



PÉCSI TUDOMÁNYEGYETEM
UNIVERSITY OF PÉCS

Introduction to the Institute of Primary Health Care, Course information

Institute of Primary
Health Care



Institute of Primary Health Care

Address: Pécs, Rákóczi Str. 2. (Kórház Square)

Institute director: Dr. Ágnes Csikós, associate professor



Institute of Primary Health Care

Department of
Family Medicine

Department of
Hospice-
Palliative Care



Our slogan is: „One mentor – one student”

We have 136 tutors

5 counties







Magyarország első egy

1367

www.pte.hu

Our Courses

Obligatory courses:

- 1. Semester: **Introduction to Medical Communication**
- At the end of the 2nd Semester (June/July/August): **Summer practice of Medical Communication Skills in family medicine practice (1 week)**
- 10th Semester: **Family Medicine**
- 6th Year: **Family Medicine Practice (2 weeks)**

Student Researchers' Society Topics and thesis topics - examples

- Dementia screening primary health care. Supervisor: Szilvia Heim
- Survey of OTC medication consumption habits of families in the pediatric primary care practice. How do they decide? Supervisor: György Sándor
- Mental support of terminally ill patients. Supervisor: Ágnes Csikós
- Cancer patients' pain relief. Supervisor: Ágnes Csikós
- Who should decide at the end of life? Advance care planning – requests and decisions on life sustaining therapies Supervisor: Csilla Busa
- Symptom relief in patients with lung cancer. Supervisor: Emőke Papp
- Cancer: The relationship between the initial symptoms, the tumor stage and the clinical characteristics of cancer patients. Cancer patient pathways. Supervisor : Eva Pozsgai
- Palliatív Care and Hospice. Supervisor: Ágnes Csikós

Thematic of Introduction to Medical Communication

Lectures:



Introduction to Medical Communication – Practice part

The practice part has two blocks, both must be fulfilled!

Practice PART - 1. block

- 1x4 hours training with trained family doctors
 - Personal attendance required !
 - Groups and time according to Neptun
 - Stable groups in practices (no change)
 - Be there in time!
 - Attendance list will be checked!

Practice PART – 2. block

- Home assignment has to be prepared at home
- Essay writing **OR** role play presentation as described below
- 1x4 hours **homework/group work** in medical communication topic

- **Deadline: 01. November 2024.**
- **Essay must be sent to your own group leader**

A. Essay: Please write an example from your own life or environment about a medical communication situation which you were dissatisfied with (negative example) or consider an example to follow (positive example)!

- What happened?
- What worked / did not work in the situation?
- How could the situation have been solved properly?
- What could have been the reason for the behavior of the doctor / nurse / other health care staff?
- How did the situation make you feel?
- How might the patient have felt?
- Number of words: 400 words (+/- 10%).
- The essays will be checked randomly for plagiarism/AI.
- Conditions for returning the essay:

The following data has to be written in the "Subject" of the e-mail: "Introduction to medical communication essay"

In the EMAIL use complete SIGNATURE (FIRST NAME, SURNAME) AND NEPTUN CODE, GROUP NUMBER! Without the required details we will NOT accept your home assignment essays!

B. Group work and role-play in communicating bad news topic

- 2-4 people form a group
- All students in the group must participate in the preparation/writing/planning and presentation of the role play.
- Please, look for a film excerpt or excerpt from a literary work/ book on your own that reports bad news.
- Analyze this excerpt/movie scene/chapter in the group according to the SPIKES model.
- The result of the work is a jointly prepared max. 5-minute presentation that includes:
 - The link from where the original film comes from, at what minute the processed film clip can be seen OR exact indication of the literary work and chapter
 - Introduction: exactly what is the film/movie/book excerpt about, how many participants are included in the original situation, what was the behavior and reaction in the original scene, what was the result, what could have been another outcome?
 - Why did the group choose that film clip/book chapter?
 - Please, present a role play from the original movie/book scene and demonstrate how "bad news" could have been communicated well, according to the SPIKES protocol
 - Presentation can take place: Library of the Institute of Primary Health Care, GP practice based on the individual agreement with your group teacher.
 - **Time and date of presentation must be agreed on at least more than one week before the deadline.**
- **Deadline: 01. November 2024.**

- Please, send the essay by e-mail to your teacher!
- **Deadline: 01. November 2024.**
- Decision of the teacher: pass / fail.
- Teacher will notify students about their decisions until 15 November 2024 in case of essays; and on the spot, for students choosing to do a role play
- Only students who had **completed** (passed) **both practice blocks** will be admitted to the exam (online test).

