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Professional article

Medical Studies in English: Shared Learning

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SUMMARY

In recent years, medical studies in English have been organized at the Niš Faculty of Medicine. Thus, modern teaching approaches are required. It has been shown that there are many similarities between the two fields - English and medicine. As a result, it is believed that the methods and strategies used in teaching medical English language could be helpful when it comes to medical subjects.

The paper presents the principles and techniques of teaching English for medical purposes and examines the possibility of applying these principles to teaching medical subjects in English.

Key words: methods, principles, English, medicine, teaching

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INTRODUCTION

In recent years, medical studies in English have been organized at the Niš Faculty of Medicine. The lectures in medical subjects are held in English. In other words, the content of the lectures is medicine and healthcare but they promote the use of English as a medium through which students practise medicine. Therefore, the primary condition for enrollment is at least an intermediate level of English in order for students to be able to participate in lectures. On the other hand, there are certain requirements that the teachers have to meet for their lectures to be successful and to keep up with modern approaches to teaching.

One of the first changes is abandoning the traditional 'ex *cathedra*' style of teaching. In a traditional classroom, both learners and teachers were accustomed to a high degree of teacher control. The roles need to change and the authority has to shift from teacher to student (1). The teacher is to take on the role of an organizer, a facilitator whose task is to create conditions and opportunities for learning. Interesting, interactive lectures attract students' attention and raise their motivation for participating.

In language teaching, this is termed *learner-centered approach*. Bearing in mind the nature of medical work, the same can also be applied in medical studies as well. In learner-centered approaches, course design and teaching often become negotiated, dynamic processes and students' needs and expectations are of great importance. This does not mean that the students are in total control. The teacher must take into account the student learning styles and strategies and make the lectures more motivating which will in turn improve student participation and achievement. The primary obligation is to provide safe practitioners.

The initial step

The language of medicine and healthcare is unique. The primary characteristic is an extensive use of words related to the subject matter. It is a technical and academic language with widespread usage of abbreviations, acronyms, jargon and colloquialisms. Medical language provides precise information and it is objective and concise. The ability to communicate precisely is of paramount importance because it represents means of professional improvement and interaction with experts in the field which in turn helps build the qualities of a good doctor.

In this sense, medical lectures are similar to English for medical purposes (EMP) - the starting point in teaching is the level of morphology. The students need to grasp the basis of medical terminology in English so as to be able to use it appropriately and apply the rules of word formation in new combinations. This is partly covered during EMP classes where the morphological level is extensively practised. However, since medical lectures include more detailed information and go further into the field of medicine, it is necessary for teachers to have these points in mind when starting their lectures.

At this point pronunciation is very important. It is a good advice for both the teachers and the students to practise precise pronunciation of medical terms because it will greatly improve their communicative performance in medical career.

Although linguistic skills (reading, writing, speaking, listening) are commonly related to the study of language, in our context it can be said that these skills are also important, even though the content of the study is primarily medical. Namely, since the lessons are in English, which, in our case, is not the students' native language, sufficient attention needs to be paid to the development of the mentioned skills. In a way, this will help the students merge their medical studies and the English language more appropriately. Listening and understanding is naturally related to and facilitated by clear and correct pronunciation. The literature that is used in this specialized group lectures is in English and this enables the focus on the reading skill. Reading quikly and accurately is important for medical professionals. They need to understand a range of medical texts including hospital documents, textbooks, reference materials and articles. As English is becoming the official language of expert writing, the development of the writing skill should by no means be neglected. Practice is provided in note-taking and note making, writing referral letters and case studies, completing a range of medical documents, and later students learn to write specialized medical articles. The overall course should be interactive and based on communication so speaking in English plays a great part. Many of the students will be using English in their future careers so they study the language required to discuss investigations, diagnoses and treatment both with the patients and with English-speaking colleagues. Speaking tasks focus on speaking English in all aspects of patient care. Just like in EMP, all these skills need to be developed equally which is a requirement if the whole learning process is to be successful.

Most of these tasks require *pair* and *team work*. It is important to note here that these forms of studentto-student interaction are beneficial as they promote cooperation, improve communication and have a positive effect on developing those qualities that will make it easier for the future doctors to participate in coordinating treatment and to collaborate with the colleagues.

The main teaching principles

Case studies

One of the basic elements in medicine is case study, not only in the form of publishing but also as a useful tool for learning both language and medicine. Case studies can be exploited to increase student talking time in the classroom, they are rich in content and can provide the learner the potential to merge the acquired knowledge. The structure of the case study serves the communicative purpose and increases medical knowledge. It includes presenting signs and symptoms, conducted examinations, investigations or interventions, presenting diagnosis, treatment, evaluation - all those areas which make up the field of medicine.

