

The role of medical English in Healthcare Education

Phong Thanh Nguyen *

Department of Foreign Languages, University of Medicine and Pharmacy at Ho Chi Minh City,
217 Hong Bang Street, District 5, Ho Chi Minh City, Vietnam

* E-mail of the corresponding author: ntphongdhyd@ump.edu.vn

Abstract

English plays a crucial role in the field of medical studies, providing a pathway for medical students to enhance their understanding through access to updated information, books, articles, and the latest research predominantly available in the English language. However, the significance of English goes beyond academic pursuits; it is integral for medical professionals pursuing careers in healthcare. Proficiency in English becomes pivotal in various healthcare settings, making it essential for both academic and professional purposes. This review article aims to explore the importance of learning English for medical students and doctors, emphasizing its role in professional development across different contexts. Additionally, the article will delve into the advantages of possessing professional English skills in the healthcare field and highlight the drawbacks associated with a lack of understanding of the English language.

Keywords: English for medical purposes, proficiency, healthcare field, need, English skills

DOI: 10.7176/JLLL/102-04

Publication date: May30th 2024

1. Introduction

Over time, it has become evident that proficiency in the English language is indispensable for both medical students and doctors, not only in academic settings but also in their professional development. In the field of Medicine, the English language plays a crucial role in helping students fulfill their academic objectives, such as reading textbooks, conducting internet research, making presentations, taking exams, interacting with teachers, and preparing for future studies abroad. Similarly, for doctors, English proficiency is equally essential, enabling their active participation in work meetings, conferences, and the dissemination of research findings through publications. As international mobility becomes more accessible for professionals, particularly those in the healthcare sector, the significance of English proficiency is growing substantially. Medical English has become a fundamental requirement for medical students and professionals, impacting their academic pursuits and professional endeavors profoundly.

The ongoing processes of globalization and rapid information exchange necessitate a shared language for effective international communication, especially considering the specialized features and terminologies prevalent in the medical professions. Consequently, the ability to read and comprehend medical literature in English is imperative for advancements in the healthcare field. The specialized lexicon and terminology prevalent within the medical domain underscore the criticality of English proficiency within healthcare settings. A mastery of medical English empowers professionals to accurately interpret and disseminate information, thereby ensuring the delivery of optimal patient care and safety.

The subsequent discussion explores the diverse ways in which proficiency in English empowers healthcare professionals, fosters collaboration, and stimulates innovation within the dynamic landscape of medicine and how healthcare professionals benefit from a proficiency in the English language.

2. Literature review

2.1. Five fundamental features of an ESP course

Various scholars, including Hutchinson & Waters (1987), Wright (1992), Smoak (1996), Aglaura (1999), and Farhady (1995), have offered different definitions of English for Specific Purposes (ESP). However, the most widely accepted definition, proposed by Celani (2008), characterizes ESP as an approach focused on studying specific aspects of language to meet the distinct needs of a particular group of learners. Celani outlines five fundamental features of an ESP course: (a) alignment with learners' learning needs and necessities, (b) provision of essential elements to achieve desired purposes, (c) incorporation of learners' prior knowledge, (d) enabling

meaningful language use by learners, and (e) fostering the adoption of new learning strategies while discouraging unhealthy habits like repetition and memorization.

Hutchinson and Waters (1987) trace the evolution of ESP through five stages. The first stage, register analysis, dating back to the 1960s and early 1970s, focuses on identifying the grammatical and lexical features of registers. The second stage involves discourse or rhetorical analysis, concentrating on the combination of sentences to produce meaning. The third stage, target situation analysis, emphasizes needs analysis as its paramount feature. The fourth stage integrates learning skills, strategies, and thinking processes underlying language use. The final stage, a learning-centered approach, is concerned with understanding the processes of language learning.

2.2. Needs analysis of English for Medical Purposes

Creating English for Specific Purposes (ESP) materials and determining their content without considering the learning reasons and needs of the students is a haphazard undertaking (Yazdjerdi, 2000). Munby (1991, as cited in Silva, 2002) highlights the significance of needs analysis in outlining an ESP course. Needs analysis serves the crucial purpose of helping teachers identify the specific needs of learners and enables the adoption of suitable teaching strategies to meet those needs. This process not only satisfies learners' learning needs but also motivates them to use language communicatively. The benefits of needs analysis, as emphasized by Hutchinson and Waters (1987), Yazdjerdi (2000), and Silva (2002), include providing assistance to teachers in understanding learners' needs and guiding them in adopting effective teaching strategies. Hutchinson and Waters (1987) present a comprehensive framework for investigating learners' language needs, comprising a set of various questions.

