Communication Skills

Patient Communication Skills

The Consent Process: Communicating Effectively With Patients And Families Across A Broad Range Of Socioeconomic And Cultural Backgrounds

Evaluation Form

Please rate the fellow's abilities to obtain consent according to the following scale								
Excellent		5	Comments:					
Good		4						
Adequate		3						
Sub-optimal		2						
Unacceptable		1						
Communication Skills			1	2	3	4	5	
1.	Provided adequate and concise information about the procedure				0	0	0	О
2.	Explained the potential risks of the procedure			0	0	0	0	О
3.	Explained the anticipated benefits of the procedure			0	0	0	0	О
4.	Used terminology easily comprehensible by the patient (8th grade level)			0	0	0	0	О
5.	Used open-ended questions to assess patient's understanding			0	0	0	0	О
6.	Allowed sufficient time for the patient to read the consent document				0	0	0	О
7.	Addressed any patient concerns or fears, with cultural sensitivity				0	0	0	0
8.	Addressed patient's family respectfully; answered their questions			0	0	0	0	О
9.	Documented the whole process in the medical record with honesty			0	0	0	0	О
10.	Solicited the patient's or representative's signature with empathy				О	О	0	О
Overall Competence					0	0	0	О
Faculty Signature:								
Fellow Signature:								

- The consent process provides a valuable activity for fellows to learn to communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.
- Consents are obtained prior to invasive studies such as cardiac catheterization and interventions, transesophageal echocardiograms, pacemaker insertions and cardioversions. Consents are also required prior to non-invasive studies such as stress testing.
- The fellows will learn the most effective way of communicating a concise and clear description of the procedure, its risks and benefits. The fellow will also develop the skills to assess the patient's understanding based on the preceding clues.
- Faculty will monitor the fellows during their first month in the catheterization laboratory while obtaining consent form, and will critique their technique of consent and communication skills, as well as proper documentation of the process, until the fellow is felt to be competent to independently obtain consent.
- Evaluation of the consent process is part of the end-of-month global evaluation and the biannual fellow evaluation.
- The objective of this activity is to develop the fellows' ability to communicate critical information to patients, elicit their understanding, and partner with them on the best course to proceed based on their genuine understanding, taking their personal expectations, their cultural and religious beliefs into consideration.

Steps to improve the consent process:

- 1. Write the consent document at an 8th grade (or lower) reading level;
- 2. Use short sentences and keep details separate;
- 3. Use bullets to emphasize key points;
- 4. Emphasize important information by repeating or bolding text;
- 5. Format the document to increase comprehension (e.g., use headers, white space, charts, pictures, diagrams, etc.);
- 6. Define terms in lay language;
- 7. Discuss the consent form with the patient. Highlight key points and ask open-ended questions of the patient to access comprehension;
- 8. Allow ample time for the patient to read, review and make a decision regarding undergoing the procedure. Allow the individual enough time to discuss the study with others;
- 9. Be specific in the consent document & consent process. Patients need to be fully aware of the important details of the procedure; its potential risks and anticipated benefits

Assessing patient understanding:

The burden of ensuring that someone genuinely understands a procedure is upon the physician obtaining the consent, not upon the patient. Hence it is critical to the consent process that the fellow not only field questions but also ask questions. Asking questions can further the discussion, elicit questions from the patient, prompt the patient to think more carefully about the procedure, and help the fellow decide whether the patient has adequately understood the procedure. These questions need to be prepared in advance.

Useful questions will be open-ended and non-directive. Rather than asking for yes or no answers, they ask for explanation because these questions often can be answered in a variety of ways, and do not already contain the correct answer. Open-ended questions are often introduced with "what," "where," "how often," "when," and "please describe." Examples of open-ended questions to be used to assess patient's understanding are:

"Just so that I'm sure you understand the procdure, would you please explain to me what you think we're going to do?"

"Describe in your own words the procedure's benefits and risks."

"What more would you like to know?"

"What is the possible benefit to you in having this procedure? What are the possible risks?"

In contrast, examples of closed-ended and far less useful questions are: "Do you understand?", "Do you have any questions?", "Do you see that there are some risks in having this procedure?". Instead of furthering the discussion, closed-ended questions tend to bring it to a stop.