpreter Degree, both issued by Instituto de Enseñanza Superior "Olga Cossettini" Rosario, Argentina; 1992-1996. She has also been certified by the American Translators Association for English into Spanish Translations. With more than 26 years in the language services industry, Luciana Ramos has delivered courses, workshops, and presentations at national and international events, and has published articles related to translation in several specialized magazines.*

Being aware of the wide variety of medical content and formats allows us to design the most appropriate translation strategy that best meets the intended functions of the translation. It allows us to be critical and analytical when considering alternatives and defend the choices made in an informed manner. It also opens our minds to different authors' ways of thinking, writing, and arguing in order to build bridges between scientists, physicians, students, patients, and the general public from different cultures. The spectrum of communicative situations in the field of medical translation is markedly broad, so it covers numerous textual genres: newspaper reports, advertisements, information brochures and pharmaceutical industry brochures, among many others. Texts that belong to the same genre share formal conventions: structure, length, terminology, phraseology, tenor, etc. As translators, we often have to rewrite the same message for different readers, either because we are assigned a set of documents created for different purposes and addressed to different audiences, or because the client or initiator needs the target text to respond to a different communicative function than the source text. Therefore, analyzing different textual genres is a highly valuable tool for specialized translators both as a self-training resource and as a guide for drafting a text whose message can be communicated as effectively and usefully as possible.

### Challenges - Understanding medical notions

Factual understanding is key in any translation process, particularly when it comes to medical translation. In general, we tend to think that terminology is the most challenging issue. Even though it is not the only one, a great deal of the translation process consists of detecting and solving terminology problems, including: synonymy, polysemy, calques, eponymy, neologisms, lack of equivalence, and the way we approach translation is guided to a large extent by the target audience. All medical communication is based on a variety of changing pillars depending on the content and its environment, which shape the communicative product and play a fundamental role in an effective message rendering.

### Medical communication situations

The main communicative functions of medical translation may include:

- Dissemination of biomedical research among specialists
- Dissemination of the most relevant research in the media
- Education of health professionals in universities
- Patient education
- Approval of new drugs
- Regulation of all types of medicinal products
- Advertising of medicinal products and services
- Campaigns by institutions such as the WHO, in national and international contexts



And such communicative functions come from different sectors or fields, including:

- Biomedical research
- Health services
- Pharmaceutical laboratories
- Healthcare printing companies
- Governmental health organizations
- Non-governmental health organizations
- News media specializing in health issues

The combination of the different functions, contexts and participants of the content created generates overlapping areas between different texts that allow grouping the content by textual genre, i.e., texts that follow the same linguistic, context and cultural conventions. In each textual genre, the recognition of the discursive and lexical elements is key to achieve an adequate transfer into the target language.



The combination of the different functions, contexts and participants of the content created generates overlapping areas between different texts that allow grouping the content by textual genre, i.e., texts that follow the same linguistic, context and cultural conventions. In each textual genre, the recognition of the discursive and lexical elements is key to achieve an adequate transfer into the target language. The reading of specialized texts on the same topic (also called “parallel texts”) is useful to draw a broader terminology and conceptual network, enabling the translator to identify terminology hierarchies (for further glossary development) and to establish conceptual links between paragraphs and sections, spot descriptive, narrative, and argumentative structures, and recognize cause and effect relationships. The most frequently encountered biomedical genres that are part of our translation assignments include the following:

**Research genres**, such as review articles, case reports, meta-analysis, scientific editorials, etc. which...

- Are used by physicians and researchers working in hospitals, research centers, laboratories, and universities.
- Communicate findings and arguments.
- Constitute a primary source of information.
- Tend to be highly standardized.

**Professional genres** are created from the scientific community to members of such community, and include, clinical guidelines, standard operating procedures, informed consents, laboratory tests, medical questionnaires, medical terminology glossaries, manuals, medical records, disease classifications, medical devices software interface, to name a few. Among these, we can draw links of hierarchy or subordination to identify contents that feed each other and present similarities or contrasts, and linguistic features that constitute a valuable resource for medical training and term base creation.

