

Interpersonal Communication Skills in Healthcare: Literature Review On Doctors and Patients Communication

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Abstract

The process of interpersonal communication is paramount in the interaction between the healthcare provider and the patient, and in the relationship with the sick or in need of care. Studies over the last decade documented how communication processes predict better outcomes in physician-patient interactions, and key components that should be considered in close relationships where health problems somehow define relationships. Has been made. Good interpersonal relationships between patients and service providers are important features of quality of care, characterized by a balance of mutual respect, openness, and their respective roles in decision making. This review is a review of healthcare, especially physician and patient interpersonal communication skills.

Introduction

The degree of active and communicative interaction between patients and healthcare providers has changed over the last few decades. Communication is a basic clinical skill that, when performed competently and efficiently, enables the establishment of a true therapeutic alliance, a relationship of trust between medical staff and patients and clients. In addition to the capabilities of medical staff and facilities, patients and customers are provided with advice, friendliness, openness and attention. How healthcare professionals respond to their needs and desires is a performance-enhancing factor that helps drive the reputation of the healthcare sector and the growing interest of patients and customers.

Scholars also consider the importance of the physician's patient influence and behavior, courtesy, availability, emphasis on patient identity, physical examination performance, and style of communication between humanity (Matthews & Feinstein, 1989 & Ware & Snyder, 1975). Martin (1983) and Armstrong (1991) emphasized that patients want to see themselves as active participants and that doctors need to convey information that corresponds to their priorities. Doctors need to be able to express themselves clearly, so use a language that patients can understand and listen to their patients. Petronio and Sargent explored these ethical dilemmas through the lens of Communication Privacy Management Theory (Petronio, 2002), a multi-application perspective on interpersonal problems encountered in healthcare.

A literature review revealed a good doctor-patient relationship. Physicians also need to dig deeper into the patient's situation and involve the patient in positive health outcomes and treatment decisions. For scholars, communication is most often more indirect or mediated through satisfaction with care, motivation to follow, confidence in doctors and systems, self-efficacy in self-care, and proximal consequences of physician interactions. It has been shown to affect health in different ways-patients' agreement and shared understanding of what affects health or may contribute to interim results that lead to better health (Arora, 2003). Epstein & Strasse, 2007).

Basically, physicians build communication skills through certain observable behaviors by physicians that have been shown to be associated with good patient relationships and health outcomes, primarily orally. Build relationships with patients. Referred physicians should be able to acquire general communication skills, be proficient in patient care, and be proactive in listening carefully (Chiò, 2008). Scientists also said that physician-patient communication enhances patient participation and adherence to recommended treatment proposals, impacting patient satisfaction, adherence, and access to health care. Improves quality of care and health outcomes (Diette, 2007; Arora2003). A good doctor-patient relationship makes things easier, especially when the news is bad (Platt, 2007). Some scientists have recognized that they have achieved positive results by

understanding the patient's situation and perspective, exchanging information, and exchanging patient knowledge and expectations (Baile, 2000 & Parker, 2007).

Interpersonal communication in healthcare

Communication comes in many forms and can be seen in different situations. Arguably the most important of these is the communication between the patient and the doctor, which provides much of the data needed for diagnosis. Interpersonal communication is linguistic (oral and written), non-verbal (gestures, facial expressions, postures, movements, appearances), and paralingual (intonations, tones, rhythms, linguistic flows). Taking into account the importance of the information content of patient-doctor communication (diagnostic process, treatment), the focus is on verbal communication in the medical system. Nonverbal and paralinguistic forms are important in terms of emotional influence and credible capital formation and the empathy that must exist between them. This is because these forms have no semantic and logical value.

In health care, the relationship between the two parts of the health care professional and the patient is much more complex and involves a higher level of existential type of therapeutic communication through the basic level of treatment level. The most important therapeutic communication of existence is integrated into health communication (Chichirez & Purcărea, 2018), as medical practice interferes with the patient's fate and is combined with elements of uncertainty and personal instability. Healthcare research is an area of communication between healthcare professionals and patients. Scientists have shown that communication not only affects both patient satisfaction and the perceived quality of the medical service received, but also contributes to improving the performance of the medical unit (AlQarni, Alsharqi, Qalai & Kadi, 2013; Boudreaux, Mandry & Wood, 2003). Communication in health law is an active process of sending and receiving information, and at least one of the communication partners actively listens, understands the message, and has some nonverbal language interpretation to motivate the speaker. Need to answer the question. Conversation support begins (Van Servellen, 2009).

