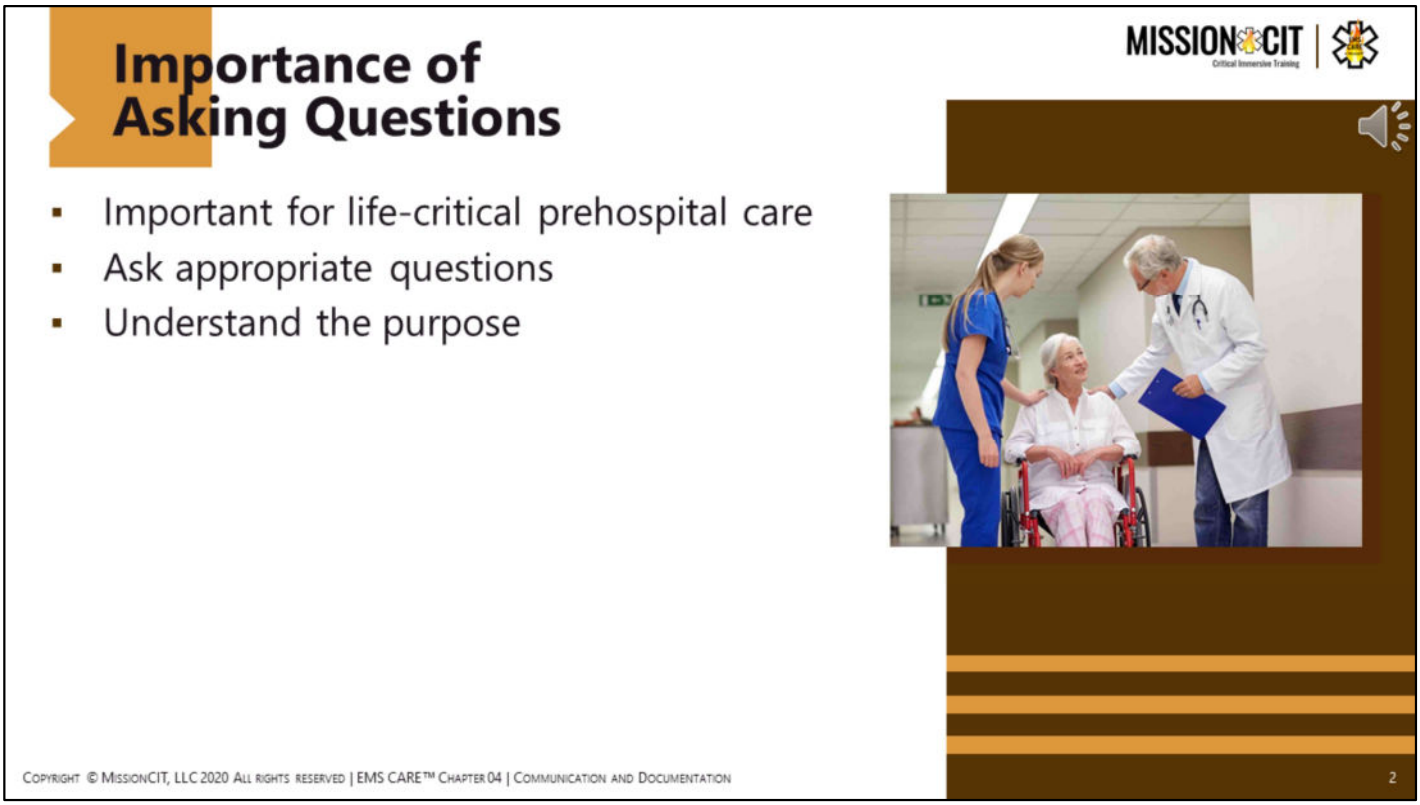


Thank you, Justin! Those were some interesting tips for effective communication. In this lesson, we will be talking about a related field, which is interviewing.

A key difference between communication and interview is that communication is a process where you convey something and can get answers or responses for the same while an interview is a question asked with an intent to get a specific answer to it.

Interviewing can be difficult because patients may not be forthcoming to share their medical history with strangers, they may feel scared, or may simply not be in a position to answer your questions. The strategies we talk about in this lesson will help you navigate through such tough situations to get the information you need.

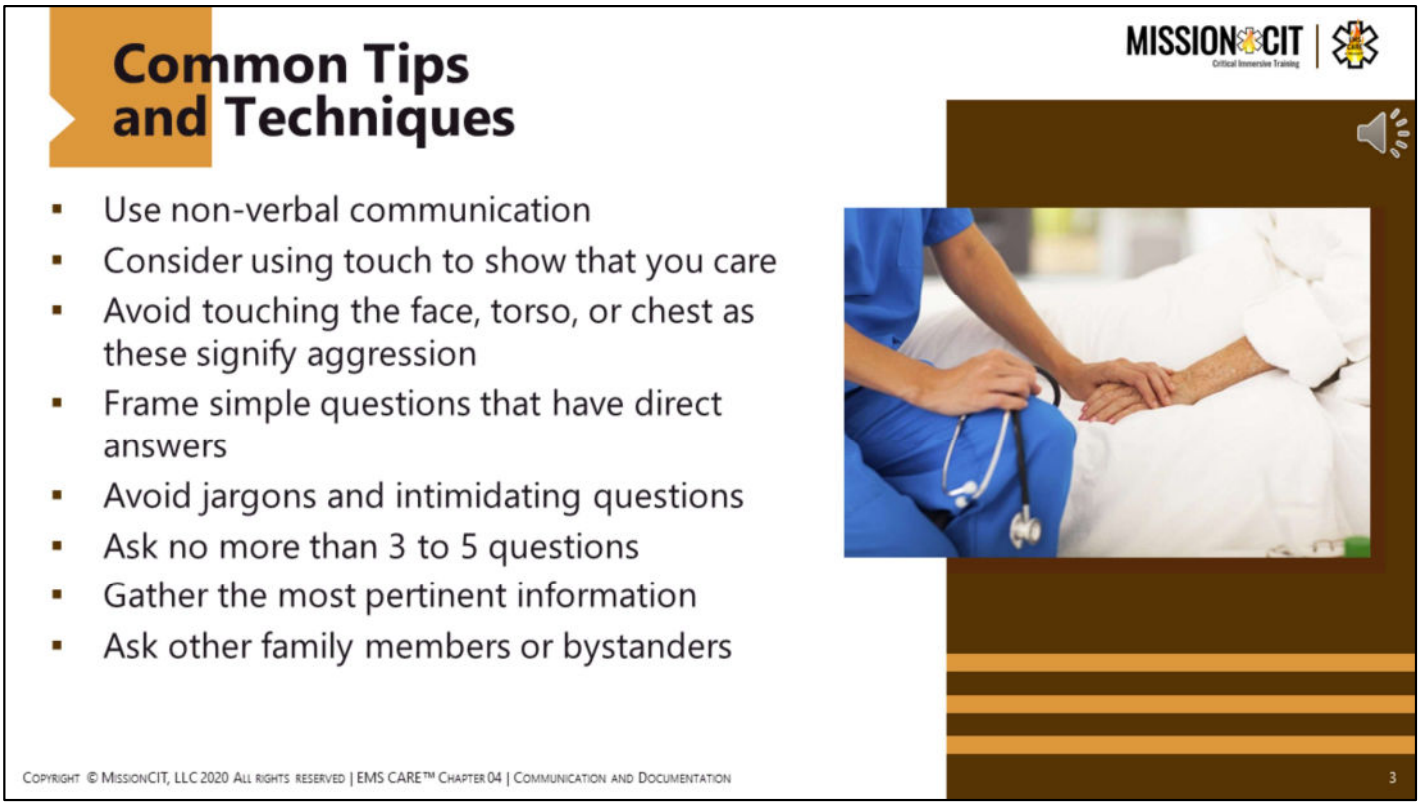
So, let's get started.



Questions are often viewed as pesky and interfering, but in the context of pre-hospital care, they assume a lot of significance as it not only helps to provide life-critical prehospital care but can also help to provide long-term care for the patient in a hospital setting.