**Educational genres**, intended for the public outside the scientific community, include Patient information sheets, Patient information leaflets, Dissemination articles, Medical encyclopedias, and many more.

**Commercial genres**, which add a different purpose to the content and may include advertisements, contracts, patient information leaflets (PILs), patents, etc.

Being aware of the different **genres** and being able of recognizing their textual markers and defining their communicative situation and purpose, enables us to perform a different translation task, sometimes mandatory due to diverse discrepancies between the source and target users and contexts, called **heterofunctional translation**. This is an increasingly frequent professional practice where we combine translation, medicine, and popularization, which consists of rewriting the source text by the translator, changing its content and purpose in order to fit a new audience profile and a different communicative nature. In such process, the translator changes the textual genre and, therefore, performs an interlinguistic and intercultural operation. Given the complexity of the process, we can conclude that if a translator is capable of transforming/translating texts that belong to genres with a high degree of specialization into texts that belong to popularization genres, the translator will undoubtedly be capable of carrying out equifunctional translations of texts for the general public. Translators are expected to have certain skills, like being knowledgeable of the following:

- The most frequently translated genres and the formal differences between them
- Form and function of medical terms
- Chemical, generic and brand names of pharmaceuticals
- Nomenclatures and international classifications
- Medical metaphors and images
- Acronyms, abbreviations and symbols
- Medical phraseology, especially in the target language
- Language varieties



Terminology is one of the main factors in the representation and transmission of specialized knowledge. Terminology density is, for example, a reliable index for establishing the degree of specialization of a given text. Hence, terminological precision and appropriateness is closely related to gender classifications. Some factors to consider include:

- Generic conventions, especially if there is divergence between the source and target language
- Collocation (e.g., nude mouse, the hairless experimental mouse, does not translate as \*ratón desnudo\*, but “ratón lampiño”)
- Shortened forms that may lead to mistranslations (“to scope”, as used in traumatology, to perform a procedure using the scope, such as an endoscopy, arthroscopy, etc.)
- Terminological variations, with special attention to polysemy, synonymy/false synonymy (asphyxia and apnea) and homonymy
- Register mismatch (e.g., black urine vs. melanuria)

Genre awareness also implies dealing with the diverse aspects of contextual communication and culture. In an attempt to define textual genre, translators should recognize the different types of audience readers, their motivations, expectations, and purposes in medical communication; perceive the differences between values and beliefs; and note the use or avoidance of euphemisms, for example, with body parts and their functions.

One of the most frequently translated documents in the life of a medical translator is the “**Informed consent**”. It is a two-purpose document meant to obtain the patient's consent to receive a treatment or procedure, and for the signatory to participate in a clinical study. It is based on the principle that the medical professional must inform the patient sufficiently for the patient to make a reasonable decision about a treatment. It is linked to the original article that will report the results of the clinical trial and to the trial protocol that describes it. As such, there are some aspects that make this document a particular genre, as opposed to the documents that inform it (protocol). For example:

Technicalities should be avoided to make it easy to understand.

Vocabulary and syntax should be appropriate for participant's age and educational background.

Informed consents as a genre offer a robust scaffold of regulations to rely on when making translation decisions and are governed by the principles of the Nuremberg Code and the Declaration of Helsinki.

For all text types, there are three linguistic variables of influence at the level of situational context (or register) according to functional grammar:

**Field**, which refers to the topic or the type of social activity a text is engaged in, for example: politics, sports, music, etc.

**Tenor**, which refers to the participants in the communicative act and the relationship between them, e.g., an interaction between students outside the class will be different from the interaction between the teacher and students in the classroom.

**Mode**, which refers to the communication channel and the role that language plays given that channel. Oral and written modes represent the most important channels of language, e.g., a letter to a colleague for a patient referral (written mode) will be different from a phone call to catch up (oral mode).

