

References

1. Shalon, van Tine. 2024. *Explaining the Seventies Malaise through 'F' Is for Family*. URL: <https://www.shalonvantine.com/secondasfarce/2019/3/24/explaining-the-seventies-malaise-through-f-is-for-family>.
2. Kocincova, Lucia, Baisa, Vit, Jakubicek, Milos, Kovar, Vojtech. 2015. "Interactive Visualizations of Corpus Data in Sketch Engine". *Proceedings of the Workshop on Innovative Corpus Query and Visualization Tools Nodalida*, 17–22.

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STRUCTURAL AND SEMANTIC FEATURES OF TACTICAL MEDICINE TERMINOLOGY (BASED ON TCCC GUIDELINES)

In present-day conditions of high-intensity combat operations, tactical medicine is crucial for preserving the lives and health of military personnel. In this regard, developing a unified and functional terminology is a priority to ensure clear and effective interprofessional and interlingual communication. The terminological system of tactical medicine represents a large number of concepts related to physiological conditions, injuries, diagnostic signs, medical interventions, and means of care.

Semantics is a subfield of linguistics focused on the lexical meanings of linguistic elements, including individual words, phrases, and variations in meaning. Semantic groups are expressed through paradigmatic relationships among phrases that share a common meaning. The structural model of the conceptual content of terms is defined by the division of meaning into simpler semantic components. The semantic structure of names, along with their common and distinctive semantic features, is established through component analysis of dictionary definitions and the application of oppositions [2].

The term system of tactical medicine is distinguished by the diversity of objects and concepts of professional activity named in the medical terminology. According to the current linguistic rules, the medical dictionary names things, situations, processes, and their properties. The basic component in such substantive terminological units is the nominative singular noun, and the dependent terminological units are expressed by genitive nouns. The most semantic meaning is given to the nominative case, which indicates a certain property, such as that expressed by a genitive name [4]. Examples of Noun + Noun were found in guidelines, such as *Hypothermia Prevention, Junctional Tourniquet, Chest Decompression, Blood Transfusion, Primary Assessment, Bone Fracture, Chest Injury, Limb Amputation, Tactical Evacuation, Tissue Necrosis, Respiratory Arrest, Tracheal Deviation, Security Perimeter, Skin Pallor, Circulation section, Oxygen saturation, Tension pneumothorax, Wound cavity*.

The Medical Procedures and Interventions group includes terms that refer to direct medical actions or organisational and evacuation measures: *Hypothermia Prevention, Junctional Tourniquet, Chest Decompression, Blood Transfusion, Primary Assessment, and Tactical Evacuation*. Such terms convey dynamic processes or interventions that are crucial to stabilising the wounded in combat.

The terms in the Wounds and Trauma category describe injuries that occur as a result of hostilities: *Bone Fracture, Chest Injury, Limb Amputation, Wound Cavity*. These lexical units record the result of an external impact that violates the anatomical integrity of the body.

The Body Functions and Conditions group includes terms that describe physiological states, their disorders or pathophysiological consequences: *Tissue Necrosis, Respiratory Arrest, Tracheal Deviation, Skin Pallor, Oxygen Saturation, Tension Pneumothorax, and Circulation Section*. Such terms are key for diagnosing, assessing the severity of the condition, and determining the further course of action.

Complex Trauma States. This separate category includes terms that describe the severe consequences of combat injuries or complications of injuries: *Tissue Necrosis, Limb Amputation, Tracheal Deviation, and Tension Pneumothorax*. Those terms are critical diagnostic indicators and require an immediate response.

The next popular model is Adjective + Noun. This adjectival-substantive model is based on the syntactic relation of agreement and is constructed on a genitive comparison. To a noun term denoting a generic concept, a definition is added that specifies its meaning (Bulyk-Verkhola, Tehlivets, 2020). These are the examples which were found in guidelines: *Additional wounds, Atraumatic scissors, Battle Drills, Blunt trauma, Cardiopulmonary resuscitation, Definitive airway, Disposable syringe, Hemorrhagic shock, Inflammatory processes, Massive Hemorrhage, Nasal airway, Occlusive dressing, Peripheral pulse, Respiratory depression, Severe injuries, Unconscious casualty, Circulation section, Direct pressure, Distal pulse, Hemostatic dressing, Radial pulse, Rescue blanket, Soft stretchers*.

Medical Procedures and Interventions. This category covers terms that describe medical procedures, interventions, and protocol steps in care: *Cardiopulmonary resuscitation, Definitive airway, Direct pressure, Circulation section, Hemostatic dressing, and Occlusive dressing*. These terms represent key actions that ensure vital body functions or control bleeding on the battlefield.

