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Using Medical Jargon: How to Cure Yourself of the Habit

Early in his medical career, Thomas Weida, MD conducted a routine well baby check. "After the check-up, I remember telling the baby's mother that the exam was 'unremarkable,' and thought nothing of it," he says. "But the mom became quite upset. She thought I had told her that she had an unremarkable child, something no proud mother wants to hear."

The medical jargon that is familiar to doctors' ears can be confusing or even frightening to patients who don't have the vocabulary or understanding of terms commonly used in the field of medicine.

"We learn to use the term 'negative,' for example, when we refer to normal test results," says Weida, a family practitioner and professor at the Penn State College of Medicine. "But a patient may associate the word 'negative' with bad news. I learned early on that it's best just to say 'normal.' Or, when I'm following up on test results in writing, if everything is okay I may draw a smiley face next to the results. That lets patients

know there's nothing to worry about, and they don't even have to be able to read to understand."

When doctors need to give a patient a specific diagnosis, they should provide it in full medical terms, Weida advises. When he uses a complex term in conversation with the patient, he may follow it with a bit of humor by saying, "now you know why I went to medical school." Then he explains the full diagnosis and related terms, and provides that information to the patient in writing.

When Weida works with medical students, he uses exercises with standardized patients to reinforce communication skills, including how to keep jargon out of conversations with patients.

"In the simulations, actors play challenging patients, Weida notes. "The students conduct interviews while we observe the interactions.

Afterward, we assess how well students communicate through their body language, eye

Even the best and most experienced physicians can have difficulty in their personal and professional lives. Establishing healthy patterns early in your career can make a big difference later on. Sometimes it takes some extra help to get through a troubling situation, make a difficult decision or cope with high levels of stress.

The professionals at RAP can help. We understand the challenges that go along with residency. Our counseling, coaching and referral services are available to help you excel as a physician.

Call us at 813-870-3344.



contact, and language use—including use of simple words."

Clear communications should be emphasized during rotations as well, says Weida. "What we often run into during rotations is students presenting information to the attending physician using specific medical language while in a patient's presence, because they feel they are being judged on their medical

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Speak properly, and in as few words as you can, but always plainly; for the end of speech is not ostentation, but to be understood.

- William Penn (1644 - 1718)



Life Insurance: do you have enough?

According to worldwide research and consulting firm LIMRA International, 44 percent of U.S. households either don't own life insurance and believe they should, or own life insurance but think they need more. Among those who own life insurance, 40 percent believe they don't have enough. And they are probably right.

Experts recommend a variety of methods to estimate how much life insurance your family might need. But the best method might be a good old-fashioned gut check. Ask yourself some tough questions about how much money the surviving spouse would need if one of you died suddenly:

How much money would the surviving spouse need to pay the mortgage and avoid having to sell the family home?

How would the surviving spouse care for the children while continuing to work?

How will the kids pay for college?

How will the surviving spouse's retirement program be affected? Will they be able to set aside enough money for a comfortable retirement?

The answers to these questions may prompt you to seek additional insurance and the peace of mind it can provide.

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Medical jargon, continued

knowledge. They think they'll get more credit for a 'million dollar word' for a particular diagnosis. I change those rules and insist they use non-medical terms. It takes awhile but they start to realize the importance of being able to communicate in more understandable language."

Use of overly complex terminology is just one of the problems Kathleen Daily Mock, BSN, JD addresses in her communications workshops for physicians and other health care professionals. "When a doctor uses terminology a patient doesn't understand, that patient isn't likely to be compliant," says Mock, founder of New Jersey-based HCC Consultants.

She also emphasizes the importance of good communication skills in keeping doctors out of legal trouble. "Poor clinician-patient communication is the dominant factor in the decision to initiate malpractice litigation," she notes. "Yet it can be difficult to get doctors to admit that their communication skills might be deficient. I encourage them to take advantage of any educational opportunity related to communication, whether that's a communication lecture, workshop, role-playing or working with a mentor. Their patients will do better, they will be more satisfied as physicians, and they'll reduce their malpractice risk—that's a no-lose proposition."

Bridging the Health Care Literacy Gap

"Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions," reports the U.S. Department of Health and Human Services in its *Healthy People 2010* national health objectives.

Patients' health literacy may be affected if they have health care providers who use words patients don't understand, low educational skills, cultural barriers to health care or limited English proficiency (LEP).

How Health Care Professionals Can Help

- Identify patients with limited literacy levels
- Use simple language, short sentences and define technical terms
- Supplement instruction with appropriate materials (videos, models, pictures, etc.)
- Ask patients to explain your instructions (teach back method) or demonstrate the procedure
- Ask questions that begin with "how" and "what," rather than closed-ended yes/no questions
- Organize information so that the most important points stand out and repeat this information
- Reflect the age, cultural, ethnic and racial diversity of patients
- For limited English proficiency patients, provide information in their primary language
- Improve the physical environment by using lots of universal symbols
- Offer assistance with completing forms

Source: www.hrsa.gov/healthliteracy/