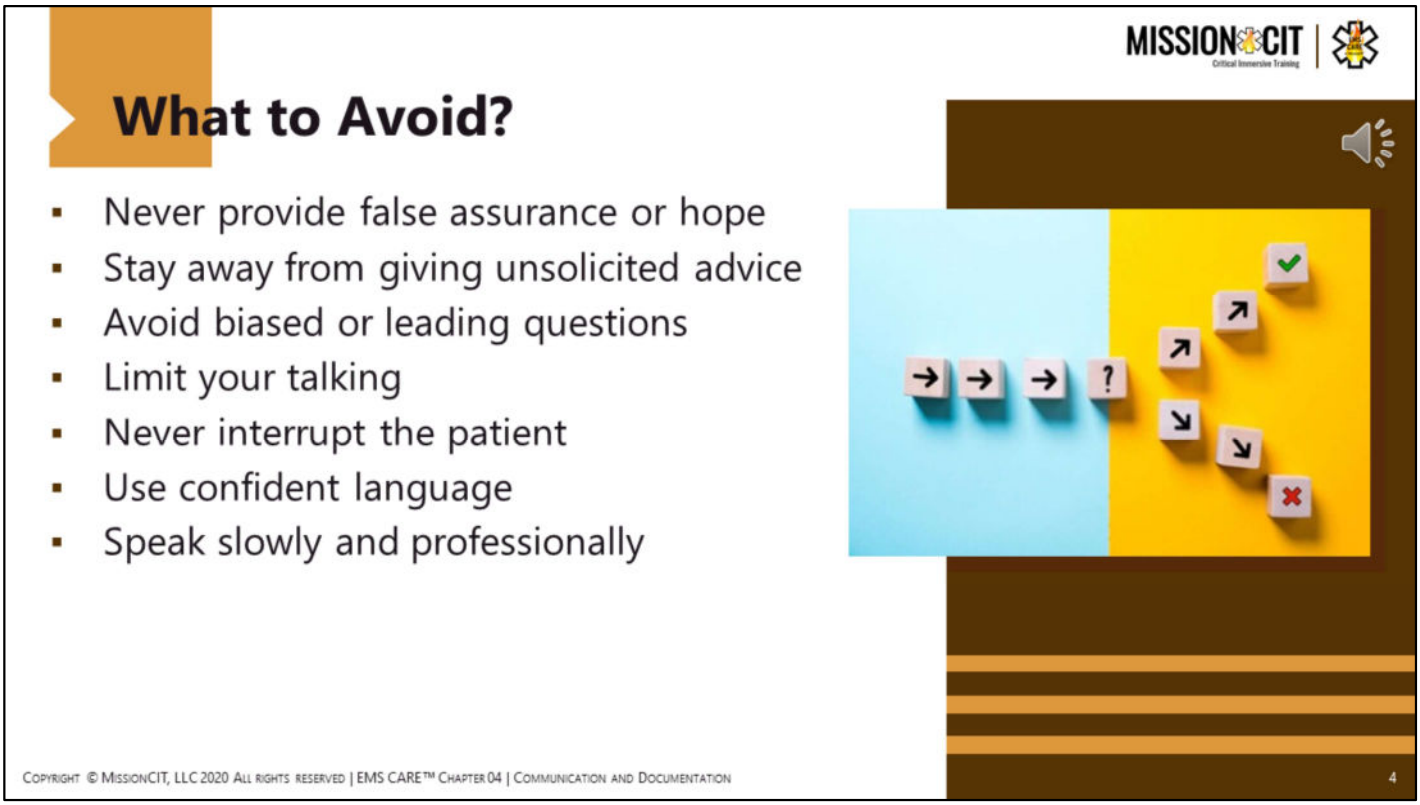
When you ask appropriate questions, you learn more about the patient's condition and medical history, so do everything you can to ensure that you get pertinent answers.

When you understand the purpose, you're more likely to answer relevant questions in a way that can elicit a positive response from the patient.



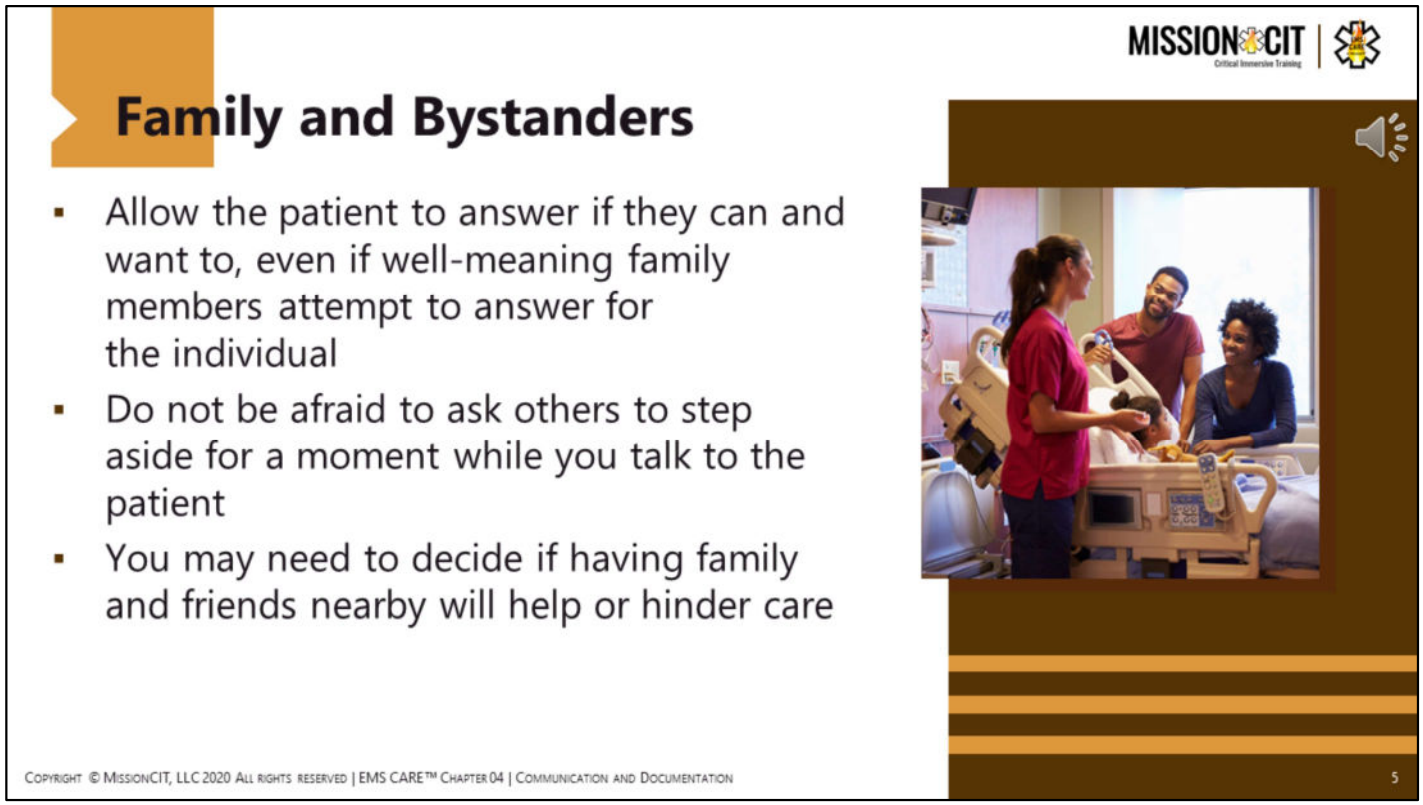
Some common tips and techniques to consider while interviewing are:

- Consider non-verbal communication as this can play a key role in the response you will get.
- While interviewing, consider using touch to show that you care. However, avoid touching the face, torso, or chest as these signify aggression.
- Use touch consciously and sparingly. In general, use it to gently coax a person to trust you and come out with the details.
- Frame simple questions that have direct answers.
- Avoid jargons and questions that can intimidate the patient.
- Ask no more than 3 to 5 questions to make the patient less overwhelmed.
- Use your limited time to gather the most pertinent information.
- If the patient is not forthcoming with the answers or is not in a position to answer, ask other family members or bystanders.



While interviewing a patient, some things must be avoided at all costs.

- Never provide false assurance or hope. State the facts of the patient's condition as they are without sounding rude.
- Stay away from giving unsolicited advice as it can be misleading and often, unnecessary for the situation on hand. Keep in mind that your role is only to provide emergency medical care, so anything beyond it, is outside the purview of your job.
- Avoid biased or leading questions.
- Limit your talking to ensure that the patient doesn't get overwhelmed.
- Never interrupt the patient while he or she is talking as this can affect the flow of thoughts.
- Use authoritative language to show that you are in control of the situation, but in a positive way. The idea here is to give confidence to the patient that you know what you're talking about and that you can help.
- Speak slowly and professionally.

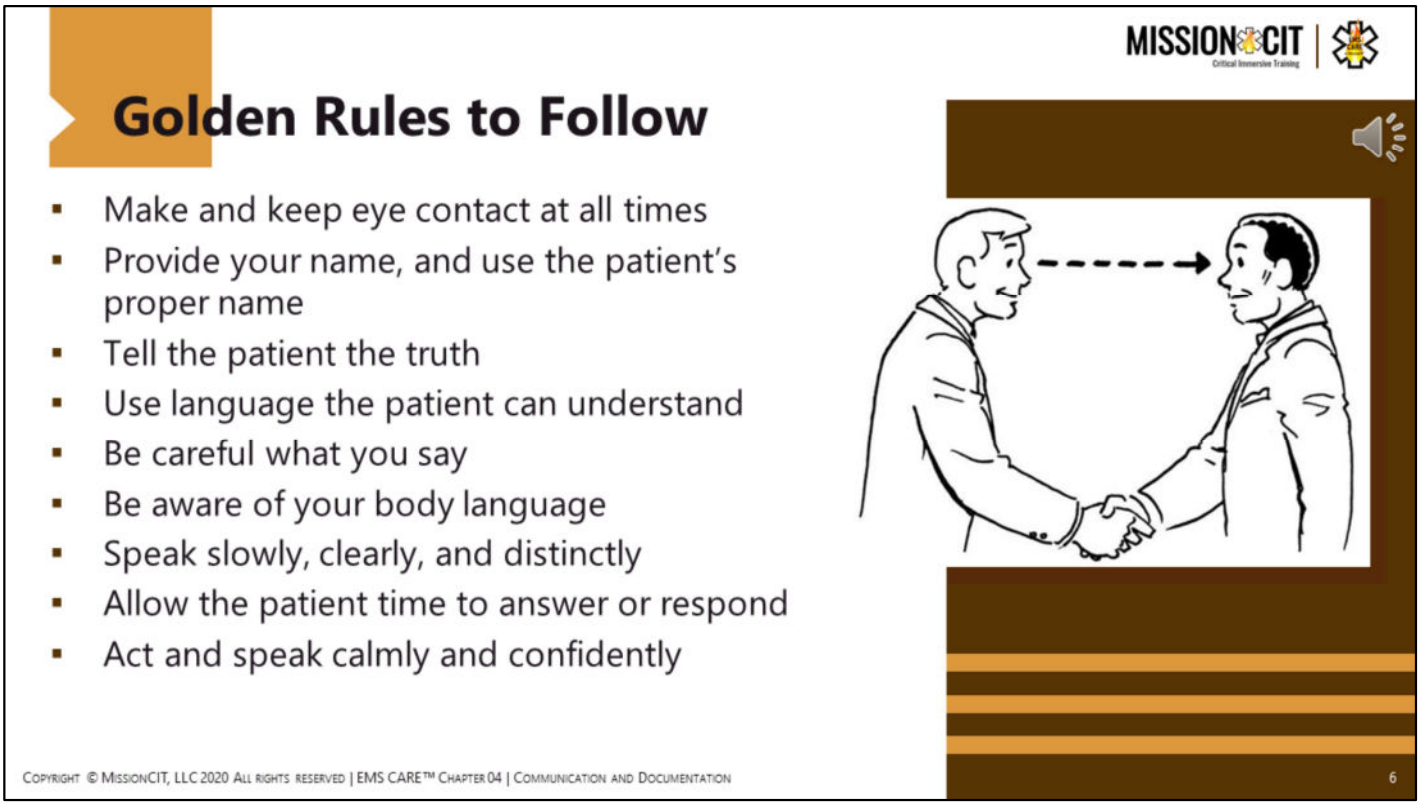


Sometimes the patient may not be in a position to answer your questions, and in such situations, family members and bystanders can give the information you want.

Involving them in your interview process is a good idea as they can provide valuable information about the patient's condition and possibly even the history of illness.