The Critical States and trauma group contains terms related to injuries of varying severity: *Additional wounds, Blunt trauma, Severe injuries, Blunt trauma, Hemorrhagic shock, and Unconscious casualty*. The first component performs a qualifying function, specifying the type of injury or its intensity.

Body Functions and Conditions. This category includes terms that describe physiological parameters, pathological conditions and their complications: *Respiratory depression, Peripheral pulse, Distal pulse, Radial pulse, Unconscious casualty, Hemorrhagic shock, Inflammatory processes*. Adjectives indicate the location, condition, nature of changes or threat to the vital functions of the organism.

The Medications and Medical Devices group includes terms that refer to instruments or devices for emergency care: *Disposable syringe, Nasal airway, and Definitive airway*. The terminology in this category reflects the requirements for sterility, disposability, and specific use.

The analysis confirms that the lexical structure of tactical medical terminology is governed by a high degree of formal regularity and semantic density. The dominant compound models Noun + Noun and Adjective + Noun facilitate the formation of precise and unambiguous terms essential for rapid communication in high-stress environments. These syntagmatic constructions reflect various semantic relations, including qualificative, procedural, anatomical, and causal-functional dependencies between components. The proposed semantic classification of terms into thematic fields such as Medical Procedures and Interventions, Body Functions and Conditions, Wounds and Trauma, and Medical Devices

reveals the systematic organization of the lexicon and its alignment with the functional domains of tactical medical practice. The analysis of componential relations enhances our understanding of how terminological economy and clarity are achieved within professional discourse.

References

1. Bulyk-Verkhola, S. Z., Tehlivets Yu. V. 2020. "Analitichnyi sposib tvorennia muzychnykh terminiv ukrainskoi movy". *Vcheni zapysky TNU imeni V. I. Vernadskoho*. Serii: Filolohiia. Sotsialni komunikatsii, 8–12.
2. Butkovska, O. S. 2016. "Strukturno-semantychni osoblyvosti terminiv sotsiolingvistyky v ukrainskii, polskii ta anhliiskii movakh", PhD diss. Lviv. nats. un-t im. Ivana Franka. Lviv.
3. Kindrys, A. M. 2021. *Strukturno-semantychni osoblyvosti anhliiskomovnoi viiskovoi terminolohii ta sposoby yikh vidtvorennia u perekladi ukrainskoiu movoiu (na materialy serialu SEAL Team «Morski kotyky»)*. Kyiv.
4. Fetsko, I. M. 2014. *Strukturni modeli skladenykh terminiv iz komponentom «muzei»*. Lviv. URL: <http://science.lpnu.ua/uk/terminologiya/vsi-vypusky/visnyk-no-7912014/strukturni-modeli-skladenykh-terminiv-iz-komponentom-21> (date of access: 25.04.2025).
5. TCCC Guidelines (Ukr/Eng). TCCC – kurs taktychnoi medytsyny. Tactical Combat Casualty Care. 2024. URL: <https://tccc.org.ua/en/guide/tccc-guidelines-2021-ukr-eng> (date of access: 26.04.2025).

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УКРАЇНА У ДЗЕРКАЛІ НІМЕЦЬКОМОВНИХ ПЕРЕКЛАДІВ: ДИНАМІКА КУЛЬТУРНОЇ РЕПРЕЗЕНТАЦІЇ ЗА ОСТАННІ 20 РОКІВ

Переклад художніх творів виконує не лише комунікативну, але й культурно-репрезентативну та імагологічну функцію. На думку А. Лефевра, будь-який переклад є формою переписування оригіналу, зумовленого ідеологією, поетикою та іншими чинниками цільової культури [6]. Таке переписування може адаптувати або трансформувати образ твору та автора відповідно до очікувань нової аудиторії. В межах полісистемної теорії І. Івен-Зогара перекладна література розглядається як система, що може займати центральну або периферійну позицію у літературному полі цільової мови [5]. Зокрема, переклади з „малих“ літератур (таких як українська) мовами з потужними літературними традиціями часто залишаються на периферії цільової літературної полісистеми. Лише за сприятливих умов – зростання зацікавлення, суспільного запиту – переклади стають помітнішими, зміщуючись до центру полісистеми, впливаючи на літературний дискурс.

Рецепція перекладеного твору багато в чому залежить від наявних у цільовій культурі стереотипів, медійних образів та попереднього інформаційного тла. У процесі інтерпретації іншомовної літератури читачі мимоволі співвідносять нові явища зі знайомими стереотипами і топосами. А тому переклад не тільки знайомить читачів з іншою країною та її культурою, але й формує певний образ цієї країни у свідомості іншомовної аудиторії, а перекладацька діяльність прямо чи опосередковано спрямована на подолання або підтвердження наявних уявлень про країну оригіналу та його літературу. При цьому зміна політичного та соціокультурного контексту може