In the medical field, communication is a basic clinical skill that includes building therapeutic relationships, understanding the patient's perspective, exploring thoughts and emotions, and providing guidance on how to improve health. The quality of the information a doctor receives during a medical examination is closely related to the communication skills of the doctor and the patient. According to the literature, listening, explaining, and empathizing with physicians can have a significant impact on a patient's health and function, as well as their satisfaction with medical care at a medical facility (Brock, et al. (Brock, et al.). 2013); Matusitz & Spear, 2014). In patient communication, listening and time (availability) are factors that the mode of cognitive manipulation needs to keep the speaker's attention, regardless of emotional state. "Knowing to hear" is the first rule of dialogue (Athanasiu, 1998). There are many rules that must be followed to hear in order to be efficient and beneficial to the doctor. It should be positive, complete, empathetic, receptive and with some criticism (Chichirez & Purcărea, 2018). First, listening must be positive. This includes physical mobilization as well as mental participation (attention and concentration). For example, a posture that is too relaxed can be difficult to memorize and understand, but a relatively uncomfortable posture creates a wakefulness that is suitable for listening. At the same time, listening must be holistic.

In addition to receiving and understanding linguistic messages, special attention should be paid to non-verbal components (gesture signals). Facial expressions need to be monitored so that the patient does not become anxious, frustrated, or discouraged. The listener must be empathetic. This cognitive and emotional process, starting with self-awareness and moving to other sightings, allows doctors to understand what the patient thinks and feels, and they themselves openly and unrestrained. Encourages to express. Empathy includes not only compassion and intuition for the patient's emotions, but also identity with the patient's emotions, biological and psychological states (Larson & Yao, 2005). For effective communication in health, healthcare professionals must be available to give patients time to schedule and care for their goals and priorities with maximum performance. The response of the doctor during the examination, the openness, attention and usefulness of the staff to the patient and their relatives are important attributes of all health care providers and such a high level to distinguish them from other units in the medical institution as well as the performance of every healthcare professional must be maintained (Oliver, 2014). Speakers expect verbal messages to provide solutions to uncertainty or confirm expectations. Remember that this message is accurate, fair, appropriate, informative, clear, timely, respectful, unnecessarily informal, and the tone of the voice is important to the situation of communication. Must be (Chichirez & Purcărea, 2018). Thus, all the information provided to the patient removes some uncertainty and clarity is an example of healthy thinking, but also evidence of respect and acceptance of responsibility. Confused answers affect relationships. Doctors are in front of patients trying to define the disease and organize all stages of diagnosis and treatment. Vibration, hesitation, or excessive delay in providing a solution adversely affects those relationships, and response is an essential prerequisite for its effectiveness.

Identification and establishment of treatment must be made according to the patient's needs for information on clinically important aspects, but from a medical point of view, even though it remains the main purpose of the physician-patient relationship. Not when given incorrect information, patients become uncooperative, confused, dissatisfied, and stressed by medical practice (Kupst, Schulman & Dowding, 1979). Communication with the patient should be appropriate for opportunities related to the patient's condition, insights, and elements of positive relationship support. To acquire the strong communication skills needed to build a truly professional therapeutic alliance, deep medical knowledge of disease diagnosis and treatment, ability to gather information from patients, patient emotions and concerns You need interpersonal skills to deal with, and the ability to develop and maintain. Therapeutic relationship as a provision of specific information and education (Van Servellen, 2009).

