

Verbalises diagnosis and rationale

Green – Explains the diagnosis or diagnoses, to the patient in clear language

Red – Fails to state the diagnosis or diagnoses explicitly

Green – Explains the reasons for this diagnosis and establishes any pre-existing knowledge about the diagnosis

Red – Fails to justify the reasons for this diagnosis or diagnoses

About this skill

Some trainees move directly from history taking and examination to a management plan. It is not enough to reach a provisional or 'working' diagnosis - it is just as important to share this with the patient and tell them what is wrong. Why? Firstly, because they expect to receive a diagnosis (or at least a range of possible diagnoses) and they will be disappointed if this does not happen. Secondly, offering a diagnosis allows you to make links with what the patient has expressed earlier as a possible explanation of their symptoms. Thirdly, a diagnosis is the springboard for the management plan and make sense of the management plan. Knowing the diagnosis allows the patient to read about their condition and this too helps with management planning.

There is also a need to explain to the patient why and how you have arrived at this particular diagnosis. Giving a justification for the diagnosis, reassures the patient that you have carefully considered their symptoms and will enhance concordance with any management plan you subsequently suggest.

You also need to get a feel that the patient has understood what the diagnosis is, and that they accept it. A useful question at this point is: "*Have you heard of this diagnosis?*"

Audio consultations

Because of the uncertainty within audio consultations, it is less likely that you will be able to offer a definitive diagnosis - it is much more likely that you have a range of diagnoses in mind. But it is still important to share this range of possibilities with the patient, and important to be clear about your thinking so far and the further steps that may be needed to clarify any remaining uncertainty.

Educational Activities

Activity 1: Watch your trainer consult with particular attention to how he/she shares the diagnosis with the patient.

Activity 2: Now watch a series of your acute consultations - five or so is enough. For each consultation write down:

- Did you make a diagnosis (or diagnoses)?
- Did you tell the patient what the diagnosis was?
- Did you explain how you reached that diagnosis?
- Did you tell the patient any more about the diagnosis?

Activity 3: In the next set of acute consultations you record, try to improve on these numbers. As a start, make sure you at least share the name of the condition that the patient is presenting with. Then try and develop your diagnosis sharing skills to include information about the condition, the reasons you have for reaching this diagnosis, and an assessment whether the patient has understood this information.

Audio consultations

Review a series of your audio consultations. In how many of them have you made some attempt at providing a diagnosis or diagnoses? Have you explained your thinking (however preliminary) to the patient?

Reflective exercise

Exercise 1: If you sometimes do not share the diagnosis with the patient, think why. Is it because you are not confident about the diagnosis? Is it because you do not want the diagnosis to be challenged? Is it a knowledge issue preventing you from reaching a reasoned working diagnosis? (see Toolkit section '*Makes a working diagnosis*')

Related tasks

Practicing and developing the skill of '*Verbalises diagnosis and rationale*' will allow you to achieve the following tasks more effectively:

- *Makes a working diagnosis*

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