研究成果の概要（和文）：日本で悪影響のデータ収集の難しかたなので、日本とインドネシアを比較した患者と医師のコミュニケーションに集中しました。日本で収集されたデータの分析は十分ではありませんが、この重要な作業を完了するためにデータを収集する必要があります。しかし、インドネシアの共同研究者は1,000人の患者と400人の医師からデータを収集しました。1月中に届きました。今このところ、データの1/3を計算しており、これまでの傾向はありませんでした。分析の最終決定が待っています。教育では、より多くの教材を作成し学部生と大学院生に効果的な患者医師コミュニケーションのための形式クラスを導入しました。

研究成果の概要（英文）：Despite the difficulty of gathering data on adverse incidents in Japan, we focused on patient-physician communication, comparing Japan and Indonesia. Data collected in Japan is insufficient for a comprehensive analysis, but we continue to gather data to complete this work. However, our Indonesian collaborators were able to collect data from 300 patients and 300 physicians, but it took too long and they sent it this mid-March. So far, we have computed 1/3 of the data, but need to finalize the analysis for definitive results.

To prepare both undergraduate and graduate students to effective patient-physician communication, we introduced the 3-format class, which is a comprehensive approach including listening, reading, writing, small-group and class discussion in each session. With the same view, we also introduced a case discussion in English for residents to enhance their spoken English proficiency. So far, one of the residents who took our class last year passed the USMLE Step 2 CS.
1. Research background
We applied for this grant to investigate the characteristics of adverse incidents resulting from the miscommunication between Japanese physicians and English proficient foreign patients, and bring out insights that will enable physicians, patients and our institution to work together to understand their shortcomings in communication skills. Using the data of this research, we want to take our current medical English curriculum to a new level by designing training programs that will serve as a tool for English communication skills acquisition, expansion, consolidation, reminiscence and maintenance for students, postgraduates and established physicians, as well as institutions.

The tool will also serve to measure and evaluate specific communication skills in the above groups to find points of improvement.

2. Research objectives
Collect data to gain insights on the characteristics of adverse incidents arising from miscommunication between Japanese physicians with limited English proficiency and foreign patients in Japanese hospitals. Ultimately, use the findings of the research to design more efficient undergraduate and postgraduate, as well as continual education medical English and communication skills curricula. We hypothesize that improving communication skills in both future and established physicians will help them become better communicators, resulting in better delivery of health care that will minimize clinical adverse incidents and produce better outcomes for foreign patients in Tokushima, and then serve as a model for Japan.

MODEL CURRICULUM

Undergraduates
Acquire and Develop Skills

Postgraduates
Consolidate and Expand Skills

Practitioners
Reinforcement and Continuing Education

Effective Doctor-Patient Communication

ULTIMATE GOAL
Better Clinical Outcomes

3. Research methods
Research Plan and Methods
1. Design Survey questionnaires and check list to conduct the survey
2. Survey of patients and physicians with limited English proficiency
3. Statistical analysis of data, interpretation and publication

Education:
1. Research in new teaching methods and produce teaching/learning materials for active learning to improve students’ professional communication skills.
2. Visit Gadjah Mada University Medical School 交换学習し、exchange of experiences, and learn about their approach to teaching
medical English and Dr-patient communication. Also conduct a survey on Physician-patient communication.

3. Present our pre-clinical physician-patient communication method to the annual meeting of Japan Association for Medical English Education (JASMEE) to exchange with other universities approaches.

4. 研究成果
Because institutions are reluctant to provide information on adverse effects of Dr-patients miscommunication, information considered as sensitive, we hardly could gather the related data. So, we concentrated on patient-physician communication, comparing Japan and Indonesia. Data collected in Japan are still insufficient for a comprehensive analysis, but we keep gathering data to complete this work. However, our Indonesian collaborators could collect data from 300 patients and 300 physicians, but it took too long and they sent it this mid-March. So far, we are still computing the raw data we got from Indonesia and what we present here are more the results of the educational side of the project. To prepare both undergraduate and graduate students to effective patient-physician communication, we introduced extra-curricular activities (English Plus, Happy Lunch-hour and i.English to allow students to practice and improve their communication skills) and the innovative 3-format class, which is a comprehensive approach including listening, reading, writing, small-group and class discussion in each session. These activities have motivated students to apply for study-abroad programs and 2 students have passed the USMLE Step 1 and one resident the USMLE Step2 CS, the most difficult for Japanese candidates.

The above results show a disposition of the students to learn English in order to improve their proficiency and study abroad, communicate with foreign professionals and patients. We will use these results as evidence for further improvements of our Physician-patient communication curriculum.

2. Bukasa Kalubi. Engaging students in their studies and getting them to ask questions in class. 18th JASMEE Academic Meeting. Okayama Convention Center.7. 18-19. 2015.


【図書】（計0件）

【産業財産権】

出願状況（計0件）

名称：
発明者：
権利者：
種類：
番号：
出願年月日：
国内外の別：

取得状況（計0件）

名称：
発明者：
権利者：
種類：
番号：
取得年月日：
国内外の別：

【その他】
ホームページ等

研究者番号：

研究分担者
Omar M. Rodis

講師

連携研究者

研究者番号：