

REQUIREMENTS

Semmelweis University, Faculty of Medicine Name(s) of the Institute(s) teaching the subject: Institute of Behavioural Sciences			
Name of the subject: in English: Medical communication in German: Ärztliche Kommunikation in Hungarian: Orvosi Kommunikáció Credit value: 3 credits Total number of hours: 28 lectures: 10 practices: 18 seminars: 0 Subject type: <u>compulsory course</u> elective course optional course			
Academic year: 2024/25			
Subject code: AOKMAG1091_1A <i>(In case of a new subject, it is filled by the Dean's Office, after approval)</i>			
Name of the course leader: Dr. Adrienne Stauder, Ph.D., habil. His/her workplace, phone number: SE Institute of Behavioural Sciences, +36-1-210-2953 Position: associate professor Date and registration number of their habilitation: 2020. July 21. 08/2020.			
Objectives of the subject, its place in the medical curriculum: Proper communication is an essential element of effective healing. Good communication helps to form a trusting relationship between the physician and the patient, it allows the doctor to gather effectively the information that underpins the diagnosis, and it improves the patient's cooperation and adherence with treatments. The aim of education is partly to teach communication techniques that can make the daily tasks of doctors more effective: listening to, interviewing, informing and promoting cooperation of the patients. The subjects of education are also elements of the everyday doctor-patient relationship, which have recently come to the fore, such as e.g shared decision making, suggestive effects of medical communication, communication aspects of patient safety. In addition to describing the general regularities of medical communication, the course also presents the specialities of communication in various areas of the health care. Thus, we deal with the peculiarities of communication with children or the elderly, discussion about sexual topics and the cultural competence of the doctor. In our education, we place great emphasis on the difficult issues of the doctor-patient relationship, so we deal with the communication of bad news and the prevention and management of aggression. The main goal of the course is to teach special communication knowledge to medical students that can help them create proper doctor-patient relationship and improve their effectiveness in medical practice.			
Method of instruction (lecture, group work, practical lesson, etc..) 10 hours of lecture, 18 hours of practice. The lectures provide an overview of the most relevant theoretical basis and of the basic technics of medical communication. During the practices, the focus is on the development of communication skills via exercises in pairs, in small groups and in whole group. The technics used are analysis of educational videos, role plays, interview with a teaching patient, discussion of the experiences of the role plays, of field observations and of every day practice of the communication skills.			
Successful completion of the subject results in the acquisition of the following competencies: Upon successful completion of the subject, the students will be able to			

<ul style="list-style-type: none"> • effectively gather information to make a diagnosis by using appropriate questioning techniques; • use communication techniques that facilitate the understanding and remembering during patient information; • know and apply specific communication techniques to express their attention and empathy; • use several communication techniques to improve the patient's therapeutic cooperation; • inform the patient about the possible risks of the treatments in accordance with the legal regulation, in an objective, yet non-alarming way; • can activate the patient in order to become a partner in his own treatment as much as possible, and empower the patient himself to contribute as much as possible to his own recovery or improvement of his condition; • have effective methods to facilitate lifestyle change; • be aware of the suggestive effects that doctor's communication can have; be able to use communication methods that put the positive effects of the doctor's words at the service of cooperation and healing; • be able to communicate in a way that suits the individual characteristics of the patient (age, different social and cultural backgrounds, different levels of health understanding, possible mental disorders or disabilities); • be able to communicate on intimate issues without embarrassment; • know and be able to use communication methods to manage tensions and conflicts; • breaking bad news in a compassionate way (eg news of incurable disease, news of death, news of congenital malformation); • can effectively use modern technology for the purposes of medical communication; • know and be able to use communication tools that increase patient safety.
Course prerequisites: There are no prerequisites.
Course outcome (names and codes of related subjects) Medical communication knowledge and skills are of fundamental importance in all clinical areas. They are particularly important for the following subjects: internal medicine propedeutics, internal medicine, pediatrics, psychiatry, oncology, family medicine
In the case of multi-semester courses, position on the possibility of and conditions for concurrent registration: not relevant-
Number of students required for the course (minimum, maximum) and method of selecting students: The completion of the course is compulsory for all students. Course is taught only in the first semester of the academic year, all students can register for the course. The recommended maximum number of students for practice is 15 students per group.
How to apply for the course: Through the Neptun system.
Detailed curriculum: <i>(Theoretical and practical lessons shall be given separately by numbering the lessons (by weeks). Please provide the names of the teachers of the lectures and practical lessons and indicate guest lecturers. Do not use attachments! Always attach a CV for guest lecturers!)</i>
LECTURES: Week 1-5 (5x2 hours) Lecture 1: Introduction. Communication difficulties and possible solutions in the everyday medical practice. (János Kollár) Lecture 2.: Communicating risks of treatments. Suggestive communication in medical practice. (János Kollár)

<p>Lecture 3.: Promoting behavior change. The development of the patient-physician collaboration. (Adrienne Stauder)</p> <p>Lecture 4.: Breaking bad news. Disclosing medical errors. (János Kollár)</p> <p>Lecture 5.: The specialities of age in medical communication. Mónika Ditta Tóth</p> <p>Practice: 6x3 hours Weeks 1-6 or 8-13 (times, venues and teachers to be announced)</p> <p>Practice 1. Communication in everyday life and in the medical practice. The active listening. Communication aspects in empathy.</p> <p>Practice 2.: Patient information, patient education. Communicating with patients with low health literacy.</p> <p>Practice 3.: Promoting lifestyle change: motivational interview, shared decision-making.</p> <p>Practice 4.: Seminar. Communicating bad news (practice). Suggestive communication techniques. Communicating about complementary and alternative therapies.</p> <p>Practice 5.: Seminar. Communication with tense, hostile patients, strategies to prevent violence. Assertive communication.</p> <p>Practice 6.: Seminar. Cultural competence of the doctor. Communicating with different age groups (eg. children, elderly).</p> <p>Lecturers: Dr. Stauder Adrienne, Dr. Kollár János, Dr. Tóth Mónika Ditta, who are employees of Semmelweis University</p>
<p>Other subjects concerning the border issues of the given subject (both compulsory and optional courses!). Possible overlaps of themes:</p> <ul style="list-style-type: none"> • The Sociology of Healthcare and Medicine (possible overlap: the impact of modern technology on medical communication) • Medical Psychology, Psychiatry (possible overlap: relationship and communication with people with mental disorders.) • Bioethics (possible overlap: patient information, informed decision making, breaking bad news.)
<p>Special study work required to successfully complete the course: <i>(E.g. field exercises, medical case analysis, test preparation, etc.)</i> no special study work required</p>
<p>Requirements for participation in classes and the possibility to make up for absences: The participation at minimum 75% of the practice seminars is the prerequisite of the signature. It is possible to make up for ONE absence by participating in another seminar group the same week (only once in a semester, upon agreement with both teachers!)</p>
<p>Methods to assess knowledge acquisition during term time: (E.g. homework, reports, mid-term test, end-term test, etc., the possibility of replacement and improvement of test results) There is no assessment during the term time</p>
<p>Requirements for signature: The participation at minimum 75% of the practice seminars is the prerequisite of the signature.</p>
<p>Type of examination: kollokvium</p>
<p>Requirements of the examination: <i>(In case of a theoretical examination, please provide the topic list; in case of a practical exam, specify the topics and the method of the exam)</i></p> <p>The oral exam is based on the course text book and the lecture handouts posted on the website.</p> <p>Course text book:</p>

Pilling, János: Medical Communication in practice. Medicina, Budapest, 2020.

Exam topics list A:

1. The significance of medical communication. Misconceptions and facts about medical communication.

(source: Pilling, J: Medical Communication in practice. Medicina, Budapest, 2020. pp.15-22.)

2. Doctor-patient consultation. (25-44.)

3. Promoting lifestyle change: the 5A and 5R methods; the transtheoretical model of behavior change. (47-52 and 58-62.)

4. Promoting lifestyle change: motivational interviewing. (52-57 and 61-62.)

5. Communication options for developing health literacy. (65-74.)

6. Communicating risks of treatments. (77-85.)

7. Shared decision making. (87-95.)

8. Suggestive communication in medical practice. (97-107.)

9. Communication with children. (109-118.)

10. Communication with older people. Communication with elderly having age-related mental disorders. (118-123 and 213-214)

11. Cultural competence of the physician. (127-135.)

Exam topics list „B”

12. Communication about functional symptoms (149-164.)

13. Communication with patients using complementary and alternative treatments. (137-146.)

14. Communicating about intimate issues. (167-183)

15. Communication with tense, hostile people. (185-196.)

16. Communication with depressed patients. Recognizing the risk of suicide. (200-207)

17. Communication with patients having anxiety symptoms or addictions. (207-213)

18. Breaking bad news. (221-237.)

19. Communication aspects of patient safety. (239-254)

20. Communication with people living with disabilities. (257-272)

21. Communication with the victims of abuse. (273-290)

22. E-health: use of technological tools in health communication. (291-307.)

Method and type of evaluation:

(Method of calculating the final mark based on the theoretical and practical examination. How the mid-term test results are taken into account in the final mark.)

Final mark is based on an oral exam. Two topics – one from A list and one from B list should be reported on, at least at satisfactory (2) level. The average of the marks given for each topic gives the final mark.

How to register for the examination?:

Through the Neptun system.

Possibilities for exam retake:

Through the Neptun system

Printed, electronic and online notes, textbooks, guides and literature (URL address for online material) to aid the acquisition of the material:

The oral exam is based on the course text book and the lecture handouts posted on the website.

Course text book:

Pilling, János: Medical Communication in practice. Medicina, Budapest, 2020. (see pages per topics detailed at the topic list)

Signature of the habilitated instructor (course leader) who announced the subject:
Signature of the Director of the Managing Institute:
Hand-in date: