

PODIUM 1.5 -- 2:00-2:15 [10 min presentation followed by 5 min Q&A]

Medical communication beyond medical education: A critical scoping review

Jacquelin Forsey^{1,2}, Stella Ng^{1,2,3}, Paula Rowland^{1,2}, Risa Freeman⁴, Connie Li⁵, Sabrina Teles⁶, Nikki Woods^{1,2,4,7}

1. Rehabilitation Sciences Institute, University of Toronto
2. Wilson Centre, UHN
3. Centre for Faculty Development, Unity Health
4. Department of Family and Community Medicine, University of Toronto
5. McGill University
6. University of Waterloo
7. TIER, UHN

jacquelin.forsey@gmail.com;

Background/Purpose: Strong verbal communication [VC] skills are essential for physicians. Despite the wealth of medical education research exploring communication skills training, learners struggle to become strong communicators. Beyond medical education a broad literature presents the opportunity to advance teaching of VC in medicine. Social sciences and humanities offer empirical data and theoretical support pertinent to the questions of physician-patient communication and provide insight for translating this knowledge into applications for medical education.

Methods: Combining the search methodology of Arksey and O'Malley with a critical analytical lens, we conducted a critical scoping review of literature in linguistics, cognitive psychology and communications to determine: what is known about VC at the level of word choice in physician- patient interactions? Studies were independently screened by three researchers during two rounds of review. Data extraction focused on theoretical contributions associated with language use and variation. Analysis linked patterns of language use to broader theoretical constructs across disciplines.

Results: The initial search returned 15,851 studies and 210 studies were included in the review. Articles from medicine represented 50% of the included articles, while the remaining 50% divided evenly between linguistics, psychology, and communications. The dominant themes reflected in the results were: (1) explicit language, (2) negotiating epistemic knowledge, (3) activating language, (4) affiliative language, (5) managing transactional and relational goals.

Conclusion: This in-depth exploration supports and contextualizes theory-driven research of physician-patient communication. The findings may be used to support future communications research in this field, and educational innovations based on a solid theoretical foundation.