

The CONSULTATION tasks and Competencies

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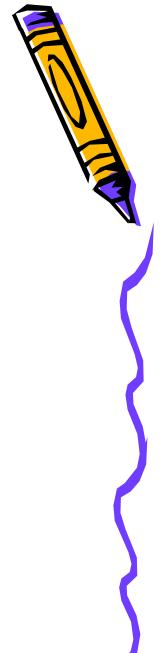
STOTT AND DAVIS

PENDLETON

Roger Neighbour

- · Categories of consultation competence
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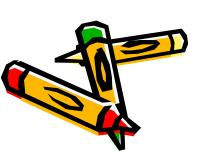
CONCLUSION



INTRODUCTION

 WHY CONSULTATION IS IMPORTANT?

 HOW TO IMPROVE CONSULTATION SKILLS?





CASE SCENARIO

• IBRAHIM 53 YEARS OLD COME TO family medicine clinic AT KKUH C/O BAD WOUND IN HIS RT FOOT. HE IS KNOWN DM AND HYPERTENSIVE PATIENT FOR THE LAST 15 YEARS. WHEN YOU REVIEW HIS FILE YOU NOTICE MOST OF previous VISITS WERE FOR REFILL. HE IS SMOKER FORTHE LAST 30 YEARS. HE LOOK OBESE. BMI IS 37. HIS LAST HBA1C WAS 11.5

HOW YOU WILL PROCEED DURING THIS CONSULTATION?



CONSULTATION MODELL (STOTT &DAVIS)

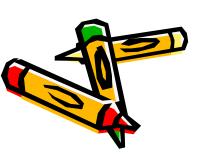
- MANAGEMENT OF PRESENTING PROBLEM
- MODIFICATION OF HELP SEEKING BEHAVIOUR
- MANAGEMENT OF CONTINUING PROBLEM
- OPPORTUNISTIC HEALTH PROMOTION



CASE SCENARIO

 AHMED 20 YEARS OLD COME TO family medicine clinic AT KKUH TO DO MRI FOR HIS RT KNEE. PATIENT WAS SEEN IN PRIVATE CLINIC AND TOLD TO DO MRI TO DIAGNOSE HIS KNEE PROBLEM. HE CANNOT DO IT IN PRIVATE HOSPITAL BECAUSE IT IS EXPENSIVE.

HOW YOU WILL PROCEED DURINGTHIS CONSULTATION?



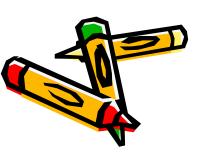
CONSULTATION MODELL (PENDLETON)

- TO DEFINE THE REASON FOR PATIENT'S ATTENDANCE, INCLUDING:
 - THE NATURE AND HISTORY OF PROBLEM
 - THEIR AETIOLOGY
 - THE PATIENT'S IDEA, CONCERNS, AND EXPECTATION
 - THE EFFECTS OF PROBLEMS



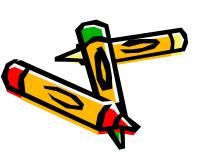
CONSULTATION SKILLS (PENDLETON)

- TO CONSIDER OTHER PROBLEMS
 - CONTINUING PROBLEMS
 - AT RISK FACTORS.
- TO ACHIEVE A SHARED UNDERSTANDING OF THE PROBLEMS WITH THE PATIENT



CONSULTATION SKILLS (PENDLETON)

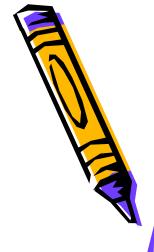
- WITH THE PATIENT, TO CHOOSE AN APPROPRIATE ACTION FOR EACH PROBLEMS
- TO INVOLVE THE PATIENT IN THE MANAGEMENT AND ENCOURAGE HIM TO ACCEPT APPROPRIATE RESPONSIBILITY



CONSULTATION SKILLS (PENDLETON)

- TO USE TIME AND RESOURSES APPROPRIATELY:
 - IN THE CONSULTATION
 - IN LONG TERM
- TO ESTABLISH AND MAINTAIN A RELATIONSHIP WITH THE PATIENT WHICH HELPS TO ACHIEVE THE OTHER TASKS.





· Connecting:

- means establishing good relationship with the patient
- > Have we got rapport?



Summarizing:

Could I demonstrate to the patient that I've sufficiently understood why he's come?



Handing over:

> Has the patient accepted the management plan we have agreed?





Safety netting:

> Have I anticipated all likely outcomes?





· House Keeping:

> Am I in good condition for the next patient?