Case studies provide the necessary content. They develop critical thinking and reflective learning and improve the organizational skills (great amount of information is classified into sections and organized). Case studies also enhance communicative skills as they present real-life situations and they encourage cooperative learning and team-work.

Problem-based learning

Closely related to case studies is problem-based learning. This is an approach based on a carefully selected and designed problem encountered in life and career. It demands from the student acquisition of critical thinking, proficiency in solving problems, improvement of strategies for individual learning as well as team work. Problem-based learning encourages students to discuss medical problems and thus develop specialized medical knowledge but they also improve their knowledge of English. They increase responsibility for their own learning which will help them to further progress in the field.

Project-based learning

Project-based learning (PBL) emphasizes authentic learning tasks grounded in the personal interests of learners (2). It is 'a systematic teaching method that engages students in learning knowledge and skills through an extended inquiry process structured around complex, authentic questions and carefully designed products and tasks' (3).

In the context of EMP, project-based learning functions as a bridge between using English in class and using English in real life situations outside the class (4). The connection with the field of medicine is obvious the medical content learned in class is immediately applicable to the workplace. The task of the teacher, therefore, is to bring the workplace as much as possible in the lectures. The insistence is on the use of authentic language - both medical and English (5).

Working on projects requires the use of *multiple intelligences*. Group work is integral to projects and through mutual cooperation various strengths of individuals promote the quality and success of the group as a whole (6). Another advantage of this type of learning is the so-called *shared learning* where the students have an opportunity to learn from one another.

There are numerous opportunities for active investigations which enable students to learn concepts, apply information, and represent their knowledge in a variety of ways. Collaboration among students and teachers enables sharing and distribution of knowledge between members of the learning community. In English for Medical Purposes students require instruction in medical topics, doctor-patient instructions and dealing with medical literature in English. Considering the fact that English is the lingua franca of medicine, proficiency in English will enable students, future doctors, to establish contact and participate in scientific exchanges with colleagues worldwide, to become equal members of the global medical community which will promote their professional development.

The underlying principle

The importance of application of modern principles and approaches to teaching cannot be overestimated. The modern society is always changing and in line with this, education is perceived as a continuing process. The goal of education is the facilitation of learning. It implies the ability of adapting and changing according to current demands. *Lifelong learning* is the guiding principle and it states that, in order to keep up with the developments in the field, it is necessary that the learning process does not stop with the completion of academic studies. The building of knowledge lasts throughout one's life and this is particularly applicable to the field of medicine which is constantly developing. For this goal to be achieved, the courses have to rely on students' learning strategies and strive to develop students' *autonomy* (6).

An autonomous learner is one who takes responsibility for his own learning and professional development. He finds his own ways, makes inquiries, organizes information and strives for perfection. The students cannot completely rely on teachers for all the knowledge they would like to have and they need to develop strategies on how to continue learning on their own. Students' autonomy is closely related to successful learning.

Tandem teaching from a different angle

The concept of tandem teaching in EMP has already been one of the topics of exploration (6). From the point of view of the language teacher, tandem teaching refers to a close cooperation with specialist teachers. The teachers of medicine bring into the context their expert medical knowledge in order to facilitate the merging of English and medicine. They provide concrete information whereas the EMP teacher has general medical knowledge and predominantly uses his linguistic background in the specific context. Tandem teaching introduces the necessary contents and promotes the relationship between subject teacher, EMP teacher and students.

From the medical standpoint, the context of medicine is more firmly at the basis of learning with English as the tool of acquisition. This time, the cooperation is initiated by the medical teachers. As experts in linguistic matters and communication, language teachers have a role of advisers - they can oversee the whole process in terms of accurate language use. It is believed that such cooperation can have positive results that would benefit the students who are at the very center of the teaching process.

CONCLUSION

Years of experience have shown that the above mentioned teaching principles could be applicable to te-

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aching medicine in English. This provides an ideal setting for shared learning among teaching staff. Moreover, it proved to be a highly challenging area and an inspiration for life-lasting personal and professional enhancement.

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NASTAVA MEDICINE NA ENGLESKOM JEZIKU: RAZMENA ZNANJA

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Sažetak

Poslednjih godina na Medicinskom fakultetu u Nišu organizuje se nastava na engleskom jeziku na svim studijskim grupama. Samim tim, potrebno je primeniti savremene pristupe u nastavnom procesu. Pokazalo se do postoji mnogo sličnosti između oblasti medicine i engleskog jezika. Zbog toga se smatra da metode i strategije koje se koriste u engleskom jeziku za medicinu mogu da budu korisne i u okviru nastave medicine koja se izvodi na engleskom jeziku.

U radu su izloženi principi i tehnike u nastavi engleskog jezika za potrebe medicine i ispituje se mogućnost primene ovih principa u nastavi medicinskih predmeta na engleskom jeziku.

Ključne reči: metode, principi, engleski jezik, medicina, nastava