



CD 8.5.1 DISCIPLINE CURRICULUM

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FACULTY OF STOMATOLOGY

STUDY PROGRAM 0911.1 STOMATOLOGY

CHAIR OF MANAGEMENT AND PSYCHOLOGY

APPROVED

at the meeting of the Committee for Quality Assurance and Evaluation of the Curriculum Faculty of Stomatology
Minutes No. ___ of _____
Committee president, PhD, DMS, Associate professor
Stepco Elena _____

APPROVED

at the Council meeting of the Faculty of Stomatology
Minutes No. ___ of _____
Dean of Faculty of Stomatology, PhD, DHMS, Professor
Ciobanu Sergiu _____

APPROVED

at the meeting of the chair Management and Psychology
Minutes No.11 of 14.02.2018
Head of chair, PhD in medicine, univ. professor
Larisa Spinei _____

CURRICULIM

DISCIPLINE COMMUNICATION AND MEDICAL BEHAVIOR

Integrated studies

Type of course: **Compulsory**

Chişinau, 2018



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I. INTRODUCTION

- **General presentation of the discipline: place and role of the discipline in the formation of the specific competences of the professional / specialty training program**

The course **Communication and Medical Behavior** is represented by a series of themes, the purpose of which is to provide students with knowledge about the efficient communication process and professional behavior in the dentist-patient relationship.

The relationship with the patient involves a communication process, a psycho-emotional interaction where the main role demonstrated by the specialist – is to moderate the stomatology-patient relationship.

In his relationship with the patient, the dentist must show good specialist training associated with much tact, patience, kindness, delicacy, empathy, respect, optimism, sincerity, etc. Therefore, possessing efficient communication skills becomes a requirement for every specialist in the field.

As a response to the demands of communication skills in the medical profession, the course is proposed with a relevant theme and some suggestions for effective communication where are described the optimization strategies of the dentist-patient communication process, as well as the knowledge of the behavioral particularities in the relationship with the patient.

The course **Communication and Medical Behavior** aims to help future specialists to know the psychological aspect of the professional behavior in the field as well as to develop their effective communication skills in a professional and personal context.

Mission of the curriculum (scope) in professional training

To provide students with psychological knowledge of human behavior and communication by analyzing the peculiarities of the medical conduct; as well as the development of interpersonal communication skills, to provide students with appropriate and relevant behavior with patients.

- **Languages of the course:** Romanian, English;
- **Beneficiaries:** students of the IV-year, Faculty of Stomatology.

II. MANAGEMENT OF THE DISCIPLINE

Code of discipline	U.08.O.102		
Name of the discipline	Communication and medical behavior		
Person(s) in charge of the discipline	PhD, associate professor Mariana Cernișanu		
Year	IV	Semester	8
Total number of hours, including: 60			
Lectures	10	Practical/laboratory hours	15
Seminars	10	Self-training	25
Form of assessment	CD	Number of credits	2

III. TRAINING AIMS WITHIN THE DISCIPLINE

At the end of the discipline study the student will be able to:

- *at the level of knowledge and understanding:*
 - define the basic terms with which the communication psychology operates;



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- know the basic elements of communication, its determinants, its structure and its functions;
- be aware of the importance of personality traits in the process of communication;
- delineate the conceptual foundations of communication and behavioral psychology;
- identify communication skills that are important for successful vocation;
- know the elements of efficient communication with medical staff and patients;
- understand the cause of the main types of communication mistakes encountered during the establishment and development of the dentist-patient relationship;
- identify the main behavioral mistakes in relation to the patient.

• **at the application level:**

- be able for a professional communication with the patient and the therapeutic team.
- apply specific methods of communication in conflict situations;
- demonstrate decent and professional behavior in a workplace and personal relationships.
- apply procedures to stimulate and develop the effective communication skills;
- identify the work strategy according to the principle of individuality applied to patient;
- have the body language knowledge;
- demonstrate empathy, respect, optimism, sincerity in the medical practice.