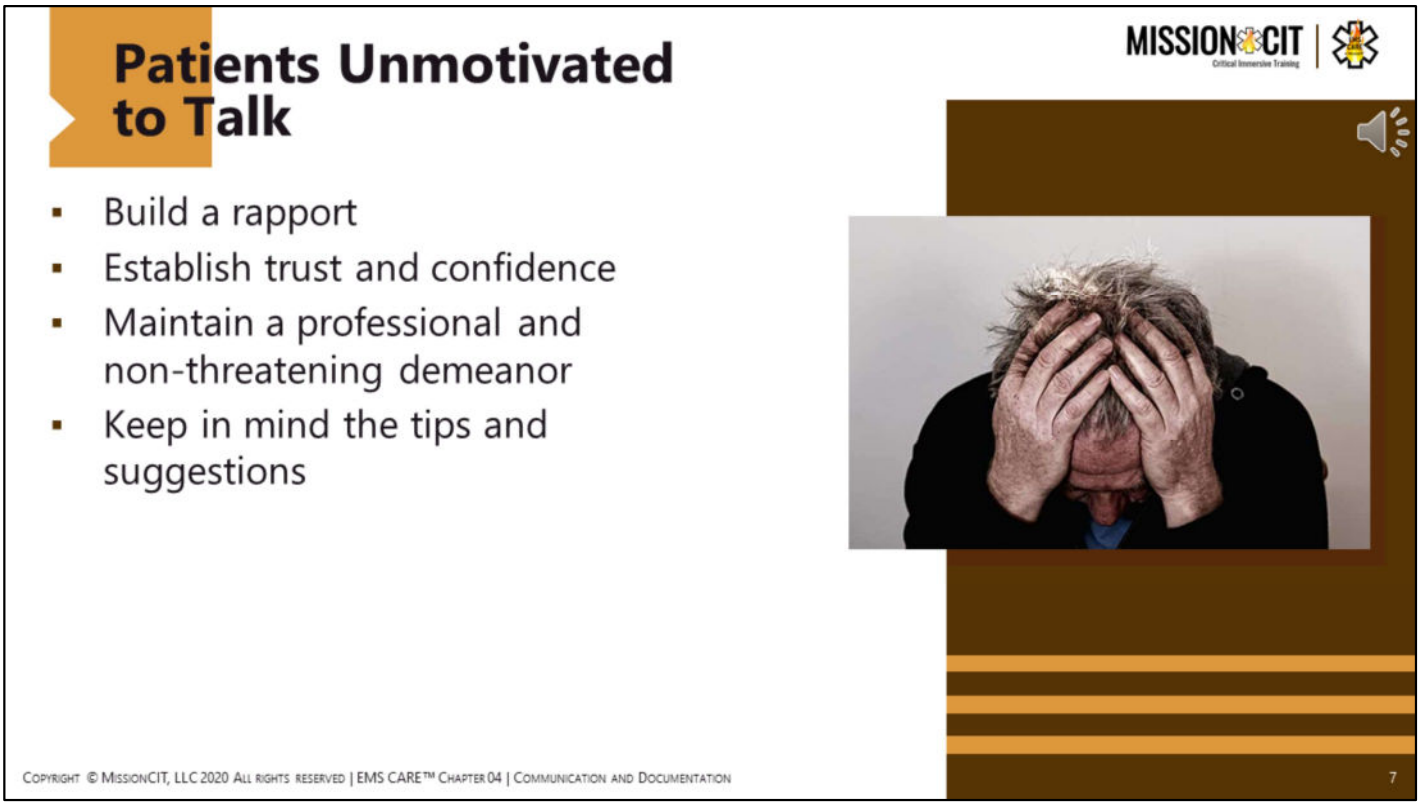
That said,

- Allow the patient to answer if he or she can and wants to, even if well-meaning family members attempt to answer for the individual.
- Do not be afraid to ask others to step aside for a moment while you talk to the patient.
- You may need to decide if having family and friends nearby will help or hinder care.



Here are some golden rules to consider while interviewing patients, family members, or bystanders.