Interpersonal communication is communication that occurs between communicators, face-to-face or non-face-to-face. This interpersonal communication is considered to be more effective than other forms of communication because both sides can exchange information in the process of communication and receive direct feedback from both sides according to their respective functions (Cangara, 2011). Interpersonal communication is a fundamental aspect of clinical practice that allows both patients and healthcare professionals to share information through linguistic and nonverbal communication. From a healthcare perspective, the interpersonal communication process is perceived as a central element between healthcare professionals and sick or in need of care. In addition, healthcare interpersonal communication plays a role in improving health outcomes in communication between healthcare professionals and patients. Interpersonal communication is often continuous through verbal communication, positive tone can be a reason for solving diagnostic problems, and counseling sessions can provide patient-related health information (Vimala, 2017). Verbal communication consists of spoken and written language that people use to convey their ideas. In health care encounters, the choice of language used by customers and providers has a major impact on how well they understand each other. At the same time, patients often communicate in dialects, accents, and slang, which is often difficult for healthcare providers in other regions to understand. Patients also explain health problems in strange ways, often reflecting their own perspective on the cause and severity of the illness. Studies found good interpersonal relationships with physicians characterized by care, compassion, respect, and trust can greatly help cancer patients adapt well to their illness (Bakker, Fitch, Gray, Reed & Bennett, 2001). Finset, Smedstad, and Ogar, 1997; Fogarty, Curve, Wingard, McDonnell & Somerfield, 1999; McWilliam, 2000). Koutsosimou (2013) states that doctor-patient relationships are complex because the scientific views on the therapeutic relationship between doctors and patients show significant differences.

Verbal and Nonverbal Communication in Healthcare

Verbal communication used by the doctors.

Verbal communication consists of spoken and written language that people use to convey their ideas. The language used by patients and healthcare providers in their encounters with healthcare has a significant impact on how well they understand each other. Medical terminology allows providers to communicate clearly and accurately with each other, but scientific and clinical language can be confusing and inappropriate when dealing with patients (Hull, 2016). Upon seeing a doctor, patients often communicate in their dialect, accent, and colloquialism. This can make it difficult to understand providers in other parts of the country. Patients also describe health problems in a unique way that often reflects their view of the disease, its origin, or its severity. Local conditions can affect a patient's perception of their illness or symptoms. For example, a patient may not report symptoms of an illness unless the patient is very ill because he considers the symptoms to be routine. However, it is important for doctors to identify early and even mild symptoms in order to make a correct diagnosis and to develop an appropriate treatment plan (Women, Yawn, Yawn & Uden, 1992). Warm greetings and thoughtful questions from healthcare providers often help calm patients and improve interpersonal relationships. Such actions do not require a lot of effort, but can have significant consequences. Nonverbal communication conveys information that cannot be conveyed by words alone.

Verbal communication is a cue has been used in speaking and talking. In health care, verbal communication plays an important role in delivering health care information. Health care professionals use verbal communication in order to talk with their patients in the way of giving health care information, advice on medication and treatment process on the diagnosis. Patients always experienced great service and poor service at one time or another. Excellent service makes patients want to come back and poor service makes patients wonder why they went there in the first place. Soo (2011) sreklam sa desu era hcihw sgniteerg labrev taht detats non fo stcepsa niatrec dna ssenetilop fo- tcatnoc eye gnikam sa hcus snoisserpxe labrev, gnlims, fo gniddon sdaeh, vawing of hands when another person is in view are also considered as polite in this country and sometimes such people may even be described as friendly. Verbal communication is a keyword that has been used in speaking and speaking. In the healthcare field, verbal communication plays an important role in providing health information. Health professionals use oral communication to talk to patients in the form of health information, medication advice, and treatment processes for diagnosis. Patients have always experienced excellent and poor service.

Language used by the doctors

Verbal communication is the language doctors use when interacting with patients. The researcher's language is closely related to the doctor's interpersonal communication skills with patient in order to identify the verbal communication that the doctor uses to communicate with the patient. In this phenomenon, the doctor first presents his thoughts, tries to convince the patient of the benefits of another treatment, and continues to dispel the patient's doubts (Swinglehurst, Roberts, Weber & Singy, 2014). Speaking multiple languages was seen as building a deep relationship with the patient. Doctors can communicate with multi language; will make the consultation take place accordingly with disease, treatment plan and medication procedures. Verbal communication is reflected as an important factor and contains information about the multilingual nature. Scientist Lisa Sparks, (2010) The language skills of medical professionals allow you to speak both English and the patient's native language. Family members usually have no experience in using specific medical terms or explaining options or drug protocols. Family members supported by this statement attend a doctor's consultation with their parents and serve as an interpreter (McGorry, 1999). In this regard, researchers have discovered that doctors can speak multiple languages. Based on observations, most patients will come to IJN appointments with their families. In most phenomena, the interaction between the doctor and the patient is supported in different languages by clinical assistants. In this situation, the patient's relatives or companions are the patient's interpreters.

Clear Information by the doctors

Doctors are often asked for information about the patient. The experience of a clinician who maintained a doctor-patient relationship and provided clear health-related information to the patient's parents or spouse. First, the doctor informs the patient about all relevant options and their benefits and risks so that the patient can make informed treatment decisions. This statement, endorsed by Travaline (2005), will gradually clarify this need in the course of discussions by physicians without prior knowledge of the patient, and physicians will integrate and present the information in a clear and easy-to-understand way. Verbal communication plays an important role in the daily work of doctors. By using a clear statement, doctors can help patients understand their illness and health problems. Doctors use verbal communication to make clear statements that patients can understand. Oral communication in Silverman (2010) medical consultation is widely recognized as important for medical care, is done at a clear point, is done in a single mode, is mostly under voluntary control, and more. It is generally easy to interpret because it conveys many ideas cognitively.

Positive Environment created by the doctors

Oral communication at a clear point can have positive health consequences by making the patient understand their illness. In healthcare, the doctor's verbal communication conveys health information, and the sense of participation and communication creates a positive relationship between the doctor and the patient. As Graham (2008) pointed communicating information verbally, doctors and staff need to communicate important points to avoid excessive information. Most patients do not remember the message. The author pointed out that it is important to speak slowly and avoid medical care, as shown in the oral communication information. Obviously, the oral communication in this study is a recognition of persuasion, explanation, motivation, advice, or guidance as an interactive process between the physician and the patient aimed at providing relevant health information.

This is an approach to interpersonal communication skills, focusing on verbal communication and interpersonal relationships between doctors and patients. Supportive approaches are taken to encourage patients to desire and manage their illness. Verbal communication helps patients better understand their health communication and achieve good medical outcomes by providing support and encouragement during the visit of the doctor and the patient. The literature supporting compassionate associations can be improved by recognizing the burden that illness puts on patients and their families (Balaban, 2000). Scholar also emphasized that they encouraged and helped patients and their families become accustomed to the explanations in order to understand the medical problem. Effective and collaborative communication helps patients and their families get the right health information. When making decisions about treatment plans, patients are also encouraged to consider clinical trials as an option.

The doctor's words of encouragement and support for the patient and his relatives during the examination are good treatments for this illness. Scientists have stated that some of the styles that characterize patient-centric care are the use of supportive conversations, such as verbal confirmation of a patient's emotional or motivational state by a doctor. The stronger the supportive conversation, the stronger the patient's positive perception (Denio, 2013). Physicians should always be more insightful, tolerant, and supportive of patients who have questions, concerns, opinions, and preferences. Similarly, in the case of a serious illness, the doctor must accompany the patient and assist the patient by expressing their opinions, concerns and encouragement. The literature shows that some clinicians provide more information on a daily basis in order to building partnerships by collaborative communication, including reassurance and encouragement (Roter, 1997 & Street, 1992).

Nonverbal communication used by the doctors.

Nonverbal communication is another important part of good health habits. Scientists describe nonverbal communication as an aspect of communication in which information is exchanged via purely nonverbal communication signals such as gestures, touches, facial expressions, eye contact, clothing, and hairstyles (Hall & Montague, 2013). Doctors often respond to a patient's facial expressions as a good indicator of sadness, anxiety, or fear. Ambady (2002) associated physician nonverbal communication patterns with therapeutic effects. Physician nonverbal behavior associated with patient outcome. Patient satisfaction is the most widely studied. Nonverbal communication includes gestures, body movements, position, and even silence. A doctor who looks carefully, avoids distractions, smiles, and sits at the same height as the patient conveys the important message of compassion, listening, and empathy. Many aspects of nonverbal communication are inherent in cultural practices and norms. For example, in some cultures direct eye contact is a sign of positive gratitude and respect, but in other cultures it is perceived as inappropriate or offensive, especially among members of the opposite gender. Physical contact during conversation (touching the patient's arm or hand) is seen in some cultures as a sign of affection.

Touch

In health care, touch is another important interpersonal communication signal in developing the relationship between doctor and patient empathy. According to the literature, doctors may touch patients to show care and empathy (Horton, Clance, Sterk-Elifson & Emshoff, 1995). There are two types of touches related to doctors' interpersonal communication skills: i) Social touch has certain social implications such as shaking hands or tapping the back; and ii) Physical contact is a touch with clinical purposes during the examination. Physicians use social touch as a complement to verbal communication in their daily work. Physical touch is the way doctors touch in medical practice.

In general, touch is a powerful tool for communicating positive emotions. However, to what extent social contact maintains an individual's proximity to important others, coordinates interpersonal behavior, and maintains social ties such as mutual positive emotions such as trust and affection between dyads. It remains unclear if it will be established (Ainsworth, 1989; Hazan, 1987). A social touch is a gentle touch on the patient's hand, arm, or shoulder that conveys concerns and concerns. In this phenomenon, social contact improves communication between the doctor and the patient. Most patients felt that an expressive touch was acceptable, especially in stressful situations. Most doctors are aware of their touch, but patients expect concerns from doctors who use touch to provide encouragement and support in consultations such as shaking hands and tapping their backs. Physicians express their concerns by touching patients on the subject of social contact. The literature confirms that social contact is interrelated and that the emotional experience shared between physicians and patients makes it possible to further support empathy (Adolphs, 2009). The literature also states that interactions are important for many reasons. Health providers need to instill positive expectations, provide emotional support, and win patient cooperation in treatment (Howard & Friedman, 2010). Hirsch (2007) agreed that physicians who have a personal understanding of each patient are much more likely to experience and convey empathy and effectively treat the patient and the illness. Patients seek empathy from their doctor.

Physical touch means that it varies from person to person. Physical touch is simply the contact of another person causing a cascade of chemical reactions in the human body to relieve stress and pain. It creates a sense of security, happiness and comfort. Physical touch also give strengthens the immune system, lowers blood pressure; improves blood sugar levels. From a health care perspective, physical touch is used for the purpose of health care procedures. In the medical setting, physicians have been found to use this physical touch effects of social support on patients and their cardiovascular responses to their behavior, such as heart rate, blood pressure, diastolic sugar content. From a health care perspective, physical examination-based touches are considered a promising part of the patient-physician relationship, and patients usually rely on doctors to use physical touches for diagnostic purposes (Blair & Wasson, 2015).

Physical touch during the examination is an essential form of nonverbal communication in the doctor-patient relationship. Specially trained physicians with many years of experience always place great importance on the type of contact when caring for a patient. As the literature suggests, a doctor's touch can be a means of diagnosing, treating, and perhaps most importantly, communicating that he or she is deeply attuned to the patient's problems, needs, and fears (Masu, Roter & Hall, 2006). During the physical examination, especially elderly patients, touch and hold the patient's hand or arm until the end of the examination. Touching the patient's arm or hand, especially to show that the physician intends to continue to provide the patient with concern and supportive guidance throughout the medical process. By doing so, the patient confirms trust by allowing the doctor to touch his body, and the doctor over time sees, hears, and feels what the patient's body reveals and also shows loyalty to the relationship (Olson & Roth, 2007).

Body Language

Nonverbal communication reflects behavior and is part of linguistic communication. Body language is an important part of nonverbal communication, and thoughts, intentions, or emotions are expressed through physical behaviors such as facial expressions, postures, gestures, eye movements, tactile sensations, and the use of space. Body language has become an integral part of health care, ensuring that counseling is more effective through proper communication of empathy and understanding. Physicians use different body language for patients to maintain their relationship with them. The literature confirms that a physician's body language is one of the most powerful and visible nonverbal signs for a patient, including powerful positive effect (Tacheva & Violeta, 2013). Literature stated the "right" body language displaying an open receptive approach can assist health providers in obtaining pertinent patient information that will assist in diagnosis and treatment (Gordon, 1995; Cole, 1993; Winfield & Robinson 1998).

According to the literature, good body language that gives a good first impression and respects the patient includes open body language, relaxed and clever hand movements, good posture with the head raised, relaxed chin, and firmness. Patients generally look for positive nonverbal communication that reflects positive energy. Nonverbal communication always leads to answers, and patients believe in comforting comments when accompanied by inconsistent facial and vocal attention. Scholar also pointed physicians can partially or accurately match the position of a person's body (that is, it reflects them) with the nature and speed of its movements and gestures.

Tone of Voice

Voice tones are one of the nonverbal communication elements used in health care, along with gestures, body movements, and facial expressions. Empathy with voice tones associated with better outcomes, including reduced error complaints in work life. It's about the sound of words, the language, how sentences are organized, and the individuality of the way they communicate. Voice tones are pleasantly friendly, angry and upset, or frustrated and frustrated. Debra Roter & Judith Hall (1989) pointed out that the effects of a particular voice when talking about a patient are reflected in the clinician's conversation with the same patient, and that the tone of the doctor's voice affects the patient differently. Tone of Voice is an important part of the doctor-patient communication between the doctor and the patient and is created for better reconciliation as it directs the doctor to listen. Meanwhile, the doctor's voice on tone, volume, speed, rhythm, and pause in connection with patient consultation (Mackenzie, Farah & Savage, 2002). Patients with tones described as "warm and supportive" or "possible and worried" indicate that they were given more "choice and / or management" when communicating with their doctor. Is strongly supported in the literature. If the doctor's voice was "more enthusiastic," the results were similar, but were also actively associated with medication adherence (Joyce, 2015).

Doctors use voice tones to communicate with patients and create trustworthy situations. The literature has shown that the most negative voice tones of being hostile and rude are associated with severe and persistent pain and poor patient health. Apparently, the tone of the doctor's voice reflected his satisfaction with various aspects of his experience with the patient (Hall, Stein, Roter & Rieser, 1999). Doctors who communicate with patients in negative ways, such as jarring or impatient voices, are more likely to provoke controversial emotions than doctors who communicate positively with patients. Even the tone of the doctor's voice has been shown to have a significant impact on the sentiment and outcome of the proceedings (Ambady, LaPlante, Nguyen, Rosenthal, Chaumeton & Levinson, 2002).

In addition to gestures, body movements, and facial expressions, voice tones are one of the nonverbal communication elements used in healthcare. It's about the sound of words, the language, how sentences are organized, and the individuality of the way they communicate. Voice tone is a way of speaking with a pleasant and friendly tone, anger and anger, or a frustrated and frustrated tone. The literature suggests that the effects of a particular voice expressed when talking about a patient are reflected in the clinician's conversation with the same patient, and that the tone of the doctor's voice has different effects on the patient (Roter, & Hall, 1989). The Tone of Voice is an important part of the doctor-patient communication between the doctor and the patient and is created for better reconciliation as it directs the doctor to listen. Doctors use tone of voice to communicate with their patients in order to create a trusted situation. tone of voice of the doctors will make the patients trust their doctors that they are carrying overcome their illness. supported by the literature that the most negative tone of voice as hostile and disrespectful was associated with significant and sustained pain and patients` poorer physical health.

