Załącznik nr 5 do zarządzenia nr 189/2025

COURSE SPECIFICATION

Course code: 0912-7LEK-C-MC

Course title in Polish: Komunikacja medyczna w praktyce klinicznej
Course title in English: Medical communication in clinical practice

1. Placement of the course within the study programme

1.1. Field of study	Medicine
1.2. Mode of study	Full-time
1.3. Level of study	Uniform Master's study
1.4. Profile of study	General academic
1.5. Course specification author	Mgr Laura Osęka
1.6. Contact	laura.oseka@ujk.edu.pl

2. Generał characteristics of the course

2.1. Language of instruction	English
2.2. Entry requirements	

3. Detailed characteristics of the course

3.1. Type of classes	Classes – 10h Practical classes – 20h
3.2. Place of course delivery	Courses in the teaching rooms of UJK
3.3. Form of assessment	Credit with grade
3.4. Teaching methods	The course utilizes small-group interactive workshops, role-plays with simulated patients, and practical classes designed to develop self-awareness and self-reflection.
3.5.a. Basic reading list	Avtgis, T.A., Wright, K. and Nuzzolo, V. (2024) *Medical Communication: Physical and Psychological Wellness*. 3rd ed. Dubuque, IA: Kendall Hunt. Gil Deza, E. (2024) *Improving Clinical Communication: A Clinician's Guide to Building Better Skills and Patient Outcomes*. Cham: Springer. O'Toole, G. (2024) *Communication: Core Interpersonal Skills for Healthcare Professionals*. 5th ed. Sydney: Elsevier. Suresh, E. (2025) *Clinical Communication Skills in Medicine: A Primer for MRCP PACES*. Boca Raton, FL: CRC Press.
3.5.b. Supplementary reading list	

4. Objectives, content and learning outcomes

4.1. Course objectives (taking into account the form of classes)

Classes

- **CO1**: Understand the definition, scope, and interaction between clinicians, patients, families, and interprofessional teams.
- **CO2**: Learn the principles of patient-centered care by balancing the biomedical perspective (symptoms, clinical data) with the patient's perspective (ideas, concerns, and expectations).
- **CO3**: Gain knowledge of established structured communication frameworks, such as the Calgary-Cambridge Guide.

- **CO4**: Understand the fundamentals and specifics of verbal and non-verbal communication techniques.

Practical Classes

- **CO1**: Develop soft skills and actively practice verbal and non-verbal communication techniques in simulated clinical situations.
- **CO2**: Establish proper therapeutic relationships with patients and their families, reinforcing a patient-centered attitude.
- **CO3**: Acquire practical skills in gathering and transferring medical information, as well as building patient motivation for treatment and adherence to medical recommendations.
- **CO4**: Implement principles of professional teamwork, which includes obtaining information from team members, integrating diverse specialized competencies into patient care plans, and practicing the delivery of constructive feedback.
- **CO5**: Apply communication strategies to safely and ethically navigate special and challenging clinical scenarios, such as breaking bad news, managing conflict, or working within a multicultural environment.

4.2. Course content (taking into count the form of classes)

Classes

• Preparing the physical setting, removing barriers, and managing first impressions.
• Utilizing the Calgary-Cambridge guide to initiate sessions and gather information.
• Eliciting the patient's Ideas, Concerns, and Expectations (ICE).
• Practicing active listening and utilizing silence to encourage patient disclosure.
Providing information in small, logical steps using the "chunk and check" method.
• Structuring clinical handovers and consultations using ATMIST and RSVP/ISBAR protocols.
• Avoiding medical jargon and explaining concepts clearly.
• Providing constructive, non-judgmental feedback within interprofessional teams.

Practical classes

• Role-playing history taking from adults, children, and caregivers.
• Integrating the biomedical perspective with the patient's perspective during clinical interviews.
• Presenting treatment options without bias and supporting patients through difficult decisions.
• Obtaining informed consent and encouraging active patient involvement in diagnostic choices.
• Delivering unfavorable news effectively using the SPIKES, EMPATHY, or ABCDE protocols.
• Preparing warning shots and managing silence after delivering bad news.
• Identifying indicators of violence, self-destructive behaviors, and suicidal thoughts.
• Communicating sensitively regarding sexually transmitted diseases or recreational drug use.
• Utilizing motivational interviewing principles (express empathy, develop discrepancy, support self-efficacy, roll with resistance) to help patients give up smoking, drinking, or drugs.
• Assessing a patient's readiness to change using the States of Change model.
• Communicating effectively with socially or economically marginalized groups.
• Conducting clinical consultations through professional medical interpreters.
• De-escalating aggressive or violent patients by managing body language and remaining calm.
• Dealing constructively with demanding behaviors, fear, and strong emotions.
• Demonstrating communication process skills in Objective Structured Clinical Examinations (OSCEs).
• Evaluating personal communication styles and reflecting on alternative behaviors

