The Medical Interview

Calgary-Cambridge Guide

COMMUNICATION PROCESS SKILLS

INITIATING THE SESSION

Establish initial rapport
Greet patient
Introduce self and role; if applicable
Demonstrate respect, interest

Identify reason(s) for consultation
Use appropriate open questions to identify problems/issues
Listen attentively without interruption to opening statement
Confirm list & screen for more problems
Negotiate agenda, include needs of patient & doctor

GATHERING INFORMATION

Explore patient’s problems
Encourage patient to tell story
Move from open-ended to closed questions
Listen attentively without interrupting
Facilitate patient’s responses verbally & non-verbally
Clarify patient statements that are unclear
Avoid or explain jargon, use understandable language
Establish dates and sequence
Understand the patient’s perspective - FIFE
Explore and acknowledge the pt's illness perspective
- Feelings – fears about their problem
- Ideas – about what is wrong, cause, etc.
- Functions – impact of problem on daily activities
- Expectations – of the doctor & treatment

PROVIDING STRUCTURE

Make organization overt
Summarize at end of a line of inquiry
Signpost transition to next section of interview

Attend to flow
Structure interview in logical sequence
Attend to timing

BUILDING RELATIONSHIP

Use appropriate non-verbal behaviour
- eye contact, facial expression
- posture, position and movement
- vocal cues e.g. rate, volume, tone
- maintain focus on pt while writing/using computer

Develop rapport
Accept pt's views and feelings non-judgementally
Use empathy, acknowledging pt feelings
Provide support, offer partnership
Deal sensitively w/ embarrassment, disturbing topics, pain

Involve the patient
Share your own thinking as appropriate
Explain rationale re questions that seem unrelated
Ask permission & explain physical exam
EXPLANATION & PLANNING

Provide correct amount and type of info
Give info in manageable chunks, check understanding
Ask pt what info would be helpful
Avoid giving advice, explanation prematurely

Aid patient recall and understanding
Categorize: “There are 3 important things, 1st…2nd…”
Use repetition and summary
Avoid or explain jargon

Incorporate the patient’s perspective
Elicit pt’s beliefs & feelings re info, options, decisions
Relate explanations to pt’s beliefs, concerns, expectations
Encourage pt to ask questions, express doubts

Share decision making & plans
Make suggestions rather than give directives
Explore management options
State own preference re: options
Check pt understanding & acceptance of plan

CLOSING THE SESSION

Forward plan
Contract with pt re next steps for pt and physician
For pt safety explain possible unexpected outcomes

Ensure appropriate closure
Summarize session – ask for corrections, additions
Final check if pt is comfortable with plan or has questions
THE MEDICAL INTERVIEW (CCG)

Providing Structure To the Consultation
- Make organization overt
- Attend to flow

Building the Relationship
- Use appropriate non-verbal behaviour
- Develop rapport
- Involve the patient

Initiating the Session
- Preparation
- Establish initial rapport
- Identify reason(s) for consultation

Gathering Information
- Explore patient’s problem to discover:
  - Biomedical perspective on disease
  - Patient’s perspective on illness (FIFE questions)

Physical Examination

Explanation and Planning
- Provide correct amount and type of information
- Aid accurate recall and understanding
- Achieve shared understanding incorporating the pt’s perspective
- Share decision making and plans

Closing the Session
- Forward plan with pt re next step
- Ensure appropriate closure:
  - Summarize
  - Check if pt has questions
  - Final questions/concerns

Adapted From: