



Division of Medical Education  
Communication Skills Program  
[csp.medicine.dal.ca](http://csp.medicine.dal.ca)  
(902) 494-6307

# 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

- **F**eelings – fears about their problem
- **I**deas – about what is wrong, cause, etc.
- **F**unctions – impact of problem on daily activities
- **E**xpectations – 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, 1<sup>st</sup>...2<sup>nd</sup>..."

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

## 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

Building the Relationship

Use appropriate non-verbal behaviour

Develop rapport

Involve the patient

### Adapted From:

Kurtz, S., Silverman, J., & Draper, J. (2005). *Teaching and Learning Communication Skills in Medicine* (2<sup>nd</sup> ed). Oxford: Radcliffe Publishing

Silverman, J., Kurtz, S., & Draper, J. (2005). *Skills for Communicating With Patients* (2<sup>nd</sup> ed). Oxford: Radcliffe Publishing