Online test

Slides of lectures (PotePedia)

+

Recommended literature

**János Pilling: Medical Communication in Practice
(Medicina Book Publisher)**

Midsemester grade will be given based on the online test result.

Time of the online test: 29. November 2024. 3 pm

Place of the online test: later will be given



Summer practice of Medical Communication Skills in family medicine practice

- The practice with a GP (5 days/week x 6 hours/day x 1 week= 30 hours) can be completed.
- The practice can be completed abroad or at a Hungarian GP's office accredited by the University.
- The practice can only be completed at GP's office for adults.
- The practice may be completed in June, July or August.
- List of accredited Hungarian family practices is available at the homepage of the Institute.
- Prior consultation with the GP is required for the selected date
- A Declaration of Acceptance signed by the chosen GP must be uploaded to NEPTUN till the end of term-time

Summer practice of Medical Communication Skills in family medicine practice

- The practice can only be begun with the permission of the Head of Department.
- At a given time period, only one student can be present at the tutor's (GP's) office.
- In order to have the practice accepted, you need to complete and upload to NEPTUN 2 interview forms, as well as two evaluation forms (one from the student and one from the doctor).
- The required forms can be downloaded from the website of the Department of Primary Health Care.

In case of administrative questions, please contact our administrator:

Mrs. Csabáné Bodai

email: bodai.csabane@pte.hu



PÉCSI TUDOMÁNYEGYETEM
UNIVERSITY OF PÉCS

Introduction into doctor-patient communication

Agnes Csikos MD PhD

Department of
Primary Health Care

What is communication?

By definition (by Merriam-Webster)

- a process by which information is exchanged between individuals through a common system of symbols, signs, or behavior

- exchange of information

My goals today



- General introduction
- Importance
- Classification
- Where are you now and where are you going
- Scopes of communication



What makes a doctor good doctor?



from the patients' perspective

Our own study
general practice setup
100 patients case with new problems were reviewed retrospectively



- In 47 cases the final diagnosis matched with the working diagnosis established after **thorough history taking and direct questioning**
- In further 25 cases the final diagnosis was established by targeted physical examination
- The remaining 28 patients needed further (instrumental) scans and investigations



• What is important for the patient?

- Important by 72% : **personal doctor-patient relationship** (pays attention, listens to the patient, shows empathy)
- Important by 28%: **skills and knowledge** (competence, efficiency, time saving)

How good we think ourself at communication?

Tongue et al 2005



- 75 % of the surveyed orthopedic surgeons believed that they communicate satisfactorily
- Only 21% of their patients reported satisfactory communication with their doctors