Some of the more specialized genres, such as original research articles, are more “internationalized”, but as we move along the continuum of medical communication, texts become more localized, and it gives rise to aspects to consider, such as:

- Weights and measures systems
- References to health and administrative systems
- Social norms regarding race, disability, gender, etc.
- Different degrees of formality, tenor
- Elements of popular knowledge, beliefs, etc.
- Degree of democratization of medical knowledge
- Differences between physician-patient relationships
- Average medical education of the population
- Status and prestige of the medical tradition
- Differences in basic notions that have to do with the senses (e.g.: on a functional scale, shoveling snow may not be a relevant example in certain climates to check how well the patient performs activities of daily living)

Another constituent of the translation strategy that can be defined in a more productive way when the textual genre has been identified is your choice of medical information sources, which may range from specialized glossaries, nomenclatures, classification of diseases and lists of drugs with patented and non-patented names, to parallel texts belonging to the broad spectrum of medical genres, online professional fora, medical databases, health directories, information on writing guidelines, etc. Consulting the appropriate sources of information for the research and glossary creation steps is vital for accuracy and time efficiency.

Medical translation is also affected by medical ethics and responsibility, and therefore validity and accuracy cannot be attained when neglecting aspects such as patient privacy. Ethical priorities differ based on the medical genre, as shown in the chart below, and should be considered in the target audience to mirror/adjust such priority.

Genre	Priority
Informed consent	Clarity, so that the patient can make a conscious choice.
Original article	Accuracy, so that the experiments can be repeated, and the argumentation can be followed in detail.
Patient information leaflet	Clarity, so that the patient can take the drug in a safe and effective way.
Questionnaires (evaluation tools)	Cultural relevance so that the questions are meaningful for patients in the target culture.
Clinical history	Cultural relevance so that the questions are meaningful for patients in the target culture Confidentiality so as to protect the patient's right of privacy Completeness and accuracy, so that health professionals in other locations have easy access to the history of the patients Used as evidence
Health campaign	Respect and empathy towards specific groups of patients, disabled people, members of ethnic minorities, etc.

To become a proficient medical translator, other skills apart from those related to language and writing and medical notions should be reinforced: communicative and cultural aspects play a key role in successful communication. And medical communication has its own dynamics among its stakeholders: biomedical researchers and healthcare professionals, patients, and the general public. This dynamic, which characterizes the nature of medical communication, can take two directions: *top-down* and *bottom-up* depending on the origin of the content - administrators, legislators, professors, pharmaceutical companies wishing to market drugs, health authorities seeking solutions to health problems in general, physicians wishing to improve disease treatments, patients reporting outcomes, etc. This generates the following classifications observed in texts of a same genre:

*Specialized vs. Popular* (technicisms decline as the degree of specialization, affecting choice of words: neoplasm vs tumor; mutation vs alteration; sepsis vs infection, etc.); *formal vs. Informal*; and *oral vs. Written*.

As mentioned above, participants and their communicative purposes are key elements for genre definition. In this sense, creating an audience profile is a recommended practice for medical translators, as the level of knowledge and experience of the target audience determines the degree of explicitness and the degree of explanation in the target text. Likewise, purposes and application of the information received, either to do things or find out about things, relate to genre-based linguistic conventions, as well as the reader's linguistic skills (command of the readers' own language), the reader's familiarity with specialized terminology (communicative barrier), reading context (physical and psychological conditions while reading the text) and broader cultural context (country, particular values and beliefs, organization of the healthcare system). Basically, all target audiences read for practical reasons, but the use of the information differs, as explained in the table below.

Reader profile	Use of information
General reader	Preventing disease
Patient	Treating a disease
Student	Becoming a health professional
Health professional	Implementing knowledge
Researcher	Advancing knowledge

It is important to ask ourselves certain basic questions that define our readers, such as who will read it, how much do they know about it, what do they need to know, and what will they do after reading the text.