4.3. Course learning outcomes

Course learning outcomes (code)	Upon completion of the course, the student	Alignment with programme learning outcomes
	in the area of knowledge knows and understands:	
W01	The specifics and role of verbal communication (conscious construction of messages) and non-verbal communication (e.g., facial expressions, gestures, managing silence and space);	D.W7.
	in the area of skills knows how to:	
U01	Adhere to ethical standards in professional actions, including planning and conducting the therapeutic process in accordance with ethical values and the idea of humanism in medicine;	D.U1.
U02	Recognize the ethical dimension of medical decisions and distinguish factual aspects from normative ones;	D.U2.
U03	Observe patient rights;	D.U3.
U04	Demonstrate responsibility for improving one's qualifications and sharing knowledge with others;	D.U4.
U05	Develop and refine self-awareness, the ability for self-reflection, and self-care, and contemplate with others one's own communication and behavior;	D.U7.
U06	Recognize one's own emotions and manage them in relationships with others, to effectively perform work despite one's emotional reactions;	D.U8.
U07	Describe and critically evaluate one's own behavior and communication style, considering alternative behaviors;	D.U9.
U08	Appropriately use open-ended questions, closed questions, paraphrasing, clarification, internal and final summaries, signaling, and active listening in various situations.For instance, detecting and recognizing signals sent by the interlocutor, using verbal and non-verbal techniques) and facilitation (encouraging the interlocutor to speak);	D.U10.
U09	Adapt verbal communication to the needs of the patient, expressing oneself clearly and avoiding medical jargon;	D.U11.
U10	Recognize and analyze difficult situations and challenges related to communication, including crying, strong emotions, fear, interrupting speech, sensitive and troublesome issues, silence, withdrawal, aggressive and demanding behaviors, and deal with them constructively;	D.U12.
U11	Establish contact with the patient and the person accompanying the patient that aids in building a proper relationship (e.g., the 4 Habits Model: Invest in the beginning, Demonstrate empathy, Elicit the patient's perspective, Invest in the end);	D.U13.
U12	View the situation from the patient's perspective, creating an appropriate context for conversation and using elicitation methods, and then incorporate it into constructing verbal messages;	D.U14.
U13	Collect a medical history from an adult, including an elderly person, utilizing skills related to content, process, and perception of communication, considering both biomedical and patient perspectives;	E.U1.
U14	Collect a medical history from a child and their caregivers, using skills related to content, process, and perception of communication, considering both biomedical and patient perspectives;	E.U2.
U15	Conduct patient conversations following a structured dialogue framework (initiating the conversation, gathering information, explaining and planning, concluding the conversation), while structuring such discussions and	E.U23.

	developing relationships with patients using selected models (e.g., Calgary-Cambridge guidelines, Segue framework, Kalamazoo Consensus, Maastricht Maas Global), including through electronic communication means;	
U16	Collect patient history with a focus on the presence of suicidal thoughts, when it is justified;	E.U24.
U17	Communicate information to patients, tailoring the amount and content to the patient's needs and capabilities, and supplement verbal information with models and written materials, including diagrams and instructions, and apply them appropriately;	E.U25.
U18	Jointly make diagnostic and therapeutic decisions with patients (assess the patient's level of involvement, their needs and capabilities in this regard, encourage the patient to take an active part in the decision-making process, discuss the advantages, disadvantages, expected outcomes, and consequences of decisions) and obtain informed consent from the patient;	E.U26.
U19	Communicate with patients from economically or socially marginalized groups, respecting their dignity;	E.U27.
U20	Identify social determinants of health, indicators of unhealthy and self-destructive behaviors, discuss these with the patient, and make a note in the medical documentation;	E.U28.
U21	Identify potential indicators of violence, collect history to verify if there is a risk of the patient experiencing violence, and make a note in the medical documentation;	E.U29.
U22	Apply principles of providing feedback (constructive, non-judgmental, descriptive) within team collaboration;	E.U30.
U23	Accept, clarify, and analyze one's own role and scope of responsibility in the team, and recognize one's role as a doctor in the team;	E.U31.
U24	Obtain information from team members respecting their diverse opinions and specialized competencies, and incorporate this information into the patient's diagnostic and therapeutic plan;	E.U32.
U25	Discuss patient situations in the team without subjective judgments, respecting patient dignity	E.U33.
U26	The following protocols should be applied (e.g., during the handover of patient care, ordering a patient consultation, or providing one): 1. ATMIST (A (Age), T (Time of injury), M (Mechanism of injury), I (Injury suspected), S (Symptoms/Signs), T (Treatment/Time to arrival)); 2. RSVP/ISBAR (R (Reason for the call), S (Story of the patient), V (Vital signs), P (Plan for the patient)/I (Introduction), S (Situation), B (Background), A (Assessment), R (Recommendation)).	E.U34.
U27	Effectively deliver unfavorable news using selected protocols, such as: 1. SPIKES: • S (Setting - proper environment), • P (Perception - understanding the knowledge level of the interlocutor), • I (Invitation/Information - invitation to discuss/informing), • K (Knowledge - delivery of the unfavorable news), • E (Emotions and empathy - addressing emotions and demonstrating empathy), • S (Strategy and summary - planning and summarizing), 2. EMPATHY: • E (Emotions), • M (Place), • P (Patient's perspective), • A (Appropriate language), • T (Message content), • I (Additional information),	F.U21.

