

Day 1: Morning Session

1. Ice-Breaking Activities:

1.1 Getting to know our instructor

Name :

Nickname :

1.2 Getting to know the classmates: Crossword Game

- Have a piece of paper (or a notebook) and a pen ready.
- Start out by asking the students to write their name (either first name or nickname) in capital letters in the middle of the page.
- Each person then moves around the room inviting others to "attach" their names (either first name or nickname) to the crossword.
- Whoever has the most names at the end of the allocated time is the winner!

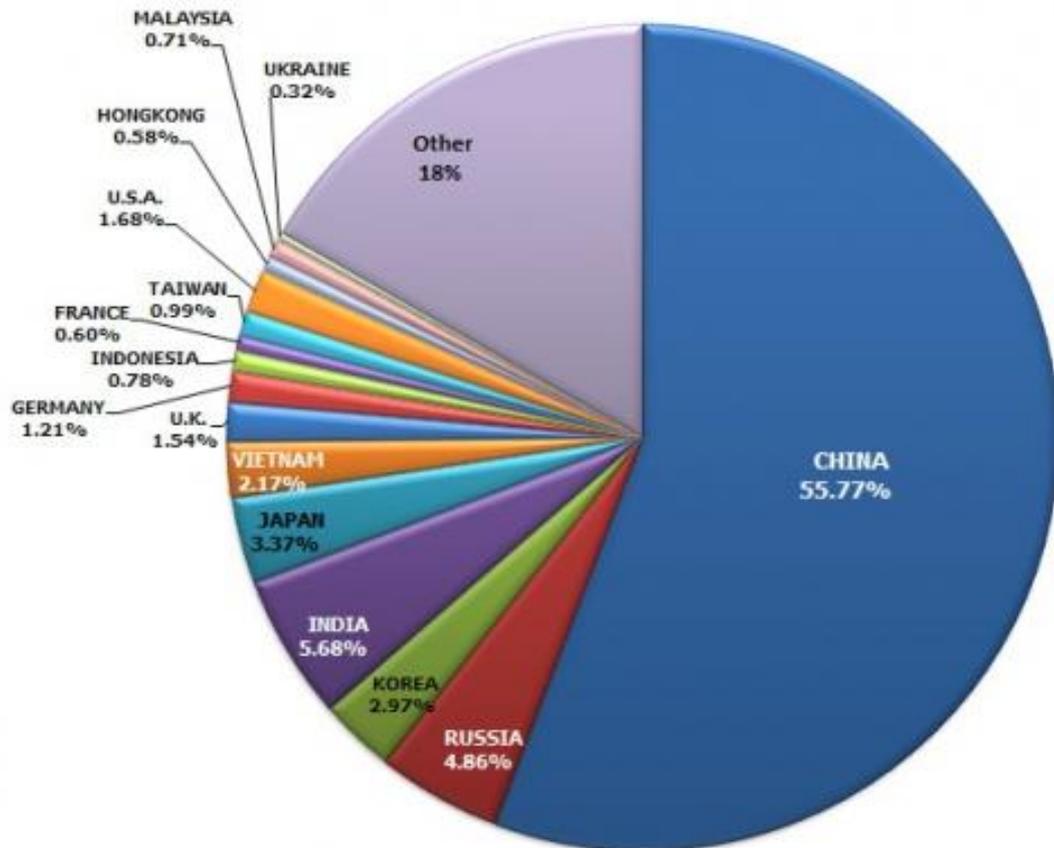
*Please write down
your name here.*



2. Nationalities

Interesting Statistics: International Tourists Arriving in Thailand as of 20 January 2018

Taken from www.atta.or.th/?p=4019



Tourism Statistics for 15 Major Nationalities as of 20 Jan 2018

Vocabulary about Nationalities

.....

.....

.....

.....

3. Vocabulary about illnesses

Can you guess what these sentences mean?



pain

feeling in your body when you have been hurt or when you are ill, sick

- Suddenly she felt a sharp pain in her neck, shoulder, waist, arm, leg, stomach.
- Take an aspirin to relieve the pain.

ache

continuous pain; feel a continuous pain

- I can't sleep because my head aches too bad.
- I have a terrible headache, backache, stomach-ache.

ill

suffering from an illness or disease; not feeling well; sick

- My elder sister is seriously ill in St John's hospital.
- The children started to feel ill an hour after the meal.

sick

physically or mentally ill; wanting to vomit

- I feel very sick, I don't think I can work today.
- Be careful with the cake, too much of it can make you sick.

sore

painful (and often red) because of infection or because a muscle has been used too much

- I have a sore throat, I mustn't take that cold drink.
- She says her stomach is still sore after the operation.
- His feet were sore after the bicycle trip.

illness

the state of being physically or mentally ill

- Our secretary missed a lot of work through illness last month.
- Flu can be a serious illness if you aren't careful enough.

disease

serious illness, often caused by infection

- Peter's uncle suffers from a rare blood disease.
- A fatty diet increases the risk of heart disease.
- The government is planning further health measures to prevent the spread of disease.

heal

become healthy again; make something, somebody healthy again, make somebody feel happy again

- As I see it will take a long time for your wounds to heal.
- This ointment will help to heal your scratches.
- The tea you made really healed me.

cure

make somebody or something healthy again after an illness; make an illness go away

- He was seriously ill for a long time, but the doctor cured him at last.
- Scarlet fever is a serious illness, but it can be cured fairly fast.

cure

medicine or medical treatment that cures an illness; the act of curing or the process of being cured

- There is no known cure for this illness but the it can be treated.
- I'm afraid you must be taken to hospital for the cure.

treat

give medical care or attention to somebody or something; deal with something or somebody

- I was treated for flu, but later I was diagnosed with pneumonia.
- This illness is usually treated with antibiotics and a strict diet..

treatment

(the way or process of) curing an illness or injury or making somebody look and feel good; the way of dealing with something or somebody

- Doctors apply various treatments for this illness.
- My sister goes to a wellness centre to receive beauty treatments.

diagnose

define what an illness or the cause of a problem is

- The blood test is used to diagnose all kinds of diseases.
- She was diagnosed (as) (a) diabetic in her early childhood.

diagnosis

medical description of an illness or condition

- The doctors didn't share every detail of the diagnosis with the patient's family.
- We had to wait a lot for the exact diagnosis after the examination.

injury

harm done to the body, for example in an accident

- They were lucky to escape the fight without serious injuries.
- There were only minor injuries in the crash.

injure

harm somebody or yourself physically, especially in an accident, receive/suffer an injury

- He injured his finger when he was cutting the meat.
- Nobody was killed in the accident, but two people were seriously injured.

wound

an injury to part of the body, especially one in which a hole is made in the skin

- He died from the wounds that he had received in the crash.

