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- Understanding how good communication benefits the patient interview

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Unit	Communication skills	Language focus	Texts
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2 The presenting complaint page 22	<ul style="list-style-type: none"> • Encouraging patients to express themselves in their own words • Taking an accurate history of the presenting complaint • Asking about the intensity and degree of pain • Using techniques such as facilitation, repetition and clarification 	<ul style="list-style-type: none"> • Using exploratory questions • Adjectives to describe types and intensity of pain • Patient speak: the suffix <i>-ish</i> • Patient speak: phrasal verbs with <i>up</i> • Facilitating the encounter: voice management 	<p>Reading</p> <ul style="list-style-type: none"> • <i>Patient-centred approach to history-taking</i> <p>Listening</p> <ul style="list-style-type: none"> • Using exploratory questions • Exploring the presenting complaint
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3 Past medical and family history page 32	<ul style="list-style-type: none"> • Requesting the patient's past medical history • Discussing the family medical history • Taking effective notes during an interview • Writing an effective patient note • Summarising and structuring the interview 	<ul style="list-style-type: none"> • Language to request the past medical history • Patient speak: common expressions to describe state of health • Expressions for signposting and summarising • Standard medical abbreviations 	<p>Reading</p> <ul style="list-style-type: none"> • <i>Past medical history: the components</i> • Patient note • Pedigree diagram <p>Listening</p> <ul style="list-style-type: none"> • Conference presentation: the pitfalls of taking the PMH. • Taking a past medical history • Taking a focused past medical history

Unit	Communication skills	Language focus	Texts
4 The social history and telephone consultations page 42	<ul style="list-style-type: none"> Enquiring about the patient's social history Employing good telephone etiquette Ensuring an effective telephone consultation Summarising and checking information 	<ul style="list-style-type: none"> Asking about lifestyle and environmental health Language for summarising and checking information Patient speak: common suffixes in medical terminology Expressions for consulting by telephone 	<p>Reading</p> <ul style="list-style-type: none"> <i>Telephone consultations</i> <p>Listening</p> <ul style="list-style-type: none"> University seminar discussion on taking a social history Asking about occupational health Discussing lifestyle and environmental health Carrying out an effective telephone consultation
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DVD lesson 2: Taking past medical history, family history and carrying out the physical examination			
6 Giving results page 60	<ul style="list-style-type: none"> Explaining results in a way that patients can understand and remember Encouraging patients to express their fears and concerns Explaining medical terminology to a patient Giving a prognosis 	<ul style="list-style-type: none"> Language for giving a diagnosis Phrases used to organise information <i>do</i> for emphasis and confirmation Word stress for emphasis Language for explaining medical terminology Patient speak: colloquial questions for asking about prognosis Language of probability 	<p>Reading</p> <ul style="list-style-type: none"> <i>Jaundice</i> <i>Acute bronchitis</i> <i>Erythema nodosum</i> <p>Listening</p> <ul style="list-style-type: none"> Explaining test results Organising information
7 Planning treatment and closing the interview page 69	<ul style="list-style-type: none"> Explaining treatments to a patient Discussing options Describing benefits and side effects Advising on lifestyle Negotiating treatment Closing the interview 	<ul style="list-style-type: none"> How to negotiate a plan of action Language for making suggestions Phrases to explain advantages and disadvantages Patient speak: expressing likelihood Language for negotiating treatment 	<p>Reading</p> <ul style="list-style-type: none"> <i>The New Quit Guide, So You Want to Quit?</i> <p>Listening</p> <ul style="list-style-type: none"> Outlining a treatment plan Describing possible treatment plans for hypertension Negotiating treatment with the patient Advising on lifestyle changes
8 Dealing with sensitive issues page 77	<ul style="list-style-type: none"> Broaching sensitive issues without bias and remaining non-judgemental Reading and responding to patient cues Employing question techniques: CAGE Writing concise and accurate notes Updating the patient note 	<ul style="list-style-type: none"> Language to broach sensitive issues Identifying non-verbal patient cues Techniques for contextualising, reassuring and asking permission Patient speak: drug culture Ensuring specific and concise notes 	<p>Reading</p> <ul style="list-style-type: none"> <i>Reading cues</i> Letter of referral Questionnaire: <i>Know your drink</i> <p>Listening</p> <ul style="list-style-type: none"> Broaching sensitive issues. Discussing sexual and reproductive health Asking about alcohol consumption