Importance of communication skills in different specialities

Palliative care

Oncology

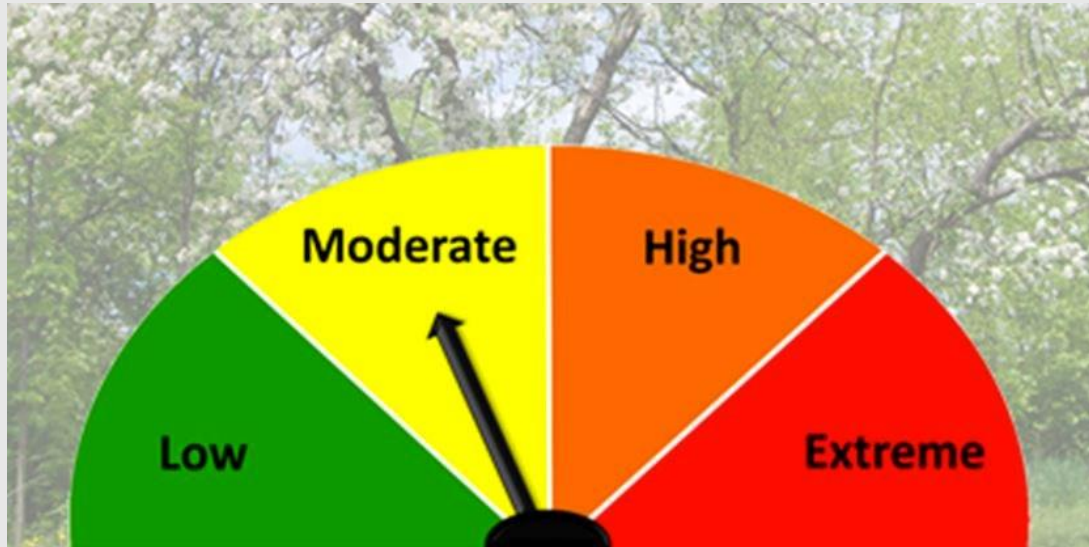
Psychiatry

General practice

Critical care



Importance of communication skills in different specialities



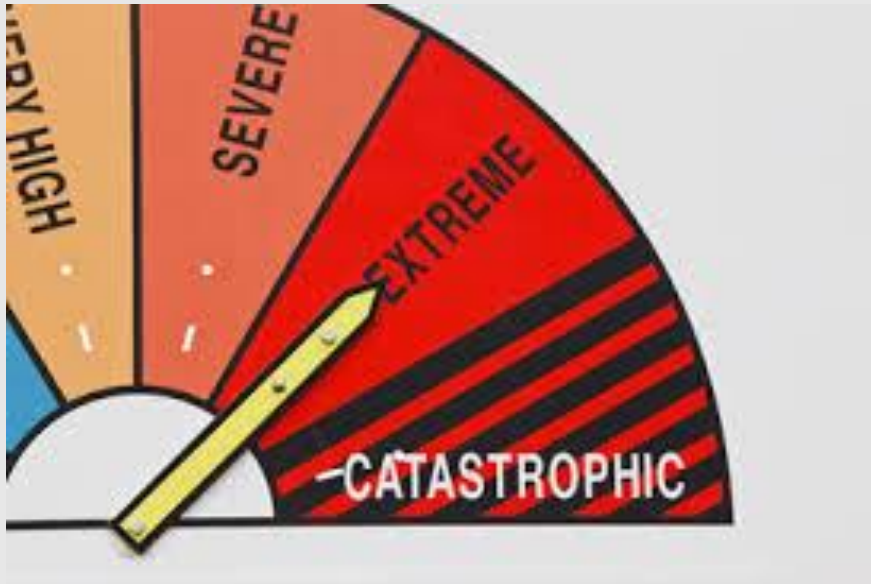
- Surgery
- Ear-nose-throat
- Obs/Gynae
- Internal medicine
- Neurology
- Respiratory
- Occupational medicine
- Public health

Importance of communication skills in different specialities



- Anesthesiology
- Radiology
- Pathology/histology
- Laboratory medicine

Importance of communication skills in different specialities



Becomes extremely important in all specialities if things go wrong!