There are some practical strategies that translators can deploy to elaborate a target content that is appropriate and equivalent in terms of genre's conventions, such as the use of etymological information. Greek and Latin etymology is a productive system for forming medical terms and understanding them mainly by means of prefixes and suffixes. Etymological knowledge allows us to infer key characteristics of medical terms and dissect terms for de-terminologization purposes if needed. There are also other strategies, including converting a nominalization into a complete sentence; transforming passive sentences into active sentences; exploring anaphoric relationships and making lexical substitutions. Exploring links between sentences to identify cause and effect relationships, for example, can lead to a more appropriate syntax for a particular genre. Translators are also responsible for activating a particular meaning of a polysemic term, pursuant to each communicative situation.

There are some general principles from a genre perspective that may be used as a roadmap regarding the target text:

- Consistency with the source text in terms of factual information
- Internal consistency so that the information follows a logical order
- Truthfulness and accuracy
- Legibility so that the reader can process the information effortlessly
- Clarity (easy to understand)
- Grammatical and syntactic correctness
- Rhetorical and stylistic appropriateness in line with the situation and the communicative context

As a general rule, there are some basic criteria to observe when translating research genres to the general public or patients:

- Expand information by making key meanings explicit
- Shift understanding from the author to the reader
- Adjust tone for more personalized communication
- Simplify structures and syntax
- Use de-terminologization of complex terms
- Use verbs instead of nouns or complex noun phrases

To conclude, these are some practical reminders for composing your target text taking genre conventions into account:

- Explore parallel texts and follow standard translations of prefabricated expressions in highly conventionalized genres
- Compare and contrast medical regulations and documentations
- Draw lines with texts of a higher hierarchy that may inform the working text
- Be aware of culture and communication standards in the target context, not only terms and concepts
- Pursue the appropriate communicative purpose
- Consider if a heterofunctional translation is more appropriate
- When dealing with titles, ensure that the title contains the key words relevant for the target text, not the source
- Always write with the target purpose and reader in mind, and apply appropriate strategies and procedures to solve potential problems
- Produce a coherent translation that meets the target text cultural norms, and adjust emphasis and hedging to reflect the author's attitude toward the reader and the content in an appropriate fashion based on target audience





## IMPRESSIONS FROM THE ATA63 CONFERENCE

One of the ATA's most important events is its **Annual Conference**, which is held every year between mid-October and early November in person in a U.S. city. After the virtual conference in 2020 and the hybrid conference in 2021, the ATA announced that it would continue hosting only in-person conferences due to the high cost of the hybrid modality. Regarding the location, usually, one year it is held on the east coast, one year in the middle of the country, and another year on the west coast. More information about the Annual Conference and the cities and conference dates through 2025 can be found on this page: <https://www.atanet.org/ata-events/annual-conference/>

### Cost of Attending an ATA Conference

Attending an ATA Annual Conference is a huge investment. In addition to the cost of admission, you should also consider the cost of lodging. Annual Conferences are always held at an upscale hotel, and although there is a discount for booking as a conference attendee, the cost per night is high. Many colleagues share a room to minimize this cost. For this reason, the ATA offers a pre-conference forum for attendees to communicate with each other for advice, room sharing, or carpooling. In addition, each attendee must cover the cost of travel to the conference city, food, and personal expenses.

### Conference Program

So far, I have attended 3 conferences, two virtual (in 2020 and 2021) and one in-person (in 2022). The conference officially kicks off Wednesday evening with a Welcome Celebration. Although this is the start of the conference, additional, optional courses are taught on Wednesday morning, known as "Advanced Skills & Training (AST) Day". These courses last three hours and cost extra, and attendees can earn extra continuing education points.

On the other hand, if you are attending the conference for the first time, there is an event called "Buddies Welcome Newbies", which also takes place on Wednesday just before the Welcome Celebration. Basically, a "buddy" is a person who has attended several ATA Conferences and knows how they work.