- He was taken to hospital although his wounds didn't seem too serious.

cut

a wound caused by something sharp

- He had such a deep cut on his arm that he was taken to hospital.
- The victim had several cuts on his chest, still he survived.

bruise

a blue, brown or purple mark on the skin after somebody has fallen

- He was covered in bruises at the end of the football match.
- The man came to the surgery with a huge bruise over his eye.

scratch

rub your skin with your nails, usually because it's itching; a mark or a small cut or injury made by scratching

- The cat continuously scratched itself behind the ear.
- She had a long scratch on her arm when she came out of the rose garden.

infection

illness caused by bacteria or a virus; the act or process of causing or getting a disease

- Wash your hands carefully to decrease the risk of infection.
- She almost died from blood infection.

inflammation

a condition when a part of the body becomes red, sore and swollen because of infection or injury

- My knee was twice the size of the other one due to the inflammation.
- You had better not eat fatty food so soon after your stomach inflammation.

symptom

a change in your body or mind that shows that you are not healthy

- You don't necessarily need a doctor with symptoms like a headache or sore throat.
- Depression can cause physical symptoms, too.

temperature

the measurement of how hot your body is

- have a temperature – when your temperature is higher than normal due to illness
- I feel so weak, I think I have a temperature.
- She had such a high temperature that she was immediately taken to hospital.

fever

a medical condition in which someone has a temperature that is higher than normal; a particular type of disease with high temperature

- Did you take aspirin to reduce the fever?
- Our daughter has been diagnosed with scarlet fever.

cold

illness affecting the nose and/or throat, making you cough and/or sneeze

- I think I caught a cold on the ice rink yesterday.
- She can't come to school, she's in bed with a cold.

flu

a very bad cold, an infectious disease with fever, pains and weakness

- Please don't visit us this week, the whole family has the flu.
- If you're not careful enough and you don't take antibiotics, you may even die from the flu.

vomit

discharge stomach contents through the mouth

- There must have been something wrong with the food as both children vomited shortly after the meal.

- I'm afraid I'm pregnant; I vomit after getting up every morning.

medicine

a substance that you drink or swallow so as to cure an illness

- You look so pale. Haven't you taken your medicine this morning?
- The doctor prescribed three kinds of medicine for me.

antibiotics

medicine that kills bacteria and cures infections

- My mum's throat infection went away after she started the antibiotics.
- Hot tea won't be enough to cure your flu, I think you also need antibiotics.

pain killer

kind of medicine that takes away some or all of the discomfort of an illness or injury

- I had such a horrible headache last night that I took two pain killers.
- She says she doesn't think it's a good idea to take pain killers too often.

blood pressure

the rate at which blood flows through the body

- Drink some coffee if you feel your blood pressure is too low.
- High blood pressure increases the risk of having a heart attack.

pulse

the regular beat of blood as it is sent around the body

- The doctor started the examination with taking my pulse and blood pressure.
- He has such a weak pulse that it's hard to feel.

x-ray

a photograph of a somebody's bones and organs

- They took x-rays of my knee to make sure it wasn't broken.

- The doctor says that the x-ray has proved his suspicion of cancer, but I don't believe him.

patient

a person staying in a hospital or medical facility

- The doctor examined the patient very carefully but he didn't find any disorder.
- There were so many patients in the doctor's surgery that I didn't wait and I went home.

surgery

a place where a doctor or dentist sees patients; medical treatment of injuries or diseases involving cutting open somebody's body

- I wanted to see a doctor but the surgery was closed.
- I hope they can cure me with medicine and I don't need undergo surgery.

operation

cutting open a part of somebody's body in order to remove or cure a part

- The operation was successful but the patient died.
- The doctor says I can hardly escape an operation.

operate on somebody (for something)

cut open a part of somebody's body in order to remove or cure a part

- He soon recovered after he was operated on for appendicitis.
- The doctor ordered to take my brother to hospital and they will operate on him tomorrow.

operating theatre

a room in a hospital used for medical operations

- The patient died on the way to the operating theatre.
- She felt nervous as she looked round the operating theatre.

Illness expressions

- feel ill, sick
- have a temperature
- have a pain in your back, chest, waist, arm, shoulder
- have a headache
- feel weak
- feel dizzy
- suffer from stomach cramps
- have a swollen, sprained ankle, wrist, foot
- have a lump
- have a broken leg
- have a fracture
- burn, cut a finger
- sprain an ankle
- be allergic to antibiotics
- produce an allergic reaction
- come down with a cold
- be in bed with a cold
- have a heart attack, stroke
- suffer from asthma, malnutrition, diabetes
- fight cancer, depression, addiction, alcoholism
- (go to) see a doctor
- examine a patient
- take, feel your pulse
- take, measure your temperature
- diagnose an illness, disease
- diagnose a condition, disorder
- prescribe medicine

- undergo an examination, operation
- dress a wound
- put on a plaster
- give an injection
- have a blood test
- prevent the spread of disease
- enhance, build immunity to a disease

Group Activity: Think of a way or ways to group or organize the expressions above. In other words, think about how to put the expressions into categories. Feel free to use your creativity here! [Notes to instructors: Answers may vary.]