Classification by channels

- Face to face





- Face to screen

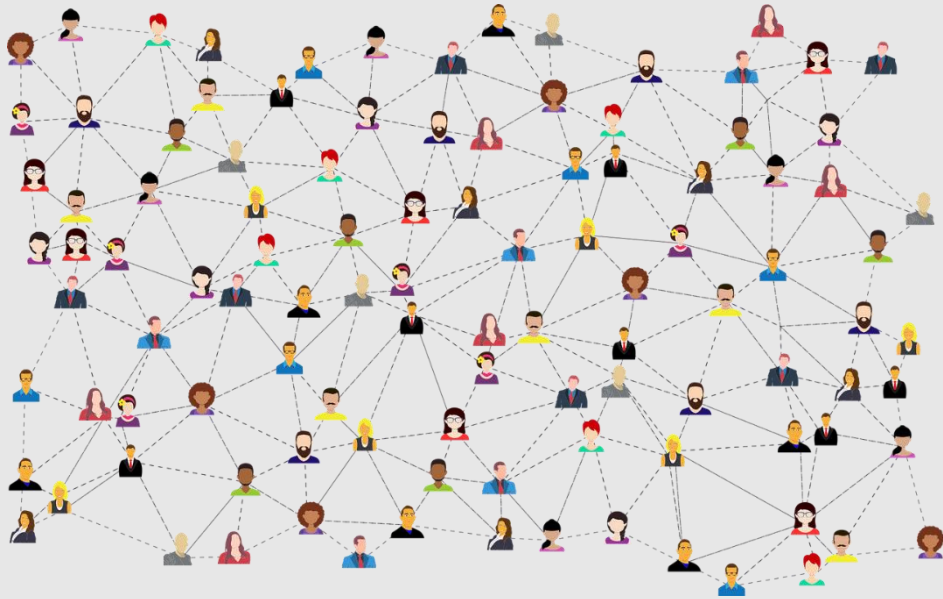


Into the microphone



Written



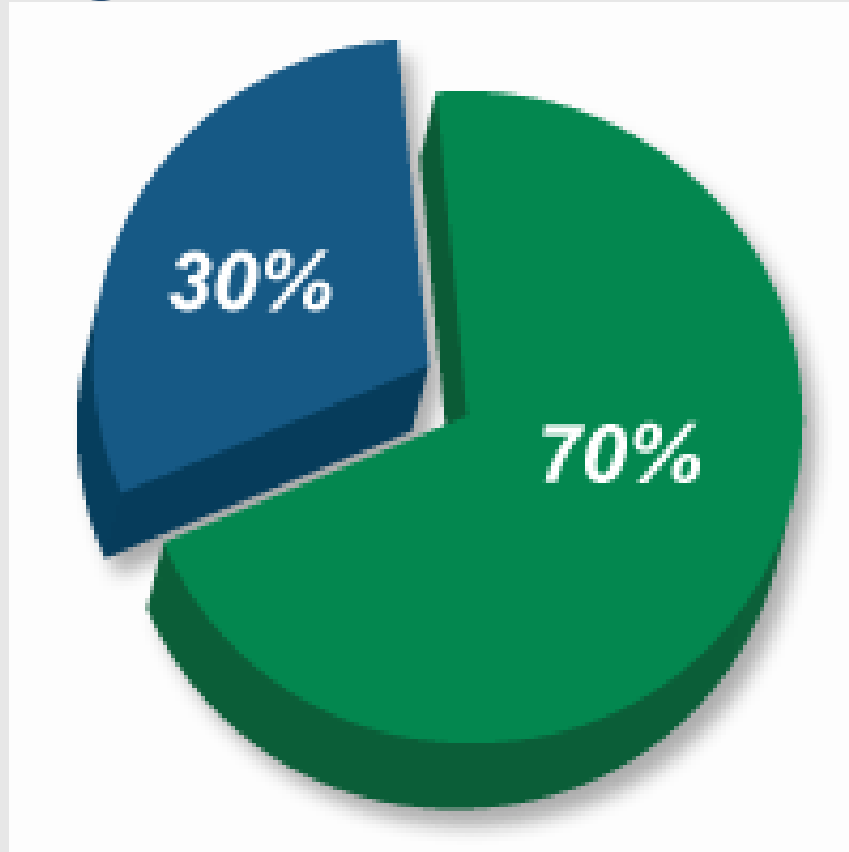


- Social media based



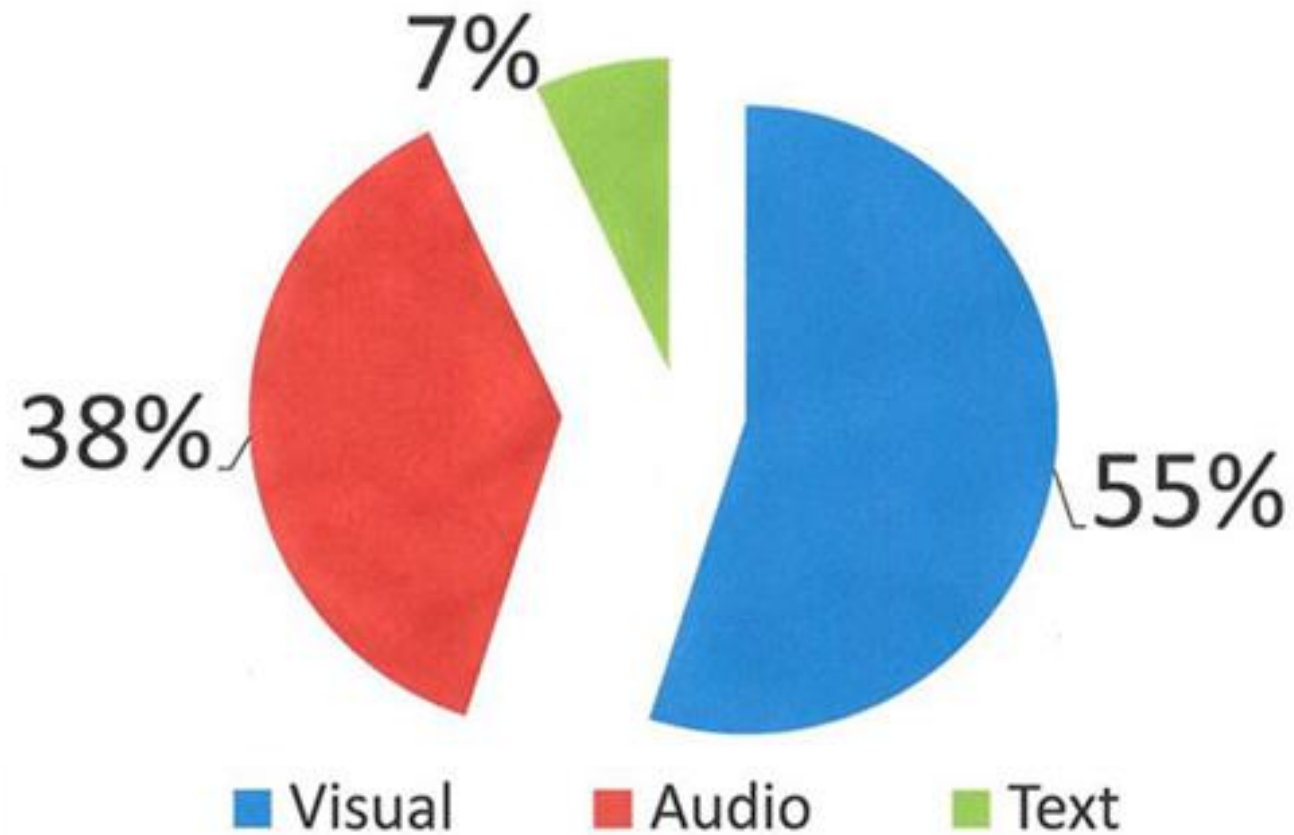
Types of expression, percentage of information changed

