

Notes for teachers

Aim

The aim of the exercises is:

- to help students develop their history taking skills.

Objectives

The objectives are to help students:

- practice asking questions when taking a history
- ask the relevant questions about pain when taking a history
- develop colloquial language in English in a medical context
- understand at a basic level the concept of being patient –centred when history taking

Materials

The materials consist of: five exercises:

- Exercise 1, which deals with the specific questions relating to pain
- Exercise 2, which deals with the questions relating to pain in a dialogue
- Exercise 3 is a pair work exercise leading to free practice
- Exercise 4 is an exercise which looks at a patient-centred approach in communicating with patients
- Exercise 4 is a vocabulary exercise on colloquial language

And a Key

The exercises may be used or adapted with a range of levels.

Methodology

Exercises 1-3 and 5 are more suitable for intermediate/upper intermediate level students. Exercise 4 may be done by students at these levels, but the discussion about the nature of the questions is more appropriate for advanced students.

Exercise 1

- Give the students the exercise and ask them to cover the questions in the right-hand column. Ask them to check that they understand all the words relating to question type in left-hand column.
- Then put the students into pairs and ask them to decide what questions they would ask relating to the items in the left-hand column. You can either ask them to write them down or try to remember them, depending on the level of the class.

- Ask the students to uncover the questions and match the question types to the questions. Point out that the question types may match with more than one question.
- Check if the students have any acceptable variations.
- Check the pronunciation of the sentences rather than just individual words. For example, look at parts of the sentences and see how the words run together, e.g.

A. Can you tell me what the pain is like?



B. Have you had it before?



C. Can you show me where you get the pain?



D. *When did it start?*



E. Does anything relieve it?



F. Did it come on slowly or suddenly?



G. Does it spread anywhere else?



H. Are you aware of anything that brings the pain on?



I.

J. How long have you had the pain?



K. Does anything make it better?



L. Where do you get the pain?



M. Does anything special bring it on?



N. Does anything make it worse?



- Do one or two of the above as examples and then ask the students to see which words naturally run together in speech. Ask them to look at what makes them run together and what they notice about the sounds when words are run together? e.g. the pronunciation of the word *Does* in *Does it....?*; and the whole phrase: *Where do you ...?*
- Ask the students to try to work out how the words they have selected run together. Then check the answers with the class without focusing on the pronunciation of the sentences as a whole. Then at random ask students to select individual phrases to say and then move onto asking students to say the whole sentence.
- If your students are familiar with phonetic symbols you may wish to use them to look at the phrases above.

Exercise 2

- Divide the students into pairs and give them Exercise 2. Explain that they are going to insert each question from the list into an appropriate place in the dialogue, which is the beginning of a history of a patient with acute pancreatitis. You may want to not tell the students the diagnosis and see if they can tell you from the nature of the questions – the radiation of the pain and the nature of the pain are the main clues. Before they do this, you may wish to ask them to look at the questions and see if they can predict what order they will come in.
- When you have checked the answers, you can move straight on to Exercise 3.

Exercise 3

- Give the students the exercise and divide them into pairs, Student A and Student B. Ask them to fold the page and read the dialogue to each other, taking turns at being the doctor. Point out that they should try to role-play without trying to remember the exact words in the dialogue.
- When they have done this ask the students to role-play the dialogue without referring to the sheet.
- When they have each taken the turn of the doctor, you might ask the class to role-play being the doctor and you can be the patient. You could turn it into a game by saying that you can only answer a question if it is grammatically correct or if the pronunciation of the sentence is correct. You can then check if the class has understood the exercise.
- For more free practice, you can make up an illness related to pain, say a headache/ a specific type of headache e.g. migraine, temporal arteritis, subarachnoid haemorrhage/ ulcer/ kidney stone etc and ask the class to take a history from you to arrive at the diagnosis. Or you can put them into pairs and have them do the same. Or give them cards with an illness written on it and they have to take the history from each other

Exercise 4

This exercise is probably better used with more advanced students so that you can have a discussion afterwards with them about the nature and development of the doctor's questions. Students at an intermediate level may be able to do it but may not be able to discuss the question choices in depth.

- Give the students the exercise and explain to them that they are going to look at a dialogue with language and questions similar to what they encountered in exercises 1 – 3 , but they will have to make choices about what is the best question for the doctor to ask at each stage of the dialogue.
- Put them into groups and ask them to decide what is the best question in each case looking at the dialogue from *a patient-centred point of view*. Without going into too great detail, ask the students to decide if:
 - *the doctors question indicates that he/she is listening to the patient by repeating part of what the patient has said*
 - *or developing what the patient has said rather than going off on another track showing that they got the right information. Look, for example, at 2B. The patient said that he still had the pain, so why ask if it is still there? In 2B, the doctor checks the start of the pain and confirms the patient still has it? Does 2A do this?*
 - *Are the doctor's question abrupt or gentle? What makes them gentle?*
 - *Are the questions open? Do they encourage the patient to speak?*
- This should give rise to a lot of discussion, especially with doctors who are used to a textbook approach to history taking [doctor-centred]. Compare the questions in Exercises 1 – 3, which are less complex.
- Allow the students time to explore the different questions fully, looking at why certain questions are not correct.
- Ask the students to role-play as in exercise 3, but focusing on being more patient centred.

Intonation

The exercises have not mentioned anything about intonation, which is very important especially in a patient-centred approach. This is on purpose so that the students are not overwhelmed. If you want to, introduce it, restricting perhaps to rising tones for the questions in Exercises 1-3 and in Exercise 4 a mixture of falling tones to confirm information in statements and questions and rising tones for questions in general and also to be gentler. You might want to demonstrate an absurd dialogue with you as the doctor using only falling tones.

Exercise 5

- Give the students the exercise and ask them in pairs to match the items.
- When you have checked the answers, you may wish to ask the students to explain in their own words what the phrasal verbs mean. Point out the intransitive verbs/inseparable phrasal verbs [come to/come round etc] and show them how specific the meaning is.
- Divide them into groups and give each group a large sheet of paper and a board pen, or acetate and a pen and ask them to write their own questions or sentences using the phrasal verbs. When the students have decided a sentence is correct., they can write it on their paper or acetate.
- Go round checking and helping each group.
- Then bring the class together and look at what they have done.