	• A (Annotation in documentation), 3. ABCDE: • A (Advance preparation - preparing for the conversation), • B (Build a therapeutic environment - establishing a good connection with the family), • C (Communicate well - delivering bad news, considering communication principles), • D (Dealing with reactions - managing difficult emotions), • E (Encourage and validate emotions - right to show emotions, redirecting them and responding appropriately, aiming to conclude the meeting), - including supporting the family in the process of dignified dying of the patient and informing the family about the patient's death;	
U28	Seek and incorporate opinions and specialized competencies into the diagnostic and therapeutic plan for the patient, and also apply ATMIST and RSVP/ISBAR protocols;	F.U22.

in the area of social competences is able to:

K01	Establish and maintain deep and respectful contact with the patient and show understanding towards ideological and cultural differences;	K.S1.
K02	Do what is right for the patient;	K.S2.
K03	Respect medical confidentiality and patient’s rights;	K.S3.
K04	Take actions concerning the patient on the basis of ethical principles, being aware of social conditions and restrictions resulting from illness	K.S4.

4.4. Assessment methods for learning outcomes

Assessment method (+/-)

Course learning outcomes (code)	Oral/written/ practical examinaion /other (specify)*	Test*	Project*	In-class activity*	Independent study*	Group work*	Other (specify)*

Type of classes

1: / 2:	C	PC	...	C	PC	...	C	PC	...	C	PC	...	C	PC	...	C	PC	...	C	PC	...
W01	-	-		+	-		-	-		-	-		+	-		-	-		-	-	
U01	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U02	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U03	-	--		-	-		-	-		-	+		-	-		-	+		-	-	
U04	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U05	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U06	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U07	-	-		-	-		-	-		-	+		-	--		--	+		-	-	
U08	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U09	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U10	-	-		-	-		-	-		-	+		-	--		-	+		-	-	
U11	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U12	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U13	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U14	-	-		-	-		-	-		-	+		-	--		-	+		-	-	
U15	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U16	-	-		-	-		-	-		-	+		-	-		-	+		-	-	

U17	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U18	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U19	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U20	-	-		-	-		-	-		-	+		--	-		-	+		-	-	
U21	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U22	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U23	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U24	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U25	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U26	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U27	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
U28	-	-		-	-		-	-		-	+		-	-		-	+		-	-	
K01-K04	-	-		-	-		-	-		-	+		-	-		-	+		-	-	

Annotation. 1: form of classes; 2: learning outcomes

4.5. Assessment criteria for learning outcomes

Type of classes:

CLASSES (C) (including classes conducted with the use of distance learning methods and techniques)

Grade	Assessment criteria
3,0	Achieving the 61% - 68% of the total number of points possible to achieve
3,5	Achieving the 69% - 76% of the total number of points possible to achieve
4,0	Achieving the 77% - 84% of the total number of points possible to achieve
4,5	Achieving the 85% - 92% of the total number of points possible to achieve
5,0	Achieving the 93% - 100% of the total number of points possible to achieve

Type of classes:

PRACTICAL CLASSES (PC) (including classes conducted with the use of distance learning methods and techniques)

Grade	Assessment criteria
3,0	Achieving the 61% - 68% of the total number of points possible to achieve
3,5	Achieving the 69% - 76% of the total number of points possible to achieve
4,0	Achieving the 77% - 84% of the total number of points possible to achieve
4,5	Achieving the 85% - 92% of the total number of points possible to achieve
5,0	Achieving the 93% - 100% of the total number of points possible to achieve

5. ECTS credit allocation – student workload

Category	Student workload (full-time mode)	Student workload (part-time mode)
NUMBER OF HOURS WITH THE DIRECT PARTICIPATION OF THE TEACHER (CONTACT HOURS)	**30**	
Participation in lectures*	30	
Participation in seminars/laboratories*		

Other (specify) e.g. classes conducted with the use of distance learning methods and techniques*		
INDEPENDENT STUDY (NON-CONTACT HOURS)	**20**	
Preparation for lectures*		
Preparation for seminars/laboratories*	20	
Preparation for examination/test*		
Gathering materials for project, online research*		
Preparation of a multimedia presentation*		
Other (specify)*		
TOTAL HOURS	**50**	
ECTS CREDITS for the course	**2**	

*** delete as appropriate**

Approved for implementation (date and legible signatures of course instructors in the given academic year):

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