• **at the integration level:**

- enrich the psychological knowledge gained in the context of the future profession;
- promote various ways of moral support for different types of patients;
- formulate optimal decisions in medical emergencies;
- develop communication skills to overcome barriers and communication difficulties;
- develop a professional behavior based on responsibility, respect, empathy, tolerance and positive thinking.

IV. PROVISIONAL TERMS AND CONDITIONS

Student of the fourth year requires the following:

- knowledge of the language of instruction;
- confirmed competences in science in previous years of studies at (Medical Psychology and Behavioral Sciences).
- digital competences (use of the Internet, document processing, electronic presentations);
- ability to communicate, teamwork, play certain role plays determined by topics discussed at the seminar;
- qualities - tolerance, compassion, empathy, sincerity, the ability to listen effectively others.

V. THEMES AND ESTIMATE ALLOCATION OF HOURS

Lectures, practical hours/seminars and self-training

No. d/o	THEME	Number of hours			
		Lectures	Seminars	Practical hours	Self-training



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No. d/o	THEME	Number of hours			
		Lectures	Seminars	Practical hours	Self-training
1.	Defining and analyzing the effective and ineffective forms of communication in medical practice.	1	-	2	2
2.	Defining and analyzing professional and unprofessional behavior in medical practice.	1	2	2	2
3.	Patient expectations from the visit to the dentist.	2	2	-	2
4.	Rights and obligations of the patient and the dentist at the medical meeting.		-	2	4
5.	Behavioral medicine. Tasks of Behavioral Medicine. Communication for behavior change.	2	-	2	2
6.	Strategies to optimize effective communication skills between dentist and patient. Communicating with difficult patients.	2	2	2	4
7.	The behavior of the dentist in a workplace.	-	1	2	2
8.	Strategies for effective communication and relationship with the therapeutic team.	2	1	1	2
9.	Problems and difficulties analysis that may arise because of inefficient communication and inadequate behavior at work. Case studies.	-	2	-	2
10.	The personality techniques and methods of resources developing of the specialist to obtain the psychological and energetic balance.	-	-	2	3
Totally		10	10	15	25

VI. REFERENCE OBJECTIVES OF CONTENT UNITS

Objectives	Content units
Theme (chapter) 1. Defining and analyzing the effective and inefficient communication forms in a medical practice.	
<ul style="list-style-type: none"> • to define the basic concepts of communication process; • to apply the criteria for differentiation of favorable factors and barriers in communication; • to demonstrate psychological knowledge in the context of the therapeutic act; • to integrate knowledge about the expectations, rights and obligations of participants of the medical meeting. 	Communication favorable factors. The psychology of communication in the context of the therapeutic act. Patient expectations description. The patient's and the dentist's rights and obligations.
Theme (chapter) 2. Defining and analyzing the professional and unprofessional behavior in medical practice.	
<ul style="list-style-type: none"> • to define the main forms of communication. • to demonstrate ability to analyze body language. • to apply the acquired knowledge to interpret human 	Defining and identifying components of professional and unprofessional behavior.



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behavior.

- to integrate knowledge about hierarchical levels of communication in medical institutions.

The dentist behavior in a workplace.

Theme (chapter) 3. Behavioral medicine. Tasks of Behavioral Medicine

- to be familiar with the notion and tasks of behavioral medicine.
- to know the main strategies for optimizing the therapeutic act and effective dental-patient communication.
- to apply the acquired knowledge for communication process optimizing.

Active and empathic listening in physician-patient communication.

Strategies and techniques for communication process streamlining.

Communication for behavior change.

Theme (chapter) 4. Strategies to optimize effective dental communication skills with patients and colleagues.

- to define efficient and inefficient communication concepts.
- to identify types of communication behaviors: aggressive, defensive, assertive.
- to know the causes of inefficient communication in the dental-patient relationship.
- to demonstrate ability to analyze typical errors in communication situations.
- to apply strategies for communication difficulties solving.

Communication in different situations.

Typical communication errors.

The causes of inefficient communication in the patient's relationship. Paraphrasing in the physician - patient relationship. Solving communication difficulties by simulation. Communication with difficult patients.

Theme (chapter) 5. The dentist professional and personal problems analyzing. Professional burnout.

- to identify the main personal and professional problems of the dentist.
- to demonstrate skills to develop personal resources to overcome frustration, stress, etc.
- to demonstrate communication skills and relationships with different types of patients.
- to integrate knowledge about prophylaxis of professional burnout.

Problems and difficulties that may arise because of inefficient communication and inadequate behavior at work.

Techniques and methods of developing the personality resources of the specialist to obtain the psychological and energetic balance.

Professional burnout syndrome.

VII. PROFESSIONAL (SPECIFIC (SC)) AND TRANSVERSAL (TC) COMPETENCES AND STUDY OUTCOMES

Professional (specific) (SC) competences

- ✓ **PC1.** A thorough knowledge of the particularities of the structure, development and functioning of the human body in various normal and abnormal psychological states.
- ✓ **PC2.** Performing various practical work and procedures for carrying out professional activities specific to the specialty of dentistry based on the knowledge of the fundamental sciences;
- ✓ **PC3.** Fundamental knowledge, understanding and operation with theoretical knowledge and basic practical methods of medical behavior and communication.



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- ✓ **PC4.** The use of medical techniques, instrumental and laboratory investigations, digital technologies to solve the specific tasks of the patient's therapeutic course.
- ✓ **PC5.** Planning, coordinating and conducting health promotion activities and prophylactic measures to improve individual and community health, setting and implementing complex dispensary plans applicable to school and pre-school colleges;
- ✓ **PC6.** Applying special psychological principles and methods to develop models of communication situations with the patient and the therapeutic team.

Transversal competences (TC)

- ✓ **TC1.** The application of rigorous and efficient working rules, manifestation of a responsible attitude towards the scientific and didactic field, optimal and creative fulfillment of their own potential in a specific situation by observing the principles and norms of professional ethics;
- ✓ **TC2.** Ensure effective engagement in team activities.
- ✓ **TC3.** The identifying of opportunities for continuous training and efficient use of learning resources and techniques for their own development.

✓ Study outcomes

Note. Study outcomes (are deduced from the professional competencies and formative valences of the informational content of the discipline).

At the end of the course *Communication and medical behaviour* the student will be able to:

- apply principles for the effective communication process in the dentist-patient, dentist-dentist relationship.
- shape concrete situations of communication with the patient in order to change behavior.
- identify the most common types of communication mistakes encountered during the dentist-patient relationship;
- make optimal decisions to help patients in critical situations;
- apply different ways of psychological and moral support of different types of patients.
- know the qualities and optimal behavior for a successful medical practice.

VIII. STUDENT'S SELF-TRAINING

No.	Expected product	Implementation strategies	Assessment criteria	Implementation terms
1.	Working with books and CIT	Systematical work in the library and media. The current electronic sources exploring on the subject	1. The quality of judgments, logical thinking, flexibility. 2. The systematization of the informational material obtained through its own activity.	During the semester
2.	Report	The relevant sources analysis.	1. The quality of	During the



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		Analysis, systematization and synthesis of information on the proposed theme. Report preparation by respecting the requirements for presentation.	systematization and analysis of the informational material obtained through its own activity. 2. The concordance of information with the proposed theme.	semester
3.	Case study analysis	The case study identification and description. The causes analyzing of the issues described in the case study. The prognosis of the investigated case. The expected outcome deduction of the case.	1. Analysis, synthesis, generalization of data obtained through own investigation. 2. The knowledge algorithm creation based on the obtained conclusions.	During the semester

IX. METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-ASSESSMENT

• *Teaching and learning methods used*

In the teaching process of the *Communication and medical behavior* discipline are used different didactic methods, oriented towards the efficient acquisition and achievement of the objectives of the didactic process. In the theoretical lessons, along with the traditional methods (lesson-exposure, lesson-conversation), modern methods (lesson-debate, problematic lesson) are also used. In the practical lessons, forms of individual, frontal and group working are widely used.

Recommended learning methods:

Observation - Identification of elements characteristic of structures or biological phenomena, description of these elements or phenomena.

