

# How to Avoid Litigations in Medical Practice

REFINING COMMUNICATION SKILLS -  
THE BEST INSURANCE AGAINST LITIGATIONS.



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## Importance of Art of Communication

The practice of good communication skills in the medical profession is integral for the development of meaningful and trustworthy relationship between the doctors and patients and, thus, is beneficial to both of them. The diagnostic capability of the doctor is greatly enhanced because of better understanding of patient's problems. Furthermore, it is also useful in managing difficult clinical encounters and thus decreases the frustration of both the doctor and the patient or attendant in situations of emotional outbursts. It has also been shown to decrease work stress and increase job satisfaction.

## ADVANTAGES OF GOOD COMMUNICATION

1. Less trouble with patients, **so more peaceful life**
2. Patient satisfaction, leading to regular visits and referrals.
3. Feeling of empowerment and control.
4. Adherence to treatment plans.
5. Loyalty even if treatment is not immediately effective.
6. Less chances of complaints and legal action in the event of a mistake.

## Components of communication

Effective communication has three basic components- Verbal, non-verbal and paraverbal. Verbal component deals with the content of the message including selection of the words. Non-verbal component includes body language like posture, gesture, facial expression and spatial distance. Paraverbal component includes tone, pitch, pacing and volume of the voice.

While communicating, most of us focus on the verbal component that constitutes only ten percent of the message delivered whereas non-verbal and paraverbal components contribute ninety percent of the total message delivered.

Verbal component (content) is important and it includes information about the nature, course and prognosis of the disease; various treatment options available; nature, cost and yield of the investigations and risks/benefits of invasive procedures. Although nonverbal component of the communication is frequently considered less important, literature suggest that it significantly influences important outcomes like patient's satisfaction, adherence to advices and clinical outcome

## Barriers to Good Communication

### Not considered important

Importance of communication has not being taken seriously. That's the biggest barrier.

## Lack of time

Most doctors see a large number of patients every working day. This is true of both government and private hospitals. History taking, physical examination, and prescription writing are of course, essential parts of a clinical encounter. When time is short, it is the communication with parents that is sacrificed.

## Arrogance

Arrogance is deeply ingrained into doctors. We expect our patients to follow our commands unquestioningly. We do not understand the need for explanations, and often give none

## Aloofness and shyness

The patient may be very shy and not ask the questions they have in their minds. On the other hand, the doctor may be aloof, and either ignore questions, or give minimal and incomplete answers.

## Language barrier

A major problem occurs when the patients speak English. As soon as we meet an English speaking patient, we start speaking in technical/medical language. This leaves the patients confused and uninformed. When talking in English, it is essential to make an effort to talk in language that a nonmedical person can understand.

## Deafness

Deafness is a major cause of poor communication, and is a special concern with elderly patient. When we suspect a hearing impairment, we must speak loudly, slowly and distinctly and ask at the end of the consultation, if they have understood everything, and if they have any questions.

An important measure is to have the patient repeat the prescription instructions, to ascertain they have been understood.

## Phones

Earlier, a telephone would buzz discreetly on a receptionist's desk, and a consultation would not be interrupted. Today, there's a phone in everyone's pocket or hand, and calls can interrupt and hinder communication terribly.

## STRATEGIES FOR IMPROVING COMMUNICATION

### Check what the patient knows

With intelligent and knowledgeable patients, the discussion can begin at a higher level. However, assessing the patients' knowledge is important, because some of their knowledge or understanding may be faulty. Many patients get their knowledge from magazines, lay books, and websites. Most of these sources have no system of review or control of the

information published.

### **Assess what the patients want to know:**

Some patients want to know every little fact and detail about their condition. Others simply want a prescription and an assurance that all will be well. It is important to assess the patients' desires, and communicate accordingly.

### **Listening skills**

Most of us hardly allow the patients to speak. As soon as they start their description of the problem, we start asking questions, and attempt to keep the consultation focused. However, this often leads to an incomplete description of the problems. Listening well is an essential part of communication. This requires the provision of adequate time and patience,

and the willingness to listen to patients' concern. A quiet room, lack of interruptions, provision of chairs for the parents, sitting at an appropriate distance, good eye contact are helpful to enhance listening and learning from the patients.

### **Truth**

Patients like to know the truth, but the bald truth can be harsh and shocking. Patients deserve to know the truth, but its delivery should be tempered with common sense and empathy.

### **Simplicity and clarity**

Not all patients have a good educational and intelligence level. Explaining things in simple, clear, and direct language is very important. Clarity and directness are particularly important with patients of low comprehension abilities..

### **Factors effecting communication skills**

#### **Do's**

1. Greet the patient by name. Everyone loves to be called by name. it creates instant rapport and boosts the confidence of the patient
2. Smile. It makes patient comfortable and less anxious.
3. Sit down when talking. Do not appear in hurry, even if are in.
4. Try to talk in the patient's language.
5. Direct the conversation to relevant directions.
6. At the end of the consultation, ask if the patient has any questions.
7. Engage the patient in a dialogue.
8. Give time for the patient to absorb and understand the content of your explanations, then to ask questions.

#### **Don'ts**

1. Appear to be in a hurry.
2. Look at your watch frequently
3. Use too many medical terms
4. Talk with your hand on the door handle.
5. Give long lectures as explanation.
6. Start examination and then write out a prescription before the main problem has been identified.
7. Ignore concerns mentioned by patients.
8. Interrupt all the times

### **Communicating with the attendants**

This scenario usually comes when a doctor is treating an indoor patient. Attendants are apprehensive and at times full

of doubts and queries. Communicating with the attendants assumes great importance especially when patient is critically ill or admitted in ICU. Here are certain tips that will definitely improve one's ability to communicate.

1. Never be informal with them. Conduct conferences once and if possible twice daily.
2. Talk about and appreciate the efforts made by them.
3. Most of the attendants surf internet and gather lots of information. Try to satisfy their queries by giving better references.
4. Always explain the dynamic nature of disease. This is especially important for critically ill patients.
5. Second opinion should be sought proactively. This is important not only in patient management when one is in doubt but also helpful in building attendant's confidence. One will be more convinced and ready to accept bad outcome if the same fact is explained by more than one consultants.
6. Never express shock. Try to convince that all efforts are being made to bring situation under control or will be controlled.
7. Consent taking is very important part of counseling. Never neglect this and give it to paramedical staffs or interns who may fail to explain convincingly.

### **Communicating with colleagues**

Junior doctors including postgraduate students, fellows and interns along with nursing and supportive staffs are part of the team. It is important to keep them united and motivated. Following principles should be followed.

1. Never talk low about your colleagues or scold residents, fellows or other students in front of patients or attendants. One should be extremely cautious while asking questions from Junior Residents on rounds. Patient may feel insecure in absence of senior consultants who may not present at all the time. This may also create doubts in the minds of patients even if Junior Residents prescribe drugs for common complaints.
2. Greatest courtesy should be displayed for all staffs including nurses, paramedical staffs and other supporting staffs. Make them realise that they are a part of the team and their role and responsibility is also important. A system with effective teamwork can improve the quality of patient care and reduce workload among healthcare professionals
3. Lead by setting examples. Supporting staff will never work with full sincerity unless and until they appreciate the hard work and ability of doctor.
4. Try to teach them the basics and the principles of management of commonly encountered diseases in your ward. This will keep them motivated.

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**Ps. soon will start articles on medico-legal cases pertaining to various specialties. If you have any query related to your specialty please mail it to [dr.arun.medicolegal@gmail.com](mailto:dr.arun.medicolegal@gmail.com) or WhatsApp 9811106056**