> Taking care of your self





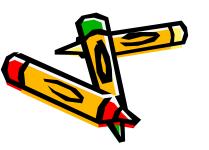
Categories of Consultation Competence



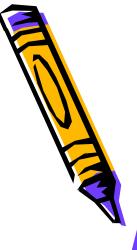
Interviewing/history taking

· Physical examination

Problem solving

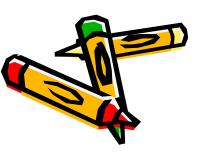


Categories of Consultation Competence



Patient management

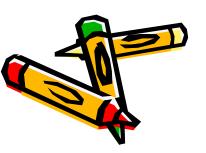
· Behaviour/relationship with patients



Categories of Consultation Competence

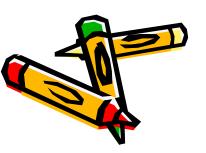
Anticipatory care

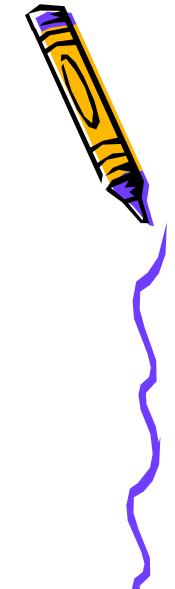
· Record- keeping



Patient-Centred Consultations

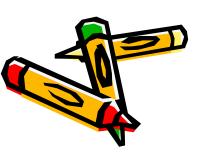
- A Patient-centred Consultation approach results in significantly improved health outcomes for patients
- · Examples?





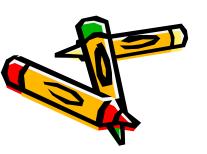
Evidence-based Consultation

 Family physicians should base their consulting behaviour on research evidence of best practice, even when this conflicts with their usual professional habits.



ISLAMIC CONCEPT IN CONSULTATION

- UTILIZATION OF ISLAMIC AND CULTURAL ASPECT IN CONSULTATION
- PUBLISHED IN JOURNAL OF FAMILY AND COMMUNITY MEDICINE 1999; 6(1): 9-14.



نموذج إسلامي للاستشارة الطبية

- السلام وطلاقة الوجه: قال رسول الله صلى الله عليه وسلم (لا تحقرن من المعروف شيئاً ولو أن تلقى أخاك بوجه طلق) رواه مسلم
 - لا تداو أحدا حتى تعرف داءه: قال رسول الله صلى الله عليه وسلم: (إن الله لم ينزل داء إلا أنزل له شفاء علمه من علمه وجهله من جهله) أخرجه أحمد
- فكان خيرا له: قال رسول الله صلى الله عليه وسلم: (عجباً لأمر المؤمن إن أمره كله له خير وليس ذلك لأحد إلا للمؤمن: إن أصابته سراء شكر فكان خيرا له وإن أصابته ضراء صبر فكان خيرا له) رواه مسلم



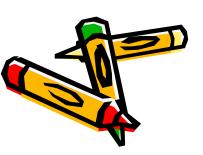
نموذج إسلامي للاستشارة الطبية

- أنصح لكم: قال رسول الله صلى الله عليه وسلم: (لا يؤمن أحدكم حتى يحب لأخيه ما يحب لنفسه) متفق عليه
- رفع الحرج: قال تعالى: (ليس على الأعمى حرج ولا على الأعرج حرج و لا على الأعرج حرج و الآية 61.
- المشاورة: قال تعالى: (وشاورهم في الأمر) سورة آل عمران، لآية 159.
 - يملك نفسه: قال رسول الله صلى الله عليه وسلم: (ليس الشديد بالصرعة إنما الشديد الذي يملك نفسه عند الغضب) متفق عليه.





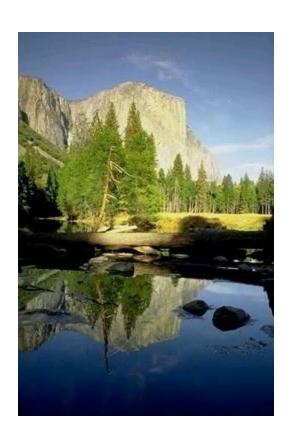


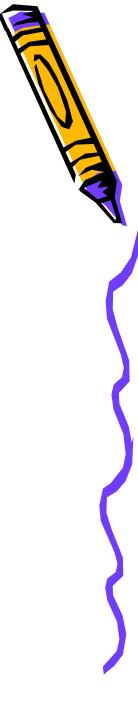


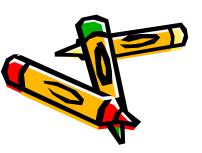
CONCLUSION

- CONSULTATION SKILL IS AN ESSENTIAL ASPECT IN PATIENT-DOCTOR RELATIONSHIP
- LEARING CONSULTATION MODELS WILL IMPROVE YOUR COMMUNICATION WITH PATIENT









PRACTICAL SESSION

- ROLE PLAY
- FEED BACK
- DIFFICULT CASES!! (GROUP DISCUSSION)

