

МЕДИЧНІ НАУКИ

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SPEECH ETIQUETTE OF A MEDICAL WORKER

Establishing a contact between the doctor and the patient is an integral part of successful treatment. Complaints about inability of doctors to listen carefully, to answer loud and clear, to find out a cause of illness are often charged. This result in inefficient communication become the main barrier on the road to patient's health. For this reason, one of the actual problems of modern medicine is relationships between the doctor and the patient, because the complexity of communication between them directly effect quality of aid.

Components of a speech etiquette.

Medical profession relate to «human-human» system, that is why an ability to engage in dialogue is one of the basic characteristics of doctor's identity. Speech etiquette include four components: normative, communicative, ethical and aesthetic.

Normative component suggests knowledge of literary norms and an ability to use them during the dialog. However, it cannot be enough to build successful communication. The doctor can speak correctly, but with difficult to perceive diction, wrong accentuations, erroneous intonation. That is why other components of speech etiquette are important.

Communicative component suggests exchange of information between the doctor and the patient. In this feedback is crucial. It must help the doctor to understand how the patient perceive and appreciate his words. Acting as a listener, the medical worker must actively respond to the words and behavior of a patient, also he must ask additional questions, if information provided cannot be interpreted uniquely.

Ethical component suggests observance of rules, which were accepted by society, respectful relations between participants in the dialogue, goodwill, tact and delicacy.

Aesthetic component suggests emotionality, imagery, expressiveness, associativity and intuition of a speech [1, p. 25].

Doctor-patient relationships.

In past centuries the doctor's role was often limited to the simple monitoring of natural course of disease. Style of relationships between the doctor and the patient lied in doctor's power to take a decision and confidence of a patient. Doctor «exclusively in interests of a patient» acted as he thought was right. It seemed that such an approach increased effectiveness of treatment: the patient was free from doubt and uncertainty, and the doctor assumed all caring of the patient. Doctor did not share his doubt with patient, hid the unpleasant truth.

However, confidence based on blind faith need to be differentiated from confidence, which was earned. Currently the doctor and the patient cooperate, share the views, tell the truth to each other, and share responsibility for treatment. This kind of cooperation based on support, understanding sympathy, respect for each other.

There are some models of doctor-patient communication:

- Formational (emotionless doctor, fully independent patient).
- Interpretative (persuasive doctor).
- Deliberative (confidence and mutual consent of the doctor and the patient).
- Paternalistic (doctor-guardian) [4, p. 37].

The interpretative model appropriate to low-educated people. The deliberative model appropriate to well-educated people, who want to find the underlying cause of a disease. Paternalistic model, which was widespread in the past, does not used nowadays, with the exception of life-threatening situations, when the doctor must make a decision about urgent operation, resuscitation measures[3, p. 52].

Hippocratic Oath.

There are no strict rules in communication with patient, though around the world doctors use general principles of deontology – professional ethic of medical workers [2, p. 74]. Peace of patient`s mind is a main criterion of deontology, test for it efficiency. Oath, which conditionally called Hippocratic, is rooted far in the past. Later it was discharged as a document. It contained some requirements:

- Preservation of medical confidentiality.
- Prohibiting action, which can cause moral or physical damage to the patient or his relatives.
- Loyalty to profession.

Nowadays Oath of the doctor of Ukraine is used. It preserved all of this principles with adjust for modernity.

Doctor-patient communication must be focused on production of general meaning, understanding, and a common vision of the treatment. Credibility of doctor based not only on high professional technique, but also on humanity, sensitivity and speech etiquette.

Reference:

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2. Borodulin V. Big medical dictionary. – 2007. – P. 74.
3. Kozhevnikov A. Clinical medicine. – 2002. – P. 52.
4. Tashlikov V. Psychology of medical process. – 1999. – P. 37.