Unit	Communication skills	Language focus	Texts
9 Breaking bad news page 87	<ul style="list-style-type: none"> Delivering bad news in a sensitive way Reassuring a patient or relative Showing empathy 	<ul style="list-style-type: none"> Patient speak: expressions showing level of understanding Softening the question Language to deal with emotions Patient speak: talking about current knowledge of condition Voice management when communicating bad news 	<p>Reading</p> <ul style="list-style-type: none"> <i>A time to listen</i> <p>Listening</p> <ul style="list-style-type: none"> Breaking bad news Preparing the patient for receiving bad news Dealing with emotions of an HIV patient Consulting with a relative by telephone Breaking bad news to a relative
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11 Communicating with the elderly page 102	<ul style="list-style-type: none"> Carrying out an effective interview with an elderly patient Showing sensitivity and respect to an elderly patient Communicating with depressed elderly patients 	<ul style="list-style-type: none"> Asking questions specific to the elderly Patient speak: collocations to describe conditions common in the elderly Language to show sensitivity Techniques for communicating with patients with hearing problems Simple choice questions 	<p>Reading</p> <ul style="list-style-type: none"> <i>Talking to the dying patient</i> <p>Listening</p> <ul style="list-style-type: none"> Visualising life as an older patient Interviewing an older patient Interviewing patients with sensitivity and respect Consulting patients with hearing problems Student presentation: tool for assessing the ability to live independently Dealing with a patient with depression Assessing a patient with mental issues
12 Communicating with children and adolescents page 112	<ul style="list-style-type: none"> Establishing and developing rapport with a child Reassuring a child Gaining a child's consent to be examined Explaining procedures to a child Responding to a child's verbal cues Communicating effectively with an adolescent 	<ul style="list-style-type: none"> Compliments for children Expressions to show empathy with <i>must</i> Language for reassuring a child Child-friendly instructions Patient speak: bodily functions and body parts Techniques for communicating with adolescents 	<p>Reading</p> <ul style="list-style-type: none"> <i>Now I feel tall: What a patient-led NHS feels like</i> <p>Listening</p> <ul style="list-style-type: none"> Interviewing young children and their parents Reassuring a young child Examining children and giving instructions Interviewing an adolescent patient
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Introduction

Who is *Good Practice* aimed at?

Good Practice is intended for qualified doctors and medical students with an upper-intermediate to advanced level of English who are looking to work in an English-speaking environment. Mirroring the increased emphasis on communication-skills training in medicine, this course aims to develop the language and interpersonal skills essential to the establishment and maintenance of rapport between doctors and their patients, thus enabling medical practitioners to carry out their duties in English more effectively and with greater confidence. *Good Practice* has been written in accordance with the Calgary-Cambridge observation guide*.

What aspect of medical English does the course deal with?

With reference to numerous medical communication experts and through exposure to authentic clinical scenarios, *Good Practice* demonstrates the impact of good communication on the patient–doctor relationship. The course will train you how to sensitively handle a range of situations, from taking a patient history, through the physical examination and describing treatment options, to breaking bad news. It will also prepare you for dealing with different patient types, including children and the elderly, as well as patient situations requiring more enhanced levels of sensitivity.

Medical vs. language content

While *Good Practice* does make use of medical communication models, and as a learner you will be encouraged to call on your medical expertise, it should be noted that the aim of this course is not to teach medicine and medical practices. Similarly, the trainer will act as facilitator and expert in the English language and communication skills, rather than expert in medicine (although some may be experts in both).

What are the aims of the course?

Good Practice focuses explicitly on the five components that make up communication:

- **Spoken communication skills:** enhancing your ability to use effective communication

strategies to repair or avoid possible breakdown in communication with your patient; encouraging use of patient-friendly language when giving instructions or discussing treatment options; and familiarising you with language commonly used by patients: euphemisms, jargon, language used by children, etc.

- **Non-verbal communication skills:** developing your awareness of body language to enable you to better read and interpret your patients' physical and emotional signs, as well as to better mirror your own verbal communication with appropriate non-verbal signs.
- **Active listening skills:** ensuring a successful interview through techniques that facilitate discussion, demonstrating that you are really listening to your patient and assimilating the information given and its relevance to an eventual diagnosis.
- **Voice-management skills:** improving use of intonation and word stress in order to build rapport with the patient, give encouragement and show sensitivity.
- **Cultural awareness:** widening understanding of cultural issues and the impact of your own cultural background on both your patient and the interview itself.

How is *Good Practice* structured?

- *Good Practice* is divided into three distinct sections:
 - 1 The *Introduction to communication* provides you with an overview of communication, highlighting its importance during the patient encounter.
 - 2 Units 1 to 9 take you through the kind of language and communication skills required to ensure you are able to carry out each stage of the patient encounter effectively.
 - 3 Units 10 to 12 offer the chance to consolidate and further hone these skills, putting them into practice within specific clinical situations and with particular patient types.
- Each unit ends with an extended role-play and progress check.
- Audio transcripts, as well as a complete answer key can be found on pages 137–176.

What is the approach of *Good Practice*?

Good Practice aims to develop the grammatical and lexical features of English, employing an approach that encourages you to discover the language and its properties for yourself. Language boxes interspersed throughout each unit highlight useful expressions, while authentic texts – medical journal articles, patient notes and doctor–patient dialogues – are used to introduce language and present the essential concepts of communication. Tasks draw on your personal and professional experiences as both doctor and patient. The extended role-play is a chance for you to consolidate and put into practice the skills covered in the unit, to observe and offer constructive criticism to your peers. A series of DVD-led lessons allow examination and analysis of non-verbal communication and voice management, as well as reinforcing those areas treated in the preceding units. In the DVD, roles are played by doctors and are non-scripted to ensure authenticity.

What are the special features of the Student's Book?

Think about ... sections: Allow you to reflect individually on your current knowledge of a given aspect of the patient encounter, or indeed the language used to carry it out, before tackling the target area; they also serve as a diagnostic for the trainer to evaluate your strengths and weaknesses.

Patient speak sections: Acquaint you with the language spoken by your patients – colloquialisms, drug-culture jargon, childhood expressions, etc. This important feature will aid you in deciding on the appropriate choice of language for a particular setting or audience.

Quotations from the experts: Ensure the link between theory and practice by making reference to experts in the field of medical communications skills.

Communication Skills boxes: Give you tips and hints on appropriate communication strategies.

Cultural Awareness boxes: Draw your attention to specific aspects of culture that could possibly cause misunderstanding and offer a forum for discussion.

Out & About boxes: Encourage you to further investigate the language by asking you to observe the way it is used in a particular context within your work or study environment.

Progress checks: Present you with the opportunity to reflect on the progress you have made within the unit.

How can *Good Practice* be used for self study?

- Depending on your goals, you can either follow the course in a linear manner or you may wish to use the Contents page to pinpoint areas you find particularly difficult – breaking bad news, dealing with hearing problems, etc.
- Whatever your goals or time constraints, working through the Introduction to communication (pages 8–13) will be highly beneficial.
- Make use of the audio transcripts, some of which also include the non-verbal communication aspects of communication.
- Refer to the answer key, which includes suggested answers to many open-ended exercises.
- Use the DVD and downloadable worksheets which demonstrate the more visual aspects of communication that you might otherwise not have access to, as well as acting as a reinforcement of the language skills taught in the course book.
- Do the roleplays with a colleague or friend (all patients at some time) and ask them for constructive feedback. Access to a webcam means you can record your role-plays and watch your performance later, this time taking the role of observer. Complete the relevant feedback table (found in the Teacher's Book or downloadable from the website), depending on your particular goals.
- Work through the downloadable worksheets, complete with full answer keys (see www.cambridge.org/elt/goodpractice) to build on your existing knowledge base of verbal communication and cultural awareness.
- Devise a glossary of 'Patient speak'; create a table which includes space for an example sentence and an indication of the context in which the example was spoken.

*Calgary-Cambridge observation guide

The Calgary-Cambridge observation guide is a tool used for teaching medical communication, which reflects current theory and research for the doctor–patient interview. The guide lists the tasks that a doctor carries out during different stages of the consultation and the associated communication skills required. It is derived from the work of S.M. Kurtz, J.D. Silverman and J. Draper:

- Silverman, J.D., Kurtz, S.M. and Draper, J. (2005) *Skills for Communicating with Patients*. 2nd ed. Radcliffe Medical Press (Oxford)