Common Illnesses and Diseases in English

- | | |
|-----------------|---------------------|
| ● flu | ● appendicitis |
| ● cold | ● hepatitis |
| ● diarrhea | ● heart attack |
| ● pneumonia | ● heart disease |
| ● mumps | ● stroke |
| ● measles | ● arthritis |
| ● chickenpox | ● asthma |
| ● scarlet fever | ● lung cancer |
| ● tonsillitis | ● diabetes |
| ● bronchitis | ● amnesia |
| ● indigestion | ● nervous breakdown |
| ● ulcer | |

Medicine, Medical Equipment and Tools

- | | |
|----------|-----------|
| ● pill | ● capsule |
| ● tablet | ● syrup |

- ointment
- eye drops
- injection
- tranquilizer
- pain-killer
- antiseptic
- antifebrile
- dressing
- bandage
- cast
- brace
- gauze
- plaster
- elastic tape
- thermometer
- stethoscope
- syringe
- forceps
- scissors
- oxygen mask
- blood pressure monitor
- crutches
- wheelchair

2. Asking questions

Getting to know other people

Common mistakes

- | | |
|---|--|
| <input type="radio"/> What you like? | → What DO you like? |
| <input type="radio"/> What you said? | → What DID you say? |
| <input type="radio"/> Who you work with? | → Who DO you work with? |
| <input type="radio"/> Who you talked to? | → Who DID you talk to? |
| <input type="radio"/> Where you live? | → Where DO you live? |
| <input type="radio"/> When you started learning English? | → When DID you start learning English? |
| <input type="radio"/> Why you like Thai food? | → Why DO you like Thai food? |
| <input type="radio"/> How you know? | → How DO you know? |
| <input type="radio"/> What your name? | → What IS your name? |
| <input type="radio"/> Where you from? | → Where ARE you from? |
| <input type="radio"/> How many brothers you have? | → How many brothers DO you have? |

Asking basic questions

- What do you do? / What do you do for a living? / What's your job?
- Where do you work?
- What do you like?
- What do you like to do in your free time?
- Where do you live?
- Where are you from?
- Are you Thai?

- Do you like.....Thai food / Korean series / watching movies / shopping.....?
- What is your favorite.....food / movie star / sport / place / color...?
- Can youswim / cook / speak Japanese / drive / play the piano?



Write 5 questions and then ask your friends these questions.

1. _____
2. _____
3. _____
4. _____
5. _____



What do these sentences mean?

- I'm ill. I don't feel well. I need a doctor. I must see a doctor.
- What are the consulting hours of the ENT (ear, nose and throat) specialist?
- Do I have to make an appointment?
- I've got a high temperature.
- I feel really rough. I'm shattered/exhausted.
- Could you check my blood pressure? I've got high blood pressure.
- There's a sharp pain here. I've got a pain in my limbs.
- I feel dizzy. I've got a kidney problem. I've lost weight.
- I always feel bad after meals. I've got a stomach ache.

- I've got a splitting headache. I often have nosebleeds.
- I have diarrhea. I've lost my appetite.
- I've got circulation problems. I sweat all night.
- My ears are buzzing. I've got an upset stomach.
- I've sprained my wrist/ankle. My hand/foot is badly swollen.
- I think I've pulled a muscle in my leg/arm.
- I've had scarlet fever, mumps, and measles.
- Is it something serious? Is this a common problem at my age?
- When will the tests results come in? Are you going to run more tests?
- Do I have to be operated on? Will I need surgery?
- How long do I have to stay in hospital?
- I hope there won't be any complications.
- Could you prescribe some medicine for me?
- How often should I take this medicine?
- Shall I come back next week if I don't get better?

When do you say these sentences?

- What's the matter?
- Where's the pain?
- Have you taken your temperature?
- For how long have you been feeling ill?
- Have you made an appointment?
- Let me take your pulse, please.
- I'll measure your blood pressure.
- Your blood pressure is rather high.
- Your blood pressure is too low.
- Can I have a look?

- Where does it hurt?
- Does it hurt here?
- Have you got any other symptoms?
- What infectious diseases have you had?
- What have you eaten/drunk?
- Have you been injured?
- I'll dress the wound and put a plaster on your arm.
- You must follow a diet, you need to rest and you shouldn't worry.
- Your test results have come in. The blood test came back negative.
- You should consult a specialist.

Think about questions that you may have to ask while you are on duty. Write them in English and then ask your friends these questions. You can also do a mini role-play.



Write 5-10 questions and then ask your friends these questions.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

10. _____



Day 1: Afternoon Session

1. Different departments in hospital

Vocabulary

A&E

BRITISH the accident and emergency department of a hospital

consulting room

BRITISH a room where a doctor examines a patient and discusses their medical problems with them

day room

a room in a hospital where patients can go during the day to watch television, read, or talk

delivery room

a room in a hospital where women give birth

dispensary

a place in a hospital where you can get medicines and drugs

emergency department

the part of a hospital where people go when they are injured or suddenly become ill

ER

AMERICAN emergency room: the A&E in a hospital

housekeeping

the department of a hotel or hospital that is responsible for cleaning rooms

ICU

an intensive care unit in a hospital

maternity ward

the part of a hospital where pregnant women or women who have just given birth to babies are looked after

nursery

an area in a hospital where new babies are looked after until they go home

operating room

AMERICAN an operating theatre

operating theatre

a room in a hospital where doctors perform medical operations

padded cell

a room in a hospital for mentally ill people, with soft material on the walls so that they cannot hurt themselves

pharmacy

the part of a shop or hospital where medicines are prepared

sickroom

a room where someone who is ill rests or gets medical treatment

surgery

a room in a hospital where doctors do surgery

ward

NOUN

a large room in a hospital with beds for people to stay in

2. Giving Directions

Useful phrases

- I'm lost.

- Where is.....?
- How can I get to.....?
- Do you know how to get to.....?
- You're going the wrong direction.
- I'm sorry. I don't know.
- I'll find someone to help you.
- go straight / go straight ahead / go straight on
- keep going
- cross the road
- turn right / take a right / take a right turn
- turn left / take a left / take a left turn
- on the right / on the right hand side
- on the left / on the left hand side
- When you see....., turn right / left.
- You'll see.....on your right.
- You'll walk past.....
- next to...
- between....and....
- in front of...
- opposite...
- roundabout
- intersection / junction
- T-intersection / T-junction

- Take a right / left turn at the T-junction



Task 1: Draw a map and practice asking for and giving directions.

Task 2: Think of a destination. Walk around and ask your friends how to get there.

Model Dialogue

A: Excuse me, I need some help. I think I'm lost.

B: Where are you going?

A: I'm looking for the tourist information center. Do you know where it is?

B: Yes. From here, you just keep going straight up this road. When you get to the intersection, turn right.

A: Ok.

B: Then you go straight ahead and take the second left and you'll see it on your right.

A: Thank you very much.

B: No worries.

3. Giving Instructions

Useful Expressions

Please

Can you, please?

Would/Could you please

Examples:

Please stand on the scales.

Can you open your mouth, please?

Can you bend your leg/arm, please?

Can you turn your head to one side for me, please?

Can you roll up your sleeve, please?

Can you put your arm out straight, please?

Could you please sign your name here?

Activity: Think about instructions that you may have to give while you are on duty. Feel free to use vocabulary or expressions you have learned today. Write them in English and say them to your friends.



1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____



Day 2: Morning Session

1. Useful phrases

Offering help

- May I help you?
- Can I help you?
- Are you looking for something?
- Would you like some help?
- Do you need some help?
- What can I do for you today?

Asking for help

- Could you (for me) ?
- Would you mind V+ing?
- Could you possibly . . . ?
- Do you have a minute?
- Can you spare a few minutes?
- Could you do me a favor?
- Could I ask you a favor?
- Can I ask you to . . . ?
- I need some help (if you have time).
- (If you're not busy) I could use your help.

Responding to help requests

- Okay, no problem.
- Sure, I'd be glad to.
- Sorry, I'm (kind of) busy now.
- I'm sorry. I don't have time right now.

Pair up. Think about three situations where you may have to offer some help to a patient or customer. Write three short dialogues and act them out.



Dialogue 1



Dialogue 2



Choose your favorite one and do a role-play in front of the class.



2. Vocabulary about medical specialists

Allergist or Immunologist - conducts the diagnosis and treatment of allergic conditions.

Anesthesiologist - treats chronic pain syndromes; administers anesthesia and monitors the patient during surgery.

Cardiologist - treats heart disease

Dermatologist - treats skin diseases, including some skin cancers

Gastroenterologist - treats stomach disorders

Gynecologist - treats diseases of the female reproductive system and genital tract.

Internal Medicine Physician - treats diseases and disorders of internal structures of the body.

Neurologist - treats diseases and disorders of the nervous system.

Obstetrician - treats women during pregnancy and childbirth

Oncologist: tumour specialist

Ophthalmologist - treats eye defects, injuries, and diseases.

Orthopaedic Surgeon - preserves and restores the function of the musculoskeletal system.

Pathologist - diagnoses and treats the study of the changes in body tissues and organs which cause or are caused by disease

Pediatrician - treats infants, toddlers, children and teenagers.

Plastic Surgeon - restores, reconstructs, corrects or improves in the shape and appearance of damaged body structures, especially the face.

Podiatrist - provides medical and surgical treatment of the foot.

Psychiatrist - treats patients with mental and emotional disorders.

Urologist - diagnoses and treats the male and female urinary tract and the male reproductive system

Exercise: Match the words on the left to their definitions on the right.

cardiology
neurology
radiology
pharmacy
psychiatry
oncology
gynecology
podiatry
endocrinology

study of cancer
study of medicine
study of the brain
study of behavior
study of the body's movement
study of hormones
study of the female reproductive system
study of the foot
study of the heart

Day 2: Afternoon Session

1. Do's and Don'ts at medical offices

What do you think about these do's and don'ts at medical offices? In small groups, discuss these statements.

1. Medical offices are professional workplaces and staff need to dress, speak, and act professionally.
2. Patients are customers and customer service should be paramount. Give all patients the utmost respect and practice compassion, compassion, and compassion.
3. If it didn't get documented (on paper or electronically), it wasn't done. If it didn't get documented, you can't charge for it.
4. Never enter an exam room without knocking.
5. Confirm patient identity (name, date of birth, etc.) before giving injections, taking specimens or performing a procedure.

6. Remove very sick or very angry patients from the front desk immediately. Take the sick ones to exam rooms and take the angry ones to the manager's office.
7. Do not use medical jargon with patients. If they don't know what you're talking about, they might be too intimidated to ask.
8. Wash your hands often. No matter what you do in the practice.
9. The office should be CLEAN, fresh and up-to-date. No dying plants, no magazines more than 9 months old, no dust bunnies behind the doors, no stained seating or carpets.
10. Train staff to apologize, and to apologize sincerely.
11. Complaints from patients and staff need to be addressed in 2 weeks or less.
12. Medical equipment is to be maintained and tested annually for safety and performance.
13. Patients don't understand insurance. Be the expert.
14. Shred confidential practice paperwork and patient-identified information on-site.
15. Keep medications (including sample medications) in locked cabinets and use a good inventory system to log the use and replacement of stock.
16. Strive to meet patients at their communication level. Use graphics, translated materials and interpretive services when needed.
17. Don't expect patients to be on time for their appointments when the provider isn't.
18. Don't make copies from copies.

Work in pairs. Think about a problematic situation that you may have been in or may be in. What is the problem? How do you deal with it? Write a dialogue.



Work in pairs. Think about another problematic situation that may happen at your workplace. Let your friends think about how they will deal with it. Prepare for a role-play.



2. Words of encouragement

Expressing sympathy:

- That's too bad.
- That's so sad.
- I'm sorry. What bad luck!
- I hope things get better soon.
- It would be OK soon.
- I hope you feel better soon.
- What a pity!
- Oh, that's terrible.
- Be patient, it would be better soon.
- I can't tell you how sorry I am.
- Oh, I am sorry to hear that.
- I know how it feels.

- I take my sympathy to you.
- You must be very upset about it.
- I sympathize with your condition.

Responding:

- It's very kind of you.
- Thank you very much.
- It would be OK, thanks.
- Thanks for your sympathy.
- Thanks for your support.

30 phrases for encouraging someone in English

When you want someone to try hard, keep going, or not give up, you can "encourage" them. Here are some phrases that you can use for encouraging someone.

Phrases to use when someone hasn't started yet.

You can say these phrases to someone who's trying to decide whether to do something that seems difficult or risky:

1. Give it a try.

Example: Your friend has never driven a car with a manual transmission. You offer to let her drive your car, which has a stick shift.

2. Go for it.

Example: One of your students is thinking of applying to a university in the U.S. and asks if you think it's a good idea.

3. Why not?

Example: Your wife asks if you think she should take an acting class.

4. It's worth a shot.

Example: Your brother likes a really beautiful woman who lives nearby. He asks if he should ask her on a date. You think she might say no, but you encourage him anyway.

5. What are you waiting for?

Example: Your friend has been talking about quitting his job and starting his own company. You think he should do it soon.

6. What do you have to lose?

Example: Your roommate sees a job opening. She seems like she wants the job, but she's hesitating to apply for it. You think she should go ahead and apply.

7. You might as well.

Example: Your sister will be able to finish school a year early if she takes a few extra difficult classes, but isn't sure if she should. You think it's a good idea.

8. Just do it.

Example: Your friend is thinking about asking his girlfriend to marry him, but he's not sure. You want him to stop worrying and make a decision.

Phrases to use when someone is already doing well

You can "encourage" someone to continue doing what they were already doing:

9. There you go!

Example: You're teaching your daughter to swim. You told her to kick her legs. She's doing a good job.

10. Keep up the good work.

Example: You are a coach for your daughter's soccer team. Your team won a match and everyone played well.

11. Keep it up.

Example: One of your employees is doing a great job, so you encourage her to continue.

12. Good job.

Example: A student that you tutor got a good grade on her test.

13. I'm so proud of you!

Example: Your boyfriend's band was just featured in a magazine story.

Phrases to use when someone is having trouble

These phrases are ways to tell someone to keep trying:

14. Hang in there.

Example: Your sister is in medical school. She tells you about how hard her classes are and the number of hours she has to spend studying.

15. Don't give up.

Example: You're teaching your friend how to shoot a bow and arrow. He keeps missing the target and seems frustrated.

16. Keep pushing.

Example: You're at the gym with your friend, who's out of shape. He seems tired and ready to stop, but you want him to continue.

17. Keep fighting!

Example: You're at a baseball game and your team is losing, so you yell this out.

18. Stay strong.

Example: Your friend has cancer and is very sick. You want him to keep having hope that he will recover.

19. Never give up.

Example: You're playing chess with your nephew. You're winning, but you want to teach him that he should keep trying to win, even when it seems hard.

20. Never say 'die'.

Example: You're playing a soccer game. Your team is losing badly, but you want your teammates to keep trying to win.

21. Come on! You can do it!

Example: You're watching your friend play a video game. He's almost at the end of the level, but the time is running out.

Phrases to use when someone is facing a hard decision

These phrases are ways to tell someone to keep trying:

22. I'll support you either way.

Example: Your sister is thinking about divorcing her husband. You don't want to give her advice, but you want her to feel that you support her.

23. I'm behind you 100%.

Example: One of your employees wants to change a policy in the department that he manages. You agree with the change.

24. It's totally up to you.

Example: You're helping your girlfriend shop for a used car. She finds a car that she might want to buy, but she's not sure if it's a good choice. She can't make up her mind.

25. It's your call.

Example: You're helping your girlfriend shop for a used car. She finds a car that she might want to buy, but she's not sure if it's a good choice. She can't make up her mind.

Phrases to inspire people

You wouldn't use these phrases often in regular conversation, but in writing or speeches they sound very inspirational:

26. Follow your dreams.

27. Reach for the stars.

28. Do the impossible.

29. Believe in yourself.

30. The sky is the limit.

Work in pairs or in small groups. Think about a situation where you may need to encourage someone. Write a conversation and act it out. You may want to mime and let your friends guess what is happening before doing a role-play again with the sound!



let's play

1. Phone Calls



Handling Phone Calls

Telephone Call Receiving Procedure

You Should Know:

- Your system first. You should be able to identify what is external and what is internal call.
- How to transfer a call.
- Some frequently use telephone code
- Country code for outbound calls
- How to put your caller in hold
- How to use different phrases while talking
- How to receive other's call in your phone, etc



A: During Call:

- ✓ People easily become friendly and feel happy if you call him by his name. So, first ensure how should you address him and then call him by his name.
- ✓ While talking for quite a long time shows your caller that you are eagerly listening to him. So sometimes making noises like “hmm”, “yes”, “ok”, “I understand” can make the conversation spontaneous.

- ✓ Receiving call demands deep attention. If you talking over telephone and at the same time doing other business then you cannot concentrate on anything.
 - ✓ So, if you really have to finish another job then it is better to hold the caller or tell him that you will call him after a certain period of time.
 - ✓ Make your tone as friendly as possible. Try to smile while talking, the way you talk reflects in your tone.
 - ✓ Don't neglect any call. Take it as a business opportunity for your organization.
 - ✓ If you or the caller cannot listen to other then offer him to call back.
 - ✓ Sometimes by hearing the tone you may not identify whether you caller is male or female. It is better to ask "How should I address you?" or "May I have your name please?"
 - ✓ If you need to transfer any call then say "Please allow me to transfer your call to X. Could you please hold down for a minute?" After that if the caller allows you and says Yes or Ok then transfer the call.
 - ✓ If you found the extension is not reachable or dead then say "Thanks for holding. But I am afraid X is not available. Would you like to leave a message for him or call back later?"
 - ✓ While finishing a conversation say "Thank you Mr. X for calling. Have a nice day."
- Some common phrases are:
- "May I have your name please"
 - "May I have your contact number please"
 - "Mr. X please let me repeat the message.....Is that all right?"
 - "Mr. X could you please hold down for a minute?"

Adapted from: <https://www.linkedin.com/pulse/telephone-call-receiving-procedure-hospitality-gajanan-shirke-mih>

PATIENT-CENTERED PROFESSIONALISM

- Why must the medical assistant greet patients and all visitors to the medical office in a professional manner?
- Why is it important that the medical practice information brochure be structured to anticipate patients' most common nonmedical questions?

MANAGING THE TELEPHONE

Every caller who phones the medical office forms an impression of the physician and all health care workers in the office. In fact, people often form a mental picture of the person they are speaking with according to the way his or her voice sounds on the telephone. When people talk face to face, an impression is formed based on many factors. When talking on the telephone, a speaker's personality is projected by the voice alone. The receptionist's voice should be businesslike, courteous, pleasant, and friendly.

Telephone Voice

The quality of your voice is important because it is a major way to express your ideas to others. A person's voice tends to project that person's personality to listeners. The voice is a valuable tool to promote a professional image. You have probably heard this before, but it is true: if you smile while talking on the phone, callers can tell.

Tone

Your tone, or the sound of your voice, should be expressive and pleasant not monotone. The pitch (highs and lows) should be low because this projects and carries the voice better and tends to be calming. When emphasizing a word or important point, the pitch should be raised. Raising the inflection of the voice at the end of a sentence is useful because people tend to remember what they heard last.

Volume

The volume used when delivering a message must be appropriate for what is being said

and for the physical condition of the patient. Speaking loudly is irritating to most patients. They may feel they are being spoken to rudely (e.g., “yelled at”) or disrespectfully.

Clarity

You need to speak distinctly so that it will be easy for patients to understand your message. Patients also need to understand the terms used. Speak in lay terms (nontechnical terms); the message is lost if the patient does not understand the terminology. Pronounce words correctly, and ask patients to pronounce or spell their last name if you are unsure how to say it correctly.

Rate of Speed

If you speak too rapidly, you will not be well understood and waste time repeating yourself. Speaking too slowly causes your words to sound disconnected, which can also irritate the listener. Speaking too quickly or too slowly can make it difficult for the listener to follow the conversation, and the person may lose interest. Speaking clearly requires that you adjust your rate of speed according to the listener’s needs.

Telephone Etiquette

The word etiquette essentially means “manners.” Using good etiquette on the medical office telephone helps make a good impression on those who call. Good telephone manners reflect the qualities of pleasantness, promptness, politeness, and helpfulness. Guidelines for proper telephone etiquette follow. When making phone calls, always know the purpose of why the call is being made. You want to present a favorable impression on the patient that you are organized and capable of handling their needs. If you have told a patient you would return their call at a certain time, do it.

Before the Call

1. Prepare yourself by checking your body posture.
2. Make sure you have the supplies to take messages (pens, paper, message pad, appointment book, and watch to record time).

When Speaking with the Caller

1. Always identify yourself and the office so that callers know they have reached the correct number (e.g., “Good morning, Westside Medical Office, this is Lisa. How can

I help you?"). Use a greeting that is going to give the caller the impression that the medical office staff is professional.

2. Be as courteous over the telephone as you would be with someone face to face.

3. Avoid slang terms and technical terms.

4. Listen attentively. Do not interrupt callers until they finish saying everything they want to say. If you speak too quickly, an important fact may be missed. Do provide feedback to let people know you are listening. Sound alert and helpful.

5. Think about how the caller feels. Be empathetic and show concern for what a patient is saying. The patient's needs are critical to the medical practice. Concentrate on what protocols established by the physician. When this information is firmly and competently relayed, callers gain confidence in the office's ability to assist them. Often a new patient will call and request directions to the facility; it is important that this information be provided accurately and with clarity.

6. Ask questions if you do not understand something.

7. Listen for overtones; much can be learned from a person's tone of voice and rate of speech.

8. Take notes to help you remember the important points and to gain clarification, especially date and time.

9. Give clear explanations.

10. Try to avoid placing callers on hold. When it is necessary, ask the caller first, and thank the caller for holding when returning to the line. Be sure their time on hold is minimal.

When the Call Is Over

Leave the caller with a pleasant feeling when the conversation is finished (e.g., "Thank you for calling, Ms. Jones"). Remember that the first impression of the medical office staff will stay with the caller long after the call is over.

Incoming Calls

When the medical assistant uses proper telephone techniques, screening incoming calls becomes easier. Before picking up the receiver, discontinue any other conversations

or activity (e.g., eating, chewing gum) that can be heard by the calling party. Procedure 26-3 explains the proper techniques for answering a multiline telephone in a medical office. When a caller requests to speak to “the doctor,” the medical assistant can use these techniques to process the requests in a professional manner. Calls from other physicians should be put through to the physician promptly, if he or she is available.

Tact must be used when a caller requests to speak to the physician. The callers must never feel that the physician is trying to avoid them. It is best to acknowledge that the physician is not available or is with a patient before asking for the caller’s identity. If the caller wants to hold for the physician, keep the caller informed about what is happening (e.g., “The doctor is still unavailable. Would you like to continue to hold?”). Always offer to take a message or ask “would you like me to transfer you to Ms. John’s voicemail?”

Office policy should list the types of situations for which the medical assistant can interrupt the physician. Table 26-1 provides the protocol to be used as a guide when certain situations arise. Medical assistants are not permitted to exercise independent decisions and must limit their actions to preset

protocols established by the physician. When this information

is firmly and competently relayed, callers gain confidence in the office’s ability to assist them. Often a new patient will call and request directions to the facility; it is important that this information be provided accurately and with clarity.

Placing the Caller on Hold

The telephone in a medical practice is in constant use. Most offices have more than one telephone line, and more than one call can come into the office at the same time.

Telephone Messages

When you take a message, certain information should be obtained. Remember, always record what the patient tells you. Write the message in a duplicate telephone logbook. Give the original to the appropriate person for follow-up. Utilize copy messages that leave a copy within the message book, but always remember to tear out the original.

Outgoing Calls

You must also be prepared to place outgoing calls. Have all needed information available before making the call. Before dialing the

number, always listen for a dial tone. Many times a call may be coming in to the office at the same time you are trying to dial out. In this case, a loud noise on the phone line will be heard. Outgoing calls that medical assistants may need to make include the following:

- Changing or confirming a patient's appointment.
- Making outpatient appointments or patient referrals.
- Ordering supplies or laboratory forms.
- Calling in prescriptions and/or refills.

Long-Distance Calls

When you need to call a person or company in a different state, it is important to know in which time zone the person or company is located

Handling Rude or Impatient Callers

- Stay calm and speak slowly. Getting angry will only make matters worse.
- Be diplomatic and polite.
- Show willingness to resolve the problem.

- Think like the caller. Remember their problems or concerns are important.
- Offer to have the office manager talk to the caller. Keep in mind the patient needs to feel important.

Adapted from:

http://www.coursewareobjects.com/objects/evolve/E2/book_pages/klieger/images/KliegerChap26.pdf



TABLE 26-1

Protocol for Screening Telephone Calls

Type of Call	Action Taken by Medical Administrative Assistant	Call Handled by Whom
Patient requests appointment	If not a potential emergency, schedule appointment.	Medical administrative assistant
Patient requests prescription refill	Take a message with medication name and patient's pharmacy name and number. Send message with patient's medical record to physician.	Physician will call pharmacy if approved; clinical medical professional will phone patient to inform patient as to action taken by the physician (refilled or not refilled).
Patient asks to talk with physician or clinical medical professional because patient is ill or needs some medical information	Take a message, send message with patient's medical record to physician or clinical medical professional. (Depending on the severity of the patient's illness, the call may need to be transferred immediately to the physician or clinical medical professional.)	Physician or clinical medical professional
Patient is returning a call to the physician or clinical medical professional	Transfer call directly to physician or clinical medical professional as requested.	Physician or clinical medical professional
Another physician calls for the physician	Transfer call directly to physician as requested; no need to ask the reason for the call.	Physician
Outside laboratory calls with test results	Transfer call directly to individual requested by the laboratory.	Identified staff member
Patient is uncomfortable identifying the reason for calling	Ask the patient if the call is an emergency. If not, ask the patient if you can have the clinical medical professional return a call to the patient.	Clinical medical professional
Patient calls for test results	Take a message; send message with patient's medical record to physician or clinical medical professional.	Physician or clinical medical professional
Patient calls with insurance or billing question	After confirming the identity of the patient and if the patient is entitled to the information, answer the patient's question. Some information may not be able to be released over the phone and may need to be mailed directly to the patient's home.	Medical administrative assistant
Insurance company calls requesting information on a patient	Identify requested information and identity of caller. Usually, only limited information may be given over the phone, and the caller should send a written request for information that has been authorized by the patient.	Medical administrative assistant
Personal calls for a member of the office staff	Transfer directly to the staff member. If the call is for the physician and the physician is with a patient, notify the caller of that fact and ask if you should interrupt (i.e., "The doctor is with a patient right now; would you like me to interrupt?"). NOTE: Follow office protocol regarding physician interruptions.	Identified staff member
Administration calls for a member of the office staff	Transfer directly to the staff member. If the call is for the physician and the physician is with a patient, notify the caller of that fact and ask if you should interrupt (i.e., "The doctor is with a patient right now; would you like me to interrupt?"). NOTE: Follow office protocol regarding physician interruptions.	Identified staff member
Patient has a complaint	Attempt to handle the situation if at all possible; otherwise, take a message or transfer the call to the appropriate individual. If necessary, notify physician of complaint.	Medical administrative assistant or identified staff member
Patient has been poisoned	Immediately give caller telephone number of poison control center and obtain identification of patient. Poison control centers are properly equipped to handle poisonings in a rapid manner; assist with emergency help as appropriate.	Notify physician, and document call in patient's medical chart
Pharmaceutical sales representative wants appointment to give sales talk to physician and clinical medical professional	Make appointment under the guidelines established for the office.	Medical administrative assistant
Office supply sales representative	Take message and give to staff member chiefly responsible for buying office supplies.	Identified staff member

Booking an Appointment

Useful phrases

Patient

- I need to make an appointment.
- I need to see the doctor.
- When is the doctor free?
- I need to renew my prescription.
- Do you think the doctor could squeeze us in today?
- I need to make an appointment for my husband.
- My child needs to come in for a check-up.
- The doctor wants to see me again in two week's time.

Receptionist

- What is your chart number?
- What is the appointment regarding?
- Which day/what time is good for you?
- Is January the 3rd okay with you?
- How does four o'clock sound?
- We'll see you then.
- I'm sorry the doctor is not taking new patients.
- We'll call you if there are any cancellations.
- We're running an hour behind schedule.
- Dr Jones is away. You'll be seeing Dr Lindsay.

Sample Conversation

Read the sample conversation and then test your understanding with the exercise below.

Receptionist: Doctor's office. Jane speaking. How can I help you?

Caller: I need to make an appointment with Dr. Harris.

Receptionist: Do you know your chart number?

Caller: No, sorry. It's at home and I'm at work right now.

Receptionist: No problem. What's your name, please?

Caller: George Mason.

Receptionist: Okay Mr Mason. Hold one moment while I grab your chart, please.

Caller: Sure.

Receptionist: Thanks for waiting. Now, what do you need to see the doctor about?

Caller: Well, I've been fighting a cold for more than a week, and I think I might have a chest infection or something. My cough is getting worse each day.

Receptionist: Hmm. Doctor Harris is off tomorrow. Do you think it can wait until Wednesday?

Caller: Oh, I was really hoping to get in today or tomorrow in case I need some antibiotics. Maybe I'll have to go to the walk-in-clinic instead.

Receptionist: Actually, we had a cancellation for 2:00pm today if you can get away from the office.

Caller: Gee, it's almost 1:00pm already. I think I can make it if I leave right now.

Receptionist: We're running a bit behind schedule, so you can probably count on seeing the doctor around 2:30.

Caller: That's great. Thanks for fitting me in.

Receptionist: No problem, Mr. Mason. We'll see you in an hour or so.

Test your understanding

1. Why does the caller phone the doctor's office?

2. Which is true about George Mason?

3. When will the doctor see Mr Mason?

Adapted from: <https://www.englishclub.com/english-for-work/medical-appointments.htm>



Conversations with Patients

Avoid Using "Why" Questions with Patients: Apply Friendlier Language

By Edward Leigh, MA

I took my mother to the foot doctor. She is supposed to be wearing support stockings due to swelling in the ankles. Mom has not been very compliant (she is now). The doctor said to her, "Why aren't you wearing the stockings?" This type of question puts people on the defensive. Why questions can come across as abrasive, even hostile. A friendlier version of the question is, "What can we do, working together, to help you wear the stocking on a consistent basis?"

According to the Merriam-Webster Online Dictionary, the word "why" means "for what cause, reason, or purpose." We ask why questions basically because we are looking for a reason in regard to an action. When lawyers have people on the stand, they ask tough questions, why questions (e.g., "Why did you steal the money?"). However, in healthcare, we are working in a therapeutic environment where certain questions need to be asked in a sensitive manner.