- verbal



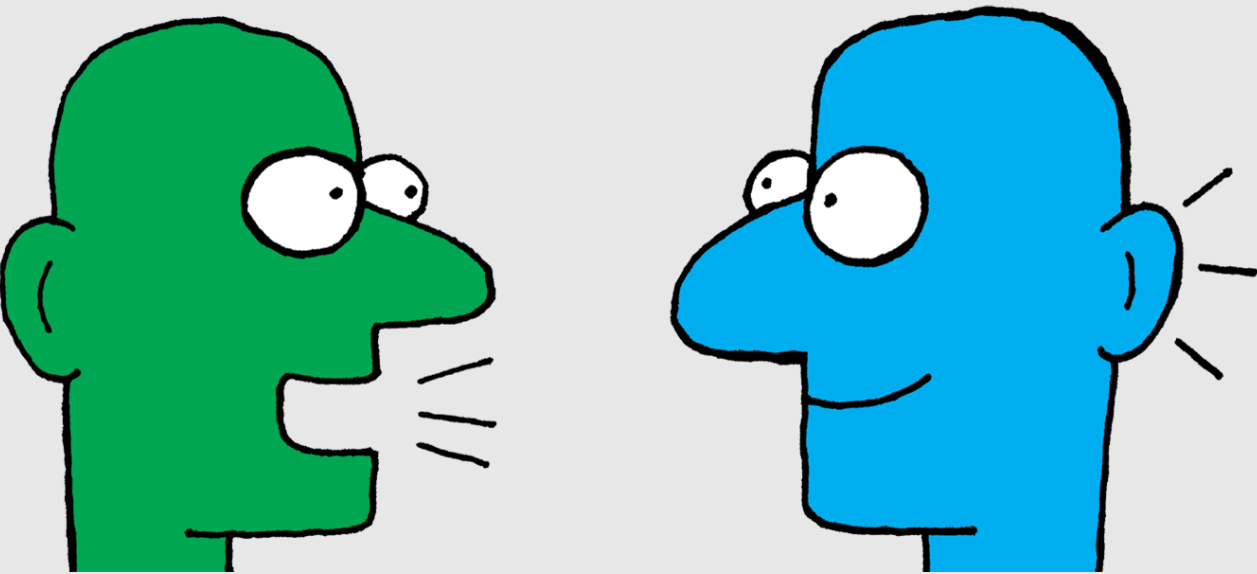
- Non - verbal

Impact of Communication



Source: UCLA study on how audience learns during a presentation

Elements of VERBAL communication



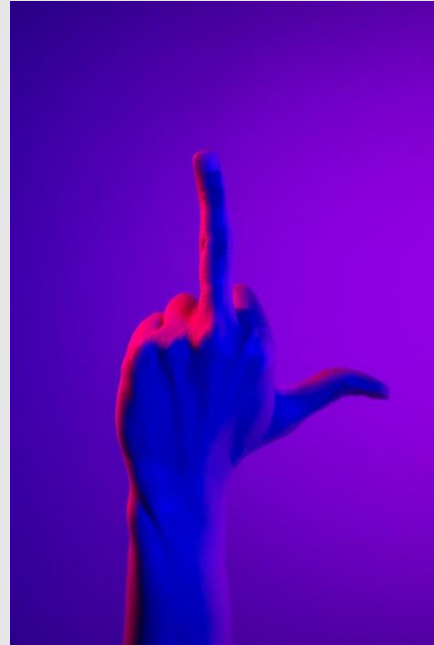
Simply the meaning of words
either written or spoken

