T3. COMMUNICATION SCRIPTS FOR DAY-TO-DAY COMMUNICATION



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See Communicator Role teacher tips appendix for this teaching tool

Completed by:_____

1. Complete the table below, providing details from your clinical practice over the past month.

Clinical location(s) (include details about when, where, how long, type of service)	Common or repeated communication topics or subjects	Challenging communication topics o subjects

2. Select one of the two examples of common or repeated communication topics or subjects, and then write a patient scenario of no more than three sentences for that topic or subject.

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(continued)

3. You will be drafting a communication script for part of the scenario you just wrote. First, choose one or two communication skills tasks from the six listed below. Then, fill out the corresponding row(s) in the table for your scenario.

Outline the core content used to discuss common or challenging communication scenarios; for verbal communication, you may wish to include some key phrases that you find particularly helpful.

- \Box 1. Initiating the session
- \square 2. Gathering information
- □ 3. Explanation and planning
- \Box 4. Closing the session
- \Box 5. Providing structure
- \Box 6. Building the relationship

Communication skills task ^a	Potential script wording	Content skills to highlight
1. Initiating the session		
2. Gathering information		
3. Explanation and planning		
4. Closing the session		
5. Building the relationship		
6. Providing structure		

a Kurtz S, Silverman J, Draper J. Teaching and learning communication skills in medicine. 2nd ed. London: Radcliffe Publishing. Copyright © 2005. Reproduced by permission of Taylor & Francis Books UK.

T3. SAMPLE SCRIPT #1: BREAKING BAD NEWS - "THE DRIVING TALK"

(continued)

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SCENARIO

- You've just examined a young woman with a sensory motor peripheral polyneuropathy with significant arm and leg weakness and poor proprioception in the lower legs.
- You're concerned about her ability to drive, and you need to discuss this.

• She was referred to you for the leg and arm weakness, so she's not expecting to discuss her driving ability.

SKILLS FOCUS of this script:

- Explanation and planning (Communication skills task #3)
- Closing the session (Communication skills task #4)
- Building the relationship (Communication skills task #5)

Communication skills task	Potential script wording and other tips	CONTENT skills to highlight	PROCESS skills to highlight
3. Explanation and planning	 Begin by asking how the patient perceives her driving ability Provide an assessment of the patient's function in plain language using the content above in the scenario Ask if the patient feels her driving is safe, and depending on the situation, ask "what do you think I'm going to say about your driving?" Pause regularly to gauge reaction to the information Check for body language throughout the interaction (the patient may say little verbally but express a lot of emotion through eye contact, posture, etc.) Allow time for questions 	 Highlight what is needed for safe driving: good eyes, brain, and strong arms and legs Summarize the weakness and sensory loss so the patient has a good understanding of deficits Explain that it is the Ministry of Transportation that makes the final decision about ability to drive; however, physicians are mandated (in some provinces) to report concerns about driving safety if the patient has a condition that may affect their ability to drive 	 Assess patient's starting point Organize information into discrete chunks Regular chunks and checks Pick up and respond to verbal and non-verbal cues Check with patient to determine if she accepts the information and if her concerns are being addressed
4. Closing the session	 Provide support by offering to explore other transportation options Finish by asking if the patient has further questions about what was said or the next steps Offer to discuss again once the patient has had time to reflect on the information further (some will be stunned enough by the interaction that they say very little, but then a few days later, there will be a call). Provide permission for a follow-up call to happen with an agreement to discuss again (this is an example of forward planning) 		 Contract with the patient for next steps Do a final check that the patient agrees with the plan and ask if there are any other questions
5. Building the relationship	 Provide the content in an empathic and sensitive manner Respond with empathy at the reaction (sometimes can be quite forceful and negative; allow the patient to express her emotion). For example, I know the driving was not a topic that you were expecting to discuss with me today. I can see that the information that I have given you is unexpected. This builds on picking up on verbal and non-verbal cues from above and shows the learner is acknowledging the emotion and is reflecting back understanding to the patient 		• Uses empathy to communicate understanding and appreciation of the patient's predicament (overtly acknowledges patient's views and feelings)

T3. SAMPLE SCRIPT #2: SHARING INFORMATION – "TEST RESULTS AND CONSENT" (continued)

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SCENARIO

• You are seeing Mrs. X for a follow-up appointment to discuss the results of a biopsy, which are positive to cancer, and to plan next steps.

SKILLS FOCUS of this script:

- Initiating the session (Communication skills task #1)
- Gathering information (Communication skills task #2)
- Explanation and planning (Communication skills task #3)
- Closing the session (Communication skills task #4)

Communication skills task	Potential script wording and other tips	CONTENT skills to highlight	PROCESS skills to highlight
1. Initiating the session	"Good to see you back, Mrs. X, I can imagine it's been a long two weeks." "As you know, the purpose of today's appointment is to discuss the results of your biopsy. I'm going to start there, discuss what they mean, answer any questions you may have about the results, then move to discussing next steps. Does that sound reasonable?" "Unfortunately the biopsy showed which means " "What are your thoughts at this point?"	Will vary by specialty	 Have results ready Provide privacy Sit down Make eye contact Greet patient with empathy for the wait Set the agenda Provide the result in plain language immediately. Pay attention to reaction Pause after presenting the result and meaning Empathetically acknowledge reaction
2. Gathering information	"I need to get some further history and to ask about your preferences so we can come up with next steps that work for you."	Will vary by specialty	Signpost – provide rationale for needing to ask further questions
3. Explanation and planning	"Based on the results and your history, we have two surgical treatment choices: a lumpectomy or a mastectomy. I am going to describe each procedure, and discuss the risks and benefits. I'll start with the lumpectomy and then move to the mastectomy." "A lumpectomy is a surgical procedure where they go in and remove the cancerous tissue. On the day of surgery[details] "Do you have any more questions before I move on to talk about the risks and benefits of this choice?"	Will vary by specialty	 Categorize Draw pictures Chunk and check Use plain language Pause frequently for questions.
4. Closing the session	"Okay, let's summarize the plan to ensure we are both on the same page. Can you repeat in your own words the next steps?" "Let's talk about what to do if you have not heard back about a surgical date in two weeks or feel you are experiencing changes that are important for me to know."	Will vary by specialty	 Repetition (Repeat OR ask the patient to repeat the plan) Safety net