Eye Contact

Eye contact is another nonverbal element that plays an important role in interpersonal communication because it does not contain language. Eye contact is a behavior similar to other nonverbal communication such as body gestures, facial expressions, and body language. Eye contact is a combination of linguistic and nonverbal communication. Academic eye contact is another important nonverbal behavior and is essential for building good relationships with older people (McDonald, Marshall, Johnson & Polkinghorne, 2009). Eye contact can have a significant impact on the healthcare system, which plays a role in the patient's perception of empathy. In

addition, another study confirmed that it was primarily regarded as a sign of doctor's respect, care, and attention (Marcinowicz, 2010). Eye contact during a doctor-patient consultation affects conversation. Literature states that doctor's eye contact is most effective when accompanied by appropriate verbal clues and attention. It not only listens to the patient when scribbling on the card, but also creates the feeling that the doctor is paying attention (Gorawara-Bhat, Dethmers & Cook, 2013). Supported by research, a good doctor begins to take care of the patient as soon as he sees him. Scholars have shown that patients want the doctor's attention through eye contact. Scientists emphasize that even simple frowning gestures can have a positive impact on patient satisfaction, as regular but short visual interactions are more effective for the patient. (Khan, 2014).

Conclusion

Interpersonal communication skills practicing by the doctors with their patients apply multidimensional and includes both verbal and nonverbal communication. Scholars have described interpersonal communication skills as "the impact of communication on others." Therefore, interpersonal communication skills are basically linked to positive patient outcomes. (Duffy, Gordon, Welan, Kelly & Frankel, 2004). A study showed that cardiologists communicate with patients through interpersonal communication skills and develop relationships by focusing on how doctors build relationships with patients (Vimala, 2017). Doctors identified by scientists use interpersonal communication skills in their daily work life (Figure 1). In particular, as previously studies have shown, effective interpersonal communication has been shown to be associated with improved health outcomes, such as improved patient satisfaction and quality of life (Klakovich & Dela Cruz, 2006).

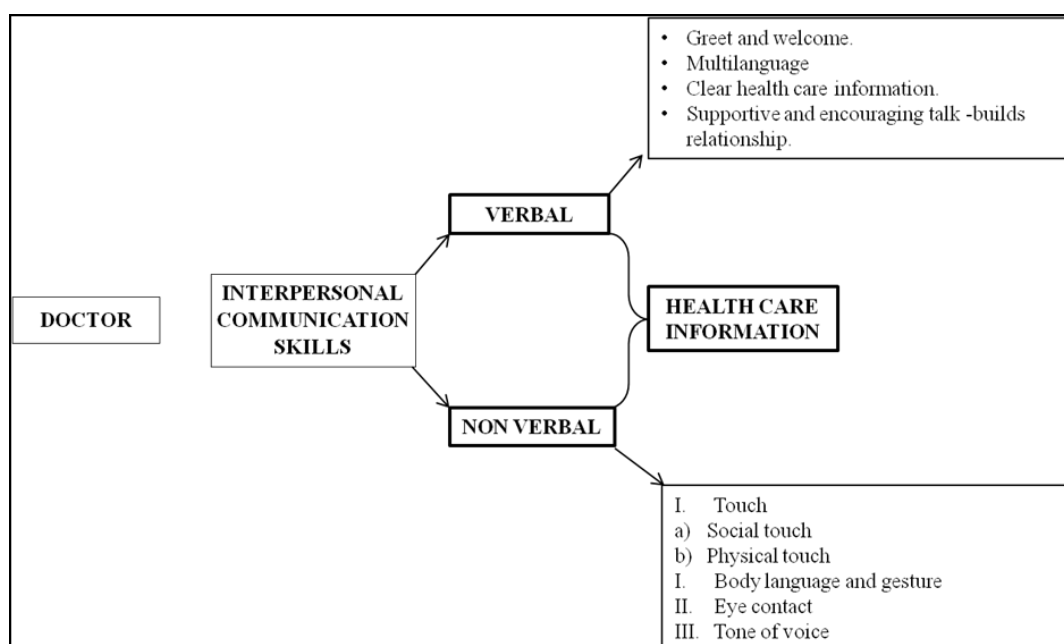


Figure 1: Interpersonal Communication skill used by doctors to their patients.
Vimala, G. (2017). Interpersonal Communication Skills Used by Cardiologists in Doctor-Patient Communication at The National Heart Institute, Malaysia.

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Author would like to share her research knowledge via publishing article and the cost bared by her own.

Authors' Contributions

Author for this article based from different field of expert. Dr Vimala from Human Communication background. Her field of expertise was on interpersonal communication since her doctoral dissertation focused on Interpersonal Communication skills in doctors and patients' communication

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