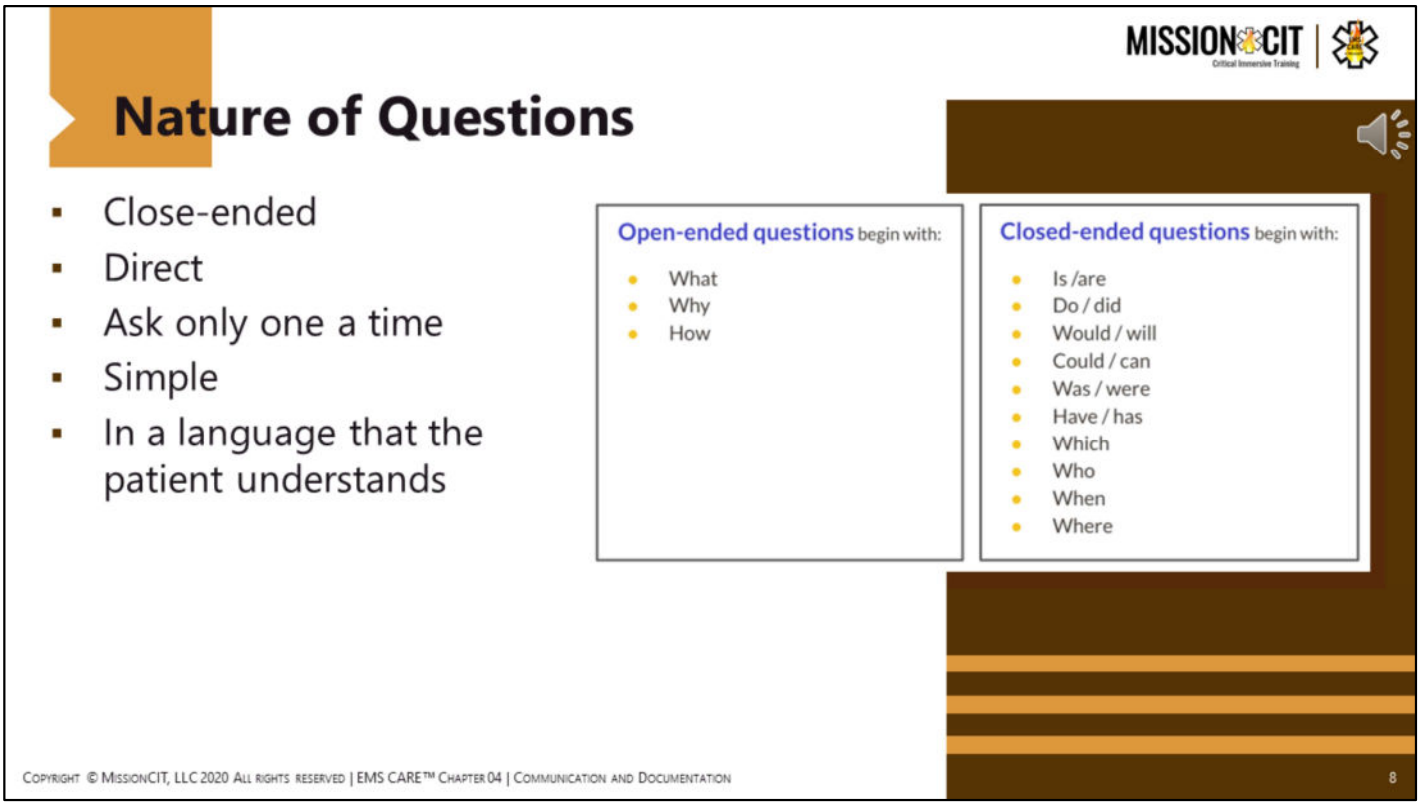
- Make and keep eye contact at all times.
- Provide your name, and use the patient's proper name.
- Tell the patient the truth.
- Use language the patient can understand.
- Be careful what you say about the patient to others.
- Be aware of your body language.
- Speak slowly, clearly, and distinctly.
- If the patient is hard of hearing, face the patient so he or she can read your lips.
- Allow the patient time to answer or respond.
- Act and speak in a calm, confident manner.



What do you when a patient is not motivated to talk?