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*Currently, Paula serves as the Assistant Administrator of the ATA Medical Division.*

A "newbie" is a person attending the conference for the first time. Being a buddy does not mean having years of experience in the industry, and being a newbie is not being a beginner. It is simply about the number of conferences you have attended. For example, since 2022 was my first time attending in person, even though I knew more or less how conferences worked, I signed up as a newbie.

Thursday is the first day of the conference, strictly speaking. The day starts at 7:00 a.m. with breakfast, which is an excellent time to meet colleagues, as there are usually large tables of 10 people. I recommend that you sit at a table where you don't know anyone and actively participate in the conversations. Usually, people ask you what you do, and they talk about industry-related topics, but this is not always the case. Also, on Thursday morning, there are a few events before the educational sessions begin. The first one is the Opening Session, where the ATA President and President-elect, along with the Board members, formally welcome everyone. Then there is the Annual Meeting of Voting Members. It is not mandatory to attend any of these meetings or all sessions; each attendee may participate in whatever he or she wishes.

At mid-morning on Thursday, the first set of sessions begins. There are usually about 15 sessions per hour. On Thursday, there are usually three sets of meetings with lunch and coffee breaks. Coffee is included, but lunches and dinners are at the expense of each attendee.

On Friday and Saturday, the conference also begins with breakfast. On Friday, the Annual Meeting of All Members and the Annual Awards Presentation take place, and there are usually four sets of sessions.

Saturday is the longest day in terms of sessions, with five sets. At the end of the day, there is a Closing Session where we say goodbye and the winners of some prizes are announced. This year, six ATA webinars were raffled off among people who had completed the session surveys, a hotel night among those who had stayed at the conference hotel, and a ticket to the 2024 Conference in Miami among all attendees. Finally, after the Closing Session, there is a Closing Reception on Saturday.

## Networking Events

In addition to the breakfasts, sessions and receptions, there are other networking events organized specifically for this purpose. One of these is the Buddies Welcome Newbies event, which I mentioned earlier and which takes place on Wednesday before the start of the conference. From Thursday through Saturday, every morning before breakfast, there are Zumba and Mindful Movement groups. On Thursday afternoon there is usually an event called "Stronger Together Networking", where simple questions are answered at the tables, for example, telling about a personal or professional achievement in the last year. On Friday there is usually an event called "Brainstorm Networking", where we brainstorm common situations that may occur during our careers and try to come up with answers in small groups. In the evening there is another meeting called "After Hours Café". Finally, on Saturday there is an event called "Speed Networking" and two more events after the Closing Reception: one is the AFTI Game Night, where board games are played, and the other is the Conference Dance Party.

The events organized by the various ATA divisions are also good opportunities to meet colleagues who do what you do. These lunch or dinner events involve an extra cost.

## Job Fair

At the The Job Fair companies, such as translation agencies, have tables with advertisements about job openings or professionals they need.

## Continuing Education Points (CEPs)

ATA-certified translators earn 10 CEPs for attending an ATA Annual Conference. In addition, those with interpreting credentials from other associations or institutions also earn points for attending the ATA Conference, which is all explained on the Continuing Education section of the ATA's website.

## My Experience

Attending an ATA Annual Conference in person was a unique experience. I think it's worth attending at least once, not just because of the sessions, but because of all the opportunities to meet colleagues and get together with other people we already know. While every training opportunity is positive, no matter at what stage of our career we are in, I think that to attend a conference of this type, and mainly because of the significant investment it requires (especially for those who travel from far away), it would be ideal to attend after we have been in the industry for some years and have defined areas of specialization or interest. Of course, it is not the same for a student or a beginner translator living in the United States as it is for someone living, for example, in Argentina or Uruguay.

In my opinion, you can get more out of this conference and networking when you have a certain background. The ATA Conference is huge and can be overwhelming. For those who are studying or just starting their careers, I recommend starting by attending local conferences and events since they are smaller. For example, the first time I attended a conference, I was still a student, and I attended one in Cordoba, Argentina, which was an excellent experience to learn about different possibilities in the industry and what these events are like.