Elements of NON-VERBAL communication



- facial expressions

Elements of NON-VERBAL communication



- gestures

Elements of NON-VERBAL communication



- Loudness or tone of voice

HOW TO READ BODY LANGUAGE

1. Raised eyebrows often signal discomfort.

2. If their voice goes up or down, they're most likely interested.

3. Eye contact shows interest – both positive and negative.

4. But if they look into your eyes for too long, they might be lying.

5. Crossed legs are usually a sign of resistance and low receptivity.

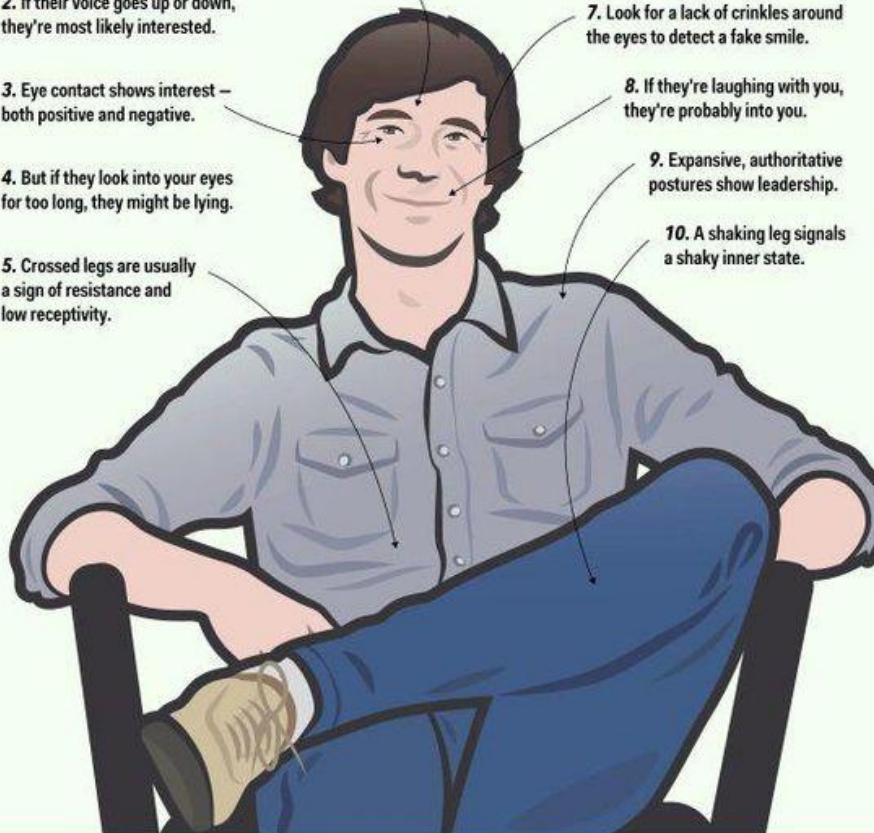
6. If they mirror your body language, the conversation is probably going well.

