

Dr Patient Communication





Learning objectives

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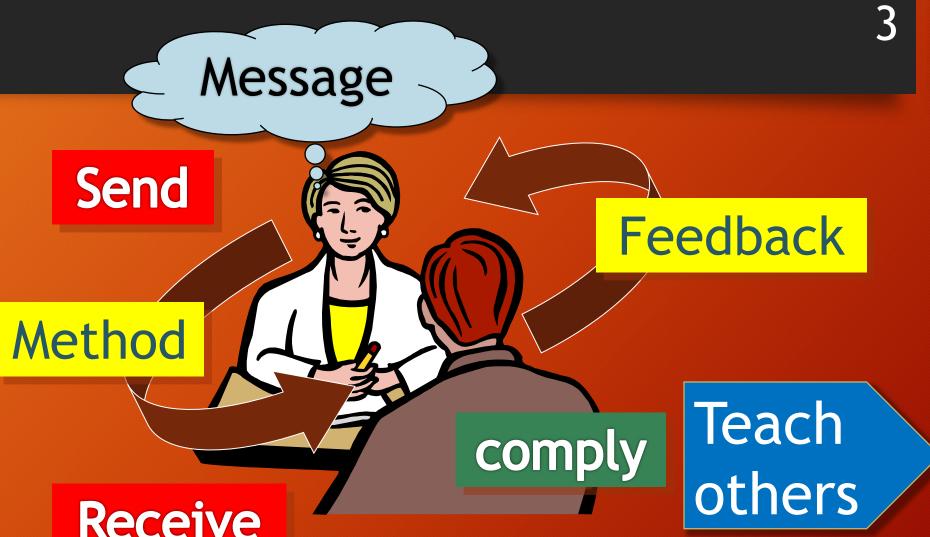
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- ☐ To understand Benefits of Dr-pat communication
- ☐ To discover communication mistakes
- ☐ To explain building patient trust & respect
- ☐ To differentiate between functional & dysfunctional communication





Receive

Communication Objectives

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Understanding

Knowledge

Behavior



- Builds up Pat-Dr relation
- Reduces uncertainty
- Decreases malpractice suits
- Prevents Pat-Dr violence
- Improves compliance
- Helps in management
- Accelerates healing
- Patient would teach others

Dr communication mistakes 6



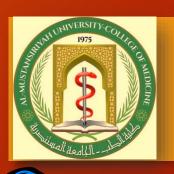
- NOT introduce himself.
- NOT explain actions.
- Neither listen, nor understand.
- NOT explore patient's feelings.:
- NOT explore social background.
- NOT let patient talk or ask.





- 1-Dr Self-awareness: realistic image
- 2-Awareness of patient: non-verbal communication & Active listening)
- 3-Awareness of place & time: quiet & privacy
- 4-Use functional communication.
- 5-Avoid dysfunctional communication.
- 6-Understand the patient's personality

Functional communication



- Non-verbal (التعابير): لغة الجسد (التعابير): eye contact, no separating barrier
 Active listening الاستماع: rephrasing,
- Active listening الأستماع: rephrasing, paraphrasing (Feedback to patient, show that you have listened.
- Sympathy العطف Feel sorry for the patient
- Put yourself instead of patient التعاطف Empathy



Dysfunctional communication

9



- Blaming: الملامة never blame your patient. Seen under stress.
- Placating: الأطراء is dangerous. Don't allow him to placate you, why?
- Super-reasonable: is providing facts with no personal element. No sympathy, no empathy.
- Irrelevant: each has his own concerns, nothing common.





- ☐Eye to eye
- □No barrier
- ☐Body language
- ☐Active listening
- ☐ sympathy

1'





- □No eye-eye
- ☐Busy Dr
- □No privacy
- □No awareness
- ☐No sympathy





- □Eye-eye
- ☐Body language
- □Privacy
- ☐ Sympathy





- □Eye-eye
- □No barrier
- ☐Body language
- □ Active listening
- □ Sympathy





