

Correlations between Communication Skills and Patient-Physician Interaction of Clinical Performance Examination

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Abstract. The purpose of this study was to identify the correlations between medical students' communication skills and patient-physician interaction (PPI) of clinical performance examination (CPX). The subjects were 36 fourth year medical students who had CPX after all clinical clerkships. After CPX, all subjects evaluated their communication skills by themselves using a questionnaire that consisted of 20 items in four categories. The assessment of PPI was performed during CPX by the standardized patients, trained to evaluate a medical communication. The communication skills were re-sorted according to the PPI questions and total scores were calculated. The correlations between the re-sorted scores of communication skills and score of PPI were analyzed. However, there were no significant correlations between them. This study showed that there were no correlations between communication skills and patient-physician interaction of CPX.

Keywords: communication, physician-patient relations

1 Introduction

Communication in clinical situation is the important process that makes health care providers get the information about patients, assess their state, and give them medical explanation. Patients-based education of communication skills can improve the communication activity in the short term and treatment outcome eventually [1].

Many medical and nursing college have adopted clinical performance examination in their curriculum to educate and evaluate the communication skills between students and standardized patients and also National Health Personnel Licensing Examination Board introduced the practical test in the national examination [2].

Clinical education on medical communication is usually composed of communication skills and clinical examination is performed through the rating of PPI (patient-physician interaction) [3]. So, the understanding the effect of communication skills on PPI evaluation can be useful to prepare education plan of medical examination effectively.

2 Method

2.1 Design and subjects

This study was designed to identify the correlations between communication skills and PPI of clinical performance examination (CPX) based on the scenario of acute abdomen in one university. The subjects were 36 fourth-year medical students, who had their CPX after all clinical clerkships.

2.2 Procedure

After CPX, all subjects evaluated their communication skills by themselves using a questionnaire. The assessment of PPI was performed during CPX by the standardized patients who were trained to evaluate a medical communication.

The communication skills questionnaires consisted of 20 items in four categories: beginning the interview (greeting, identification, introduction, attention, and chief complaint), gathering information (open questions, reflection, facilitation, clarification, and summarizing), giving information (discovering patient's understanding, empathy, easy terms, checking of understanding, and giving opportunities), and non-verbal communication (neat feature, listening, eye contact, nodding, and silence). Each question was rated along 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree).

The PPI assessment consisted of 5 questions: asking questions effectively, listening attentively, making an efforts to understand patient's situation, explaining more lucidly, trying to make a good relationship. Each question was rated along 4-point Likert scale similar to national examination.

The communication skills were re-sorted according to the PPI questions and total scores were calculated.

2.3 Data Analysis

The re-sorted scores of communication skills and score of PPI were compared using Pearson's correlation analysis in SPSS 14.0. The statistical significance threshold was 0.05.

3 Results

In the scores of communication skills, chief complaint score was highest: 4.94 ± 0.23 , and greeting, introduction, and giving opportunities showed the next scores: 4.92 ± 0.28 , 4.83 ± 0.51 , and 4.56 ± 0.84 , respectively. However, discovering the patient's understanding was the lowest score: 2.36 ± 1.15 , and empathy,

checking of understanding, and facilitation were relatively lower: 2.72 ± 1.26 , 2.75 ± 1.32 , 2.89 ± 0.92 , respectively.

The scores re-sorted from communication skills were 17.19 ± 2.80 , 24.03 ± 4.08 , 6.28 ± 1.81 , 13.00 ± 1.82 , 22.92 ± 2.37 , respectively. In addition, the PPI scores were 2.50 ± 0.51 , 2.72 ± 0.45 , 2.78 ± 0.42 , 2.33 ± 0.48 , 2.28 ± 0.45 , respectively. There were no significant correlations between the re-sorted scores of communication skills and scores of PPI.

4 Discussion

The education of medical communication is usually performed according to the process of communication and students tend to understand communication skills fragmentally [4]. However, each component of communication skills is applied in various orders and PPI in clinical examination was evaluated overall considering patient's satisfaction.

More effective education methods should be considered to improve patient-physician interaction by education of communication skills [5].

5 Conclusion

This study showed that there were no correlations between communication skills and patient-physician interaction of clinical performance examination.

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