

RECEIVING THE PATIENT

UNIT 1

PART 2

Test 2

1. What does a good doctor do? (12)
2. What can determine the rest of the consultation?
3. How can the position of the seating influence the encounter?
4. What is the best distance between a Doctor and a Patient?
5. Write 4 main objectives for the initial contact

Checking the home task (Test 2)

▶ ANSWERS:

1. Is reputed to be one of the best
 - ▶ Gives enough time to explain about problems and treatment in details
 - ▶ Gives his patients assurance and encouragement, hope
 - ▶ Patients are not afraid to come back to the doctor for a follow-up
 - ▶ Listens carefully and thoroughly examines
 - ▶ Tells about the disease and treatment that he is going to give
 - ▶ Asks if a patient understands everything
 - ▶ Makes patient feel relieved and happily
 - ▶ Can see non-verbal cues from patients faces
 - ▶ Gives patients enough time to tell about their grievances
 - ▶ His management strategy is laid upon a strong foundation of good D-P relationship
 - ▶ Epitomizes good D-P communication
2. Greeting
3. success, failure, feel forthcoming, feel threatened
4. 90 cm - 1.5 m
5. Greet and obtain the address form, introduce and clarify the role, explain the purpose and agenda, obtain permission

Phonetic Drills

- ▶ Initial contact
- ▶ Foundation
- ▶ Relationship
- ▶ Undivided attention
- ▶ To greet
- ▶ Response
- ▶ In response to
- ▶ To achieve
- ▶ To elicit
- ▶ Appropriate(ly)
- ▶ To feel relaxed
- ▶ Welcoming tone
- ▶ To cause problems
- ▶ To shake hands
- ▶ Intense

Make up sentences with the words given above

Greeting and putting the patient at ease (verbal communication)

Ex. 6, p. 16 (1.3)

- ▶ Listen to the record and say,
how the doctors put their patients at ease.
- *Uses the first name with the patient*
- *Refers for further investigation*
- *Introduces himself*

Greeting the patient (verbal communication)

- ▶ Ex. 9a, p. 17(1.4)
- ▶ *Listen to the beginning of a patient encounter (1.4) and number the objectives the doctor uses.*
- ▶ (all the objectives)

Conveying Warmth (voice management)

- ▶ Ex.11a, p. 18 (1.5)
- ▶ Decide if the doctors sound welcoming or unwelcoming.
- ▶ Encounter 1, ver.A - welcoming, friendly
- ▶ Encounter 1, ver.B - unwelcoming, boring
- ▶ Encounter 2, ver.A - unwelcoming, not
- ▶
- ▶ Encounter 2, ver.B - welcoming, appologising
(intonation)

respondin

Asking the opening question (verbal communication)

- ▶ A doctor asks the opening question
 - to understand points the patient wishes to discuss
 - to understand the reason for the visit.
- ▶ So the doctor needs to require as much as possible information (not only Yes/No questions)
- ▶ *What would you like to discuss today?*
- ▶ *What brings you here today?*
- ▶ ***From the response , the doctor will be able to set the agenda for the interview***

Asking the opening question (Ex.15 a, p.19)

1. Your GP has explained the situation, but I wonder if you could tell me in your own words?
2. What would you like to discuss today?
3. Am I right in thinking you've come for baby routine check-up?
4. How are things with the [new tablets]?
5. What brings you here today?
6. Has there been any improvement since I saw you last?
7. How are you feeling today?
8. I have your notes from your doctor, but could you tell me what's been happening?
9. What have you come to see me about today?
10. So, how is little Betsy doing?

Answer Key for ex. 15a, p.19

- ▶ a 2, 5, 7, 9
- ▶ b 2, 4, 6, 7
- ▶ c 2, 4, 5, 6, 7, 9, 10
- ▶ d 2, 3, 5, 9, 10
- ▶ e 1, 2, 5, 7, 8, 9

Opening Statement (active listening)

- ▶ Opening statement *reveals the problems* a patient wishes to discuss.
- ▶ Interrupting the opening statement *means missing* complaints and symptoms and can result in *misdiagnosis*.
- ▶ Use active listening skills to *determine patient's cues* (looking upset, sounding frustrated)
- ▶ Use the opening statement in order *to set the agenda* for the consultation

Opening statement

- ▶ Ex.16a, p.19 (1.7)

Answer the questions:

1. Which opening question does Dr. Patel use?
2. What is Mr Mahoney's presenting complaint?
3. Was Dr Patel's opening question the most appropriate for this interview?

Answer Key for ex.16a, p.19

- ▶ 1. Any improvement in the arthritis since I saw you last?
- ▶ 2. Recurring headaches.
- ▶ 3. Not the most appropriate opening question, as Dr Patel doesn't allow for Mr Mahoney's own agenda. This type of question is limiting and is not encouraging the patient.

Setting the agenda

- ▶ Agenda is based on the main points of the opening statement.
- ▶ The doctor must decide on a structure to the encounter.
- ▶ Doctors should not forget to get the patient's agreement on the agenda.

- ▶ *Shall we start with ... and then we'll come to ...?*
- ▶ *..... If that's OK with you?*

Ex. 19, p. 20

- ▶ Read the opening statement by Mr Mahoney,
- ▶ underline the important points
- ▶ Explain your choice
- ▶ List the benefits of allowing the patient to make an opening statement.

Answer Keys for ex.19, p.20

- ▶ Enables the doctor to hear the patient's story
- ▶ Prevents the doctor from making premature hypotheses
- ▶ Reduces late-rising complaints
- ▶ The doctor doesn't have to think of the next question
- ▶ Gives the doctor an indication of the patient's emotional state
- ▶ Enables the doctor to observe more carefully and to pick up on verbal and non-verbal cues
- ▶ Allows patients time to clarify what they want to discuss

Piercing it all together

- ▶ Greeting the patient appropriately by:
 - ▶ introducing yourself and explaining your role
 - ▶ obtaining the patient's preferred form of addressing
- ▶ Establishing rapport by:
 - ▶ using a welcoming tone of voice
 - ▶ making the patient feel relaxed
 - ▶ using appropriate eye contact
- ▶ Asking an opening question that is suitable for the encounter
- ▶ Setting the agenda