Analysis - Imaginary decomposition of the whole into component parts. the essential elements highlighting. Studying each element as part of the whole.

Comparison - Analysis of the first object / process in a group and determination of its essential features. Analysis of the second object / process and the determination of its essential features. Comparing objects / processes and common features highlighting. Comparing objects / processes and determining differences.

Modeling - Identifying and selecting the elements needed to model the phenomenon. Imaging (graphically, schematically) the studied phenomenon. Formulation of conclusions, deduced from arguments or findings.

Experiment - Formulation of a hypothesis, based on known facts, on the studied process/phenomenon. the hypothesis verifying by performing the processes / phenomena studied under laboratory conditions. The conclusions formulation deduced from arguments or findings.



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- **Applied teaching strategies / technologies** (specific to the discipline)

"Brainstorming", "Multi-voting"; "The round table"; "Group Interview"; "Case Study"; "Creative Controversy"; "Focus group", "Portfolio", "Group work", "Presentation".

- **Methods of assessment** (including the method of final mark calculation)

Current: frontal and / or individual control through:

- case studies analysis.
- role plays performing on the discussed topics.
- control work- 2 test papers
- individual work assessment

Final: differentiated colloquium

The final mark will consist of the average score from 2 control papers and the mark at student's individual work (score-0.5), + the final test (score-0.5).

The average annual mark and the marks of all the final exam stages (assisted by computer, test) - all will be expressed in numbers according to the scoring scale (according to the table) and the obtained final mark will be expressed in two decimal number being passed in the credit book.

Method of mark rounding at different assessment stages

Intermediate marks scale (annual average, marks from the examination stages)	National Assessment System	ECTS Equivalent
1,00-3,00	2	F
3,01-4,99	4	FX
5,00	5	E
5,01-5,50	5,5	
5,51-6,0	6	
6,01-6,50	6,5	D
6,51-7,00	7	
7,01-7,50	7,5	C
7,51-8,00	8	
8,01-8,50	8,5	B
8,51-8,00	9	
9,01-9,50	9,5	A
9,51-10,0	10	

The average annual mark and the marks of all stages of final examination (computer assisted, test, oral) - are expressed in numbers according to the mark scale (according to the table), and the final mark obtained is expressed in number with two decimals, which is transferred to student's record-book.



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Absence on examination without good reason is recorded as "absent" and is equivalent to 0 (zero). The student has the right to have two re-examinations.

X. RECOMMENDED LITERATURE:

A. Compulsory:

1. Mayou R., Sharpe M., Carson A., *ABC of medical psychology* first published in 2003 by BMI books, BMA house, Tavistock Square, London. 2007.
2. Athanasiu A., *Tratat de psihologie medicală*. Editura Oscar Print, București, 1998.
3. Ețco C. Cernitanu M. și a. *Psihologia medicală. Suport de curs*. Chișinău. Ed. Infomedica, 2013.
4. Cernitanu M. Ețco C. *Medical psychology. Course for medical students*. Chișinău. Ed. Infomedica, 2013.
5. Firestone Robert. *Psychological defenses in everyday life*. New York: Human sciences press. 1989.
6. Iamandescu I. B. *Psihologie medicală*. Ed. II, București: Infomedica, 1997.
7. Manea M., Manea T., *Psihologie medicală*. București, 2004.
8. Stevenson R. *Studying psychology*. New york. 1998.

B. Additional

1. Taylor, S. *Health Psychology*. New York: McGraw-Hill, 1991, p. 3-11.
2. Pesseschkian, Nossrat *Psychotherapy of Everyday Life*. Springer-Verlag, Berlin, Heidelberg, 1996.
3. Menninger K., Holzman P. *Theory of psychoanalytic technique*. New York: Basic book, 1973.
4. Enachescu C. *Tratat de igiena mintală*. Editura a 2-a – Iași: Polirom, 2004.
5. Iamandescu I. B. *Psihologie medicală. vol. I, Psihologia Sănătății*. Editura Infomedica, Bucuresti, 2005.
6. Tudose Florin. *Psihiatrie și Psihopatologie pentru psihologi*. București, 1998.