7. Look for a lack of crinkles around the eyes to detect a fake smile.

8. If they're laughing with you, they're probably into you.

9. Expansive, authoritative postures show leadership.

10. A shaking leg signals a shaky inner state.



BUSINESS INSIDER

Milo, Vadim; Business Insider

Elements of NON-VERBAL communication



- Body language

Elements of NON-VERBAL communication



- Personal space

Elements of NON-VERBAL communication



- Eye gaze

Elements of NON-VERBAL communication



- Touch

Elements of NON-VERBAL communication



- Appearance

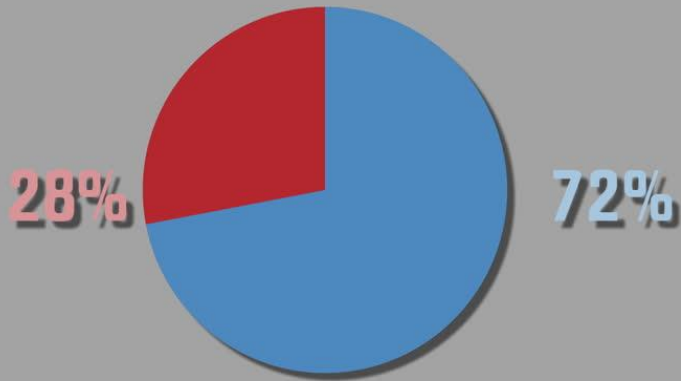
Elements of NON-VERBAL communication



- Artifacts, symbols



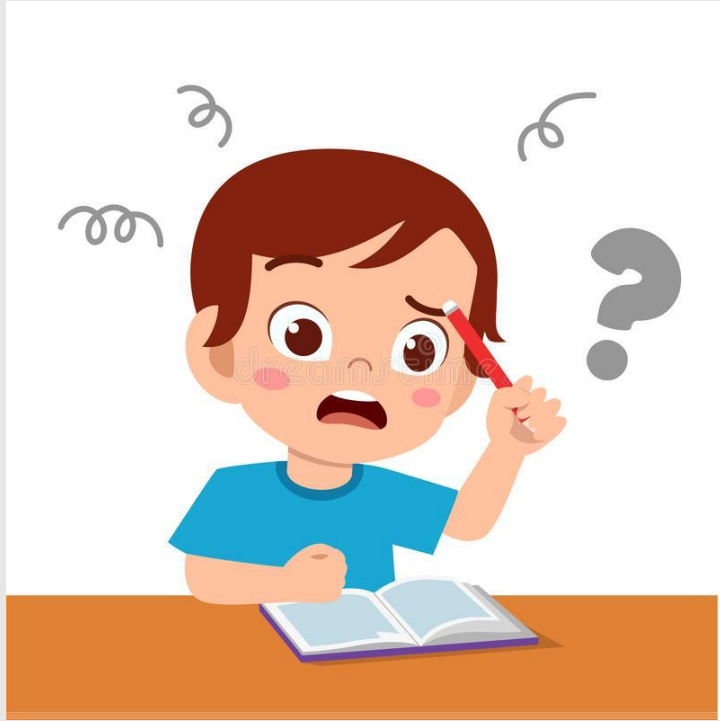
Where are you now?



- Students could gain only 28% of the relevant/necessary pieces of information even from the most talkative patients during the interview

- WHY?

WHY?



- They got stuck at the first question
- They could not lead the conversation
- They did not ask proper questions
- They did not ask the patients about their **ideas, concerns, expectations**
- They did not notice emotions and/or did not deal with **emotions**



**Where you are going
in terms of your
communication skills**

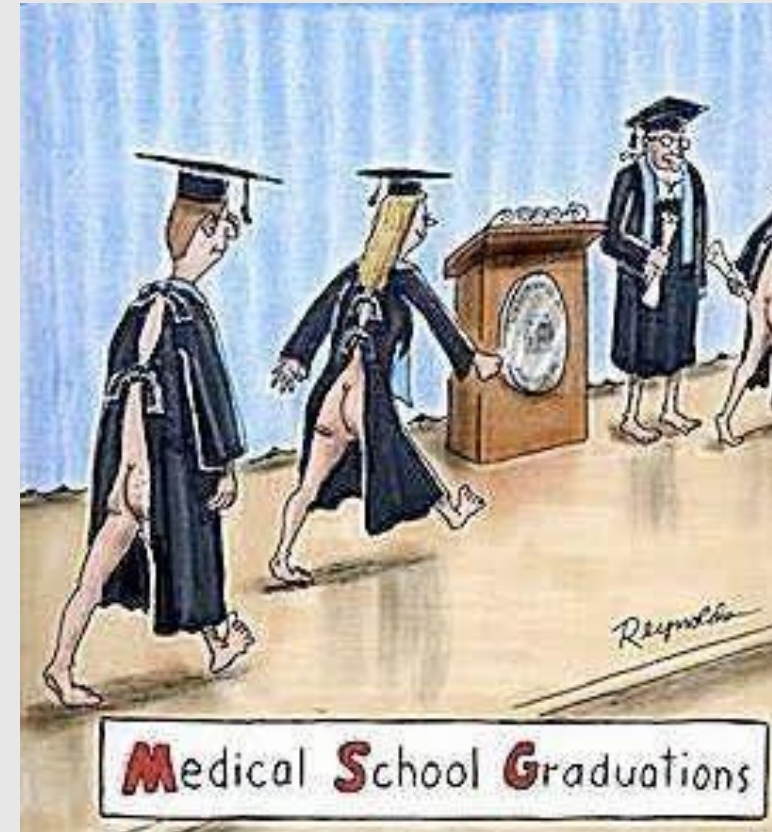
3rd yr student



- Creating ideal setup for the consultation
- Establishing rapport with the patient
- History taking (past medical, present disease)

6th year student

- Lead a full doctor-patient consultation including Exploring patients'
 - ideas
 - concerns
 - expectations



During your post graduate training



- Delivering bad news
- Discussing goals of care
- Disclosing medical errors

Scope of communication as a doctor



- With patients and relatives
- With other healthcare professionals
- With regulators
- Insurance companies
- Suppliers etc.

POWER OF COMMUNICATION

„Doctors who communicate poorly may never be forgiven, those who do it well will never be forgotten.”