**USMLE 2 CS**

## CONDUCTING THE INTERVIEW

### Entering the Room

Before knocking on the door and entering the room, concentrate on how you will greet the patient using the usual social amenities. Knock on the door, wait an instant, and then open the door just enough to ask the patient's permission to enter. It is proper to introduce yourself using title, first, and last name, for example: "Hello, Ms. Cleary, I'm Dr. Ron Singh, a senior medical student". Never refer to any patient by first name only. Remain consistently aware of words you are using during this and all phases of the interview; it is often disquieting to patients if physicians use too informal or personal statement, e.g., "How are you" or "I am pleased to meet you". Patients are visiting the medical office or hospital because of an important concern and may be fearful of the visit; therefore, more lighthearted phrases are best avoided. A patient may be placed at ease by asking, "What caused you to come in today?" Patients know you have taken an interest in their concerns when you refer to information they have provided, and this enables rapport to be rapidly established.

Many patients are comfortable to receive you handshake upon introduction. However, this form of greeting may not always be appropriate. For example, in the case of a patient in discomfort, distress, or severe pain, offering a handshake during introduction is not appropriate. In such cases, it may be more appropriate to tend to the patient's discomfort by offering assistance in moving to a more comfortable position. Should a patient be angry or frustrated when you enter the room, it may be more appropriate to omit handshaking during your introduction. In these cases, it is more appropriate to address his/her concerns by focusing your attention to his/her problem and continuing with history taking.

When you enter the room during the CS examination, a draping sheet will be folded and available on an adjacent chair or the examining table. Before you begin the medical interview, apply the drape to cover the patient's lower limbs.

### Interviewing and Collecting Information

For interviewing and collecting information, a highly valued characteristics is the ability to ask clearly worded questions. In general, the more words in the question, the

harder it is to follow, especially if you speak English with an accent that is different from the patient's. Use as few words as needed to express an idea, and use short, nonmedical words. Any person with any level of education or sophistication should be able to easily understand what you are asking and should therefore be able to answer easily. Likewise, speaking relatively slowly improves the chances of being understood in any language, with any accent. If medical terminology must be used, explain the term immediately in lay language before the patients has to ask what the term means. If you wait for the patient to ask for an explanation, you may very well not be given credit by the standardized patient for having maintained lay language. An appropriate use of medical language would be naming a particular disease with an explanation of it in simple terms. For example, "I think you may have an infection of the gallbladder. The medical name for this condition is cholecystitis". Similarly, when suggesting which tests you would like to have administered, say, "I'd like you to have a blood test", rather than "I'd like to run a CBC with differential". To the opposite extreme, do not use slang. Slang gives the impression that the physician is less than professional. Leave it up to the patients to use slang terms. If they do, and you don't know what the term means, simply ask, "What do you mean by that?" Asking for clarification is a sound method in communication skills.