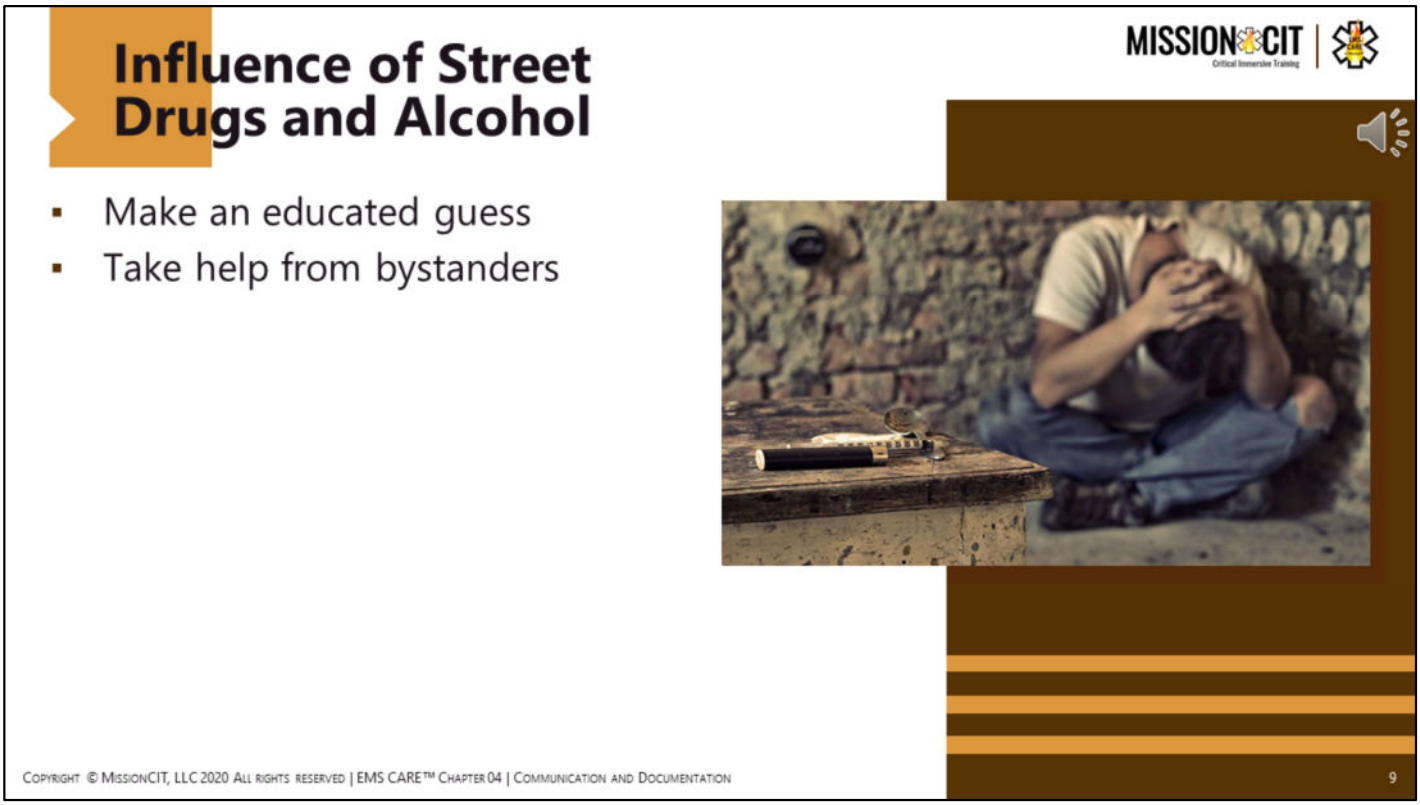
Do your best to get the patient to talk. Try to build a rapport with the patient and spend a few minutes, establishing trust and connection. This can get the patient to warm up towards you, so he or she will better answer your questions.

Throughout the conversation, make sure you maintain a professional and non-threatening demeanor. Keep in mind the tips and suggestions explained earlier while communicating with the patient.



While choosing questions, make sure they are

- Close-ended. For example, ask the patient if he has trouble breathing. The answer can be a single yes or a no that would require only minimal effort.
- Direct.
- Ask only one at a time.
- Simple.
- In a language that the patient understands.



When a patient is under the influence of street drugs and alcohol, he or she may not be in a position to answer your questions. In such cases, make an educated guess on the circumstances of the case, and see if you can get help from bystanders or family members.

This brings us to the end of this lesson and in the next one, Justin will talk about documentation.