Here are some why questions and their better alternatives.

Why Question: "Why didn't you take the medication as prescribed?"

Better Question: "What was happening that led you to not take the medication as prescribed? Let's talk about solutions."

Why Question: "Why are you still smoking? You have many breathing issues that will only get worse."

Better Question: "I am concerned about your breathing issues. We will explore different options to help you stop smoking."

Why Question: "Why did you lift that heavy piece of wood when you know you have back problems?"

Better Question: "Your back problems are a concern and I want to help you feel better. In the future, you will need to be careful about lifting heavy objects."

By the way, why questions can also wreak havoc on personal relationships. A friend of mine told me her significant other became her insignificant other because he would constantly ask her why questions. For example, she would come home from the grocery store and he would ask, "Why were you gone so long?" He looked at her bags from store and asked, "Why did you buy these groceries?" One more example, he would walk into the family room and ask, "Why are you watching that TV Show?" She ended the relationship. She jokingly quipped, "He never asked why I didn't want to see him any more!"

Taken from: http://www.communicatingwithpatients.com/articles/why_questions.html

6 Easy Phrases for Patient Success

1. Patient enquiry to your clinic: "Happy to help"

Not every patient will tell you that they are unhappy about their interaction with your clinic – in fact, very few will. They'll just walk away.

To address this concern, think about "closing" all patient conversations positively with something like – "If there's anything else I can ever help with please ask, I'm happy to help".



Closing each conversation means ensuring that the patient is satisfied.

Ending your emails without this "closing" message can be risky, as it's not inviting the patient to share further issues. You need to let them know that you'd be happy to listen to the patient even more if needed.

That's why I advise clinics to end 99% of their messages with, "Let me know if there's anything else I can do for you—I'm happy to help."

It's my way of saying that it would be my pleasure to assist with any lingering concerns that may have cropped up, or answer any questions they may feel are "dumb". There are no dumb questions in supporting patients.

You should avoid: ending conversations so bluntly that the patient feels you are hurrying them out the door. Even a simple, "Are you ready to book an appointment?" will do.

2. Patient enquiry to your clinic: "Does that help?"

This is similar to the above, however this phrase doesn't "close" the conversation – instead it asks the patient for a response, so that you know that you've done your job well enough.

If you haven't done your job well, the patient will ask you for more information. And you'll learn much more about what to put in each piece of communication with future patients.

3. Unhappy patient: "I Understand How Upsetting That Must Be"

This is a message that is obviously being used with an upset patient.

Use this phrase often and thoughtfully – read the patient's mood and relate with how he or she feels. Great support is always defined by genuine empathy.

4. Patients who want something you don't want to do or cannot do for them:

"As much as I'd love to help, your request is beyond what we're able to do for our patients at the moment."

There comes a time when the only answer is "no". Some patient requests just aren't feasible. Maybe a patient is treating you like a free medical advice centre. While some

advice is fine, they've got to learn that you are a medical clinic with more important tasks to attend to.

But imagine answering a genuinely enthusiastic request with a blunt "no". It can sting. Stay firm but kind by stating how you'd like to help, but it's just not possible in this situation.

It's never fun to say "We can't do that", but you can at least do it nicely.

To this phrase I often suggest adding "I'm sorry I could not have been more help. Perhaps you could try... (add 1-2 resources)" for more impact.

You should avoid: "To be honest with you..." It's a phrase that is sometimes used as a defense, as in, "To be honest with you, we don't think patients need that." I'm hesitant to use this phrasing because it makes a subtle implication that you're being honest right now – are there times when you aren't honest? You'll also want to steer clear of corporate clinic sentences, such as "That's not our policy".

5. Difficult questions that you don't know the answer to: "Great Question, I'll Find That Out for You"

Not knowing the answer to a question is a difficult scenario for anyone to be in, especially if you are new in the clinic.

The biggest mistake to make is turning the situation into your situation: "Sorry, I've never been asked that before!"

Instead, keep the focus on what will be done to get the answer: "Great question, let me check with our head doctor so I can get that answered for you."

Only the truly crazy patients will mind a small delay so that you can find the solution. Believe me, those types of patients have little chance of walking away happy from your clinic in the first place.

You should apply the principle of refocusing to other conversations as well. Whenever you're able to put the spotlight on what will be done rather than what's happened, you've made a smart move.

You should avoid: “maybe”, “perhaps”, or “I’m pretty sure”. Don’t guess for a patient, they want certainty. Simply state that you’re going to find out the exact answer they need, and do just that.

6. Unhappy patient: “May I Ask Why That Is?”

This is one to keep close, as critical and complaining patients are all too common.

You’ll need a way to dig deeper into their criticism without stooping to the abrasive language that they tend to use.

Consider if someone wrote this about your clinic in a review, on facebook or on twitter.

“The way Clinic X treated me is so f*ckin’ stupid. It’s unbelievable.”

Approaching this situation with care is important, because you don’t want to walk away as the bad guy.

This is where “May I ask why that is?” comes in handy. While it won’t pacify every patient, it always puts you in the right. Who can fault you for kindly asking for additional feedback?

You should avoid: stooping to the patients level. People will complain about your clinic no matter how high your GCR Score is, so just make sure your language is level-headed and professional.

Taken from: <http://blog.gcr.org/learn-6-easy-phrases-for-patient-success/>

Don't say:

"We are going to withdraw care."

"What do you want to do?"

"Do you want to make your mom a DNR?"



Do say:

"I wish I had better news for you. (Pause, this is a "warning shot" before giving bad news.) We've exhausted everything that will do anything that will make your mom better. She is going to die from this (many pauses). Did your mom ever talk about what she wanted?"

"This breathing machine is not helping her and patients tell us it's not a comfortable experience. Do you think your mom would rather we let her die naturally? We will stay right here with her and do everything we know how to make her comfortable. There are many things we can do for her."

"We can't fix this. I wish we could. Miracles are extremely rare and happen even without our help when they do occur.... In my experience, she only has hours to days left. You said your mom said she didn't want to die like this. Do you agree that we should allow her to die naturally and not do CPR (push on her chest) or put her on a breathing machine?"

Taken from: <https://www.medscape.com/viewarticle/763543>