## Tips

- To attend an ATA Conference, you need to prepare yourself. Bring business cards with your contact information.
- Participate in as much networking as you can. The people you meet may be the ones who can help you when you need something, they can recommend you to clients, they can be your clients or even the ones you partner with to work, and, believe it or not, you can also be of help to them.
- Be willing to chat and talk about what you do, forget about being shy! (This is from someone who, until a few years ago, didn't feel comfortable speaking in public). The reality is that they are all colleagues just like you who at some point might have gone through a similar situation to yours, who may know a tool that may be useful to you or who you can help with something you didn't even think you had to offer.
- If you can, stay at the conference hotel. It is expensive, but it is worth it because from the time you get up until you go to bed, you will have activities there and meet people in the corridors or in the elevators. To reduce costs, it is ideal to share a room with someone else.
- Lastly, avoid always being with the same people or with the people you know to give the opportunity to others who can become great colleagues.



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*She is a graduate of the San Francisco State University Legal Court Interpreters Program, and the Paralegal Program. She holds a BS in Industrial Engineer from the Central American University in Nicaragua, and a Business Administration Degree from the Central American Institute of Business Administration in Nicaragua, her native country.*

*Carmen has worked as a freelance Spanish Interpreter and Translator in the San Francisco Bay Area for over fifteen years,*

*having professional experience interpreting in different settings in the State of California. She has been an interpreter trainer for more than five years. She is also certified by the American Translators Association. She is a Licensed Trainer of The Community Interpreter ©, a program developed by Cross Cultural Communications (CCC).*

The ATA Conference every year is a wonderful opportunity to meet many colleagues in a very short time, to find new opportunities and developing areas in our profession, and to peek at where our industry is headed. Even though I have been an ATA member since 2011, I started attending the conference continuously about four or five years ago. It had generally been a good experience for me, but this year it was different.

Maybe because we are in a post COVID 19 era, I think we, the participants, were really motivated to attend in person again, as well as eager to practice our networking abilities once again.

This time it was easier for me to talk to more people than ever at the conference, and I enjoyed the fact of having participants and speakers from different countries like Spain, Argentina, among others.

I had not visited Los Angeles in the past eight years, so this time I discovered this megacity one more time. I could see the beauty of the largest city in the state of California, enjoy visiting the contemporary of art museum, The Broad, but what I took delight in doing was visiting the magnificent branch of the Los Angeles Central Library, situated between hotels and majestic sky-high buildings. The Conference, held at The Westin Bonaventure Hotel & Suites, only one block away from the library, has impressive views of the city, that I am sure we, the ATA63 attendees appreciated it very much.

Being a Medical and Court Certified Interpreter and an ATA Certified Translator from English into Spanish, I found the conferences and workshops very helpful for my professional development. This time, after the conference, I have new ideas to use different tools and technical skills for translation and interpreting, including basic knowledge to understand and get a grasp of graphic design for our freelance and small businesses.

This was the first time that I decided to attend one of the Division Dinners and chose the Medical Division for this purpose. It was very exciting because being part of the group that night helped to come across new colleagues and hear about their experiences and to share mine. That made me feel committed to continuing being part of the ATA family.

I can add that the food was great, the weather was so nice, the views were impressive, the skyscrapers so beautiful, the conferences and workshops so informative and inspirational... to say it in three words: a great experience!





Today marks exactly four weeks after the conference, and as I prepare to write a summary of my experience at ATA63 in Los Angeles, I cannot overlook the fact that for many of us who are on this side of the globe, it is time to acknowledge the bounty in our lives, and it is here where I want to express my deepest appreciation to ALL the conference organizers for the labor of love they did at ATA63. A sincere thank you to our ATA current president and president elect, and every single member who contributed to a great in-person conference after almost a two-year-hiatus. For me, attending this conference was two-fold. In previous years my focus was always on gaining knowledge of new skills, practices, protocols, state, or federal laws that could improve my interpreting skills. My focus has shifted. I am slowly transitioning toward translation work more than interpreting. Also, I chose to celebrate a major milestone birthday reaffirming my continued interest in learning and advancing in our profession, what a great way to kick-off a brand-new year of life than attending ATA63, right? YES, I am still alive and thriving!

This time by mid-year I decided that I was going to attend ATA rain or shine, of course, mindful of the ongoing and never-ending COVID precautions. When it comes to our profession this yearly investment is worth it. It is expensive, and it takes a bit of planning. I have a great friendship with a talented colleague, court and medical interpreter, and ATA certified translator in the Bay Area, who is as enthusiastic as I am to learn and to continue improving our skills. My colleague and I join efforts almost every year, we travel together, and split conference expenses. If you find somebody in your area who may share similar interests as yours, it may be worth planning and partnering as early as nine months in advance. This year, I attended as many translation-oriented sessions as I could, but as we know, the number of sessions and the overlapping schedules make it difficult to attend as many sessions as one would like. Also, since my interest is in translation, this year, I joined the translation division, too.

I met Marina Ilari, from the Translation Company Division, and I attended their dinner event, which it gave me an opportunity to meet other members of the division.

As part of my new focus, I also attended several interesting sessions, some in English, some in Spanish, ALL had very good speakers. On the Spanish side, I attended the Spanish Language Division's Distinguished Speaker, Maria Garcia Negroni's presentation on Inclusive Language in Spanish and Subjective Positioning; it was a great presentation. Another great presentation was Maria Baker's Frequent Errors in Healthcare Interpreting and Translation. Her session was informative and with a great sense of humor. Luciana Ramos's Efficiency and Success in the Life of a Post-Editor. As a newcomer to the translation field, I have a lot to learn, and Luciana's session was very enlightening. Another interesting presentation was the Medical Division's Distinguished Speaker, Pablo Muguerza. His presentation, A 2022 Medical Terminology Update, was an excellent reminder of new terms that have appeared since COVID's take over.

Another presentation for a newcomer to translation was the presentation given by three vendor managers from their perspective as language services provider. The presentation What do Translation Vendor Managers Look for? Expertly moderated by the awesome Winnie Heh, of course, the presenters were nothing less than the best, Ludmila Golovine, Magda Jagucka, and Nyman Zoe gave clear insight and realistic expectations for new translators.

*Alcira Salguero, CMI (Spanish), received a solid bilingual education growing up in Mexico City. Her bachelor's degree in hotel management led to a career as a purchasing specialist in industries ranging from tourism to engineering to pharmaceuticals.*

*In 2007, Alcira made a career change to medical and legal interpreting. She holds a certificate as a Legal Court Interpreter from San Francisco State University. She is a member of ATA/NCTA/IMIA and CHIA. She is currently attending the certificate program in translation, through the University of California in San Diego Extended Studies.*

*She is an avid learner and takes part in many different continuing education programs which allows her to keep her national certification active as a medical interpreter. She attends the yearly CHIA and ATA conferences to remain informed of new developments, practices, studies, and policies in the industry.*

*She holds a position as a staff interpreter with California Pacific Medical Center/Sutter Health in Northern California, where she has worked since 2009 up until now. When, she is not studying or interpreting, she enjoys cooking, meeting friends, traveling, and doing a bit of moderate exercise, light Zumba "moves." Her goal in the pursuit of happiness, she plans to retire partially, she wants to live in Paris for a year to improve her French and continue to see the world for as long as she is able to do it. Of course, spending quality time with her family is certainly part of the overall plan.*



I attended the Translation Division dinner and the Medical Division dinner. Both were great social events! In fact, this year it was my honor to organize the medical division dinner, and again, it was a great reminder to be thankful to celebrate a big milestone birthday while still continuing to learn, live, and love what many of us do and being members of the ATA organization! See you in Miami (wink, wink). *Have a wonderful holiday season!"*



### Caduceus Team

***Andreea Boscor / Luz Miranda Valencia / Yasha Saebi***