Due to the global status of the English language as a widely used means of international communication, the teaching and learning of English as a second or foreign language have become prevalent worldwide (Wardhaugh, 1986; Coury, 2001; Crystal, 2003; Jenkins, 2004; Kurfürst, 2004; Schwarz, 2003; Seidlhofer, 2005; Yang, 2006). The importance of English extends to various fields, including medical sciences, as emphasized by Pritchard & Nasr (2004), who stress that it holds particular significance for science students. They note that English is crucial for science students as it serves as the primary international language in the field, facilitating their familiarity with professional texts written in English. Given that a majority of new medical textbooks are in English, Kang (2004) highlights the pivotal role of this international language in medical studies.

Furthermore, Kurfürst (2005) and Joesba and Ardeo (2005) underscore the significance of English for Medical Purposes (EMP) as a subset of English for Specific Purposes (ESP). They argue that learning English equips medical students with the ability to read medical literature, journals, and write articles in English. This proficiency also prepares them for active participation in class discussions and international medical conferences. Kurfürst (2005) adds that English language proficiency enables medical students to compose patients' histories, orders, and prescriptions in their future careers. Van Naerssen (1978) contends that English for General Purposes (EGP) courses may not adequately meet the language needs of medical students. He asserts that tailored courses addressing their job-related language requirements are necessary. Consequently, determining what and how to teach English to medical students remains a subject of controversy, considering the anticipated future needs of these students.

The concepts of needs and needs analysis play a pivotal role in the discussion of English for Specific Purposes (ESP) courses. Wright (1992) elucidates that language learners, each with unique identities, bring their foreign language learning experiences and specific language requirements into the classroom with the expectation of fulfillment. Hutchinson and Waters (1987) assert that ESP is an approach centered around the learner rather than a predetermined product, aiming to address the language needs of individual learners. They emphasize that decisions regarding what and how to teach English should be guided by the language needs of learners, categorized as target needs (what learners need to do in the target situation) and learning needs (what learners need for effective learning).

To elucidate the target language needs analysis process, Hutchinson and Waters (1987) introduce three distinct issues: (a) necessities, which pertain to what English is required for, encompassing what learners must know to function linguistically efficiently in target situations; (b) lacks, representing the gap between learners' existing knowledge and what they presently require; and (c) wants, denoting the specific needs (academic or occupational) felt by individual learners.

Several researchers (such as Al-Tamimi & Shuib, 2008; Al-Fadly, 2004; Hull, 2004; Kavaliauskienė & Užpalienė, 2003) have noted that a significant portion of English for Specific Purposes (ESP) learners generally exhibit low proficiency in the English language. Despite completing their academic studies and graduating from university, many ESP learners fail to leverage the benefits of the ESP courses taken during their academic

pursuits. Al-Fadly (2004) suggests that the learners' subpar English proficiency can be attributed to various factors, one of which is the content of ESP books not aligning with the learners' specific needs.

There are numerous justifications for incorporating English education into medical training for new entrants. It is imperative to make English instruction mandatory in the first year. Even students from English-medium schools may find themselves perplexed by the medical terminology and abbreviations used in the initial weeks of anatomy class. Basic terms like "proximal," "distal," "ventral," and "dorsal" may seem unfamiliar, resembling words from an entirely different realm. Transitioning from the familiar arm and leg bones taught in schools to the more intricate concepts of radius-ulna and tibia-fibula can be challenging. Moreover, everyday terms like eye, ear, and nose are now referred to as ophthalmic, cochlear, and nasal, respectively. Similarly, heart and arteries take on the names cardiac and vascular.

Such linguistic shifts can create confusion and impede students' progress, leading to difficulties in comprehending, internalizing, and applying medical terms and foundational concepts.

2.3. The multifaceted role of medical English in healthcare education

This literature review also aims to explore the multifaceted role of medical English in healthcare education, focusing on its importance, challenges, and implications for medical students and professionals.

Importance of Medical English in Healthcare Education:

Proficiency in English is indispensable for medical students throughout their educational journey. An abundance of studies highlight the pivotal role of English proficiency in accessing and comprehending medical literature, textbooks, and research articles. Moreover, English proficiency facilitates effective communication with colleagues, patients, and healthcare professionals globally. Medical students with strong English skills are better equipped to engage in international collaborations, participate in conferences, and disseminate research findings.

Challenges in Learning Medical English:

Despite its importance, learning medical English poses several challenges for students and educators. The specialized vocabulary and terminology inherent in medical discourse can be daunting for non-native English speakers. Additionally, the complex grammatical structures and nuances of medical language require dedicated instruction and practice. Cultural differences and variations in medical terminology further compound the challenges faced by medical students learning English. Furthermore, the fast-paced nature of medical education leaves limited time for language learning, necessitating innovative pedagogical approaches.

Implications for Healthcare Professionals:

Proficiency in medical English has profound implications for healthcare professionals in their clinical practice and professional development. Research indicates that doctors with strong English skills are better equipped to access and implement evidence-based medicine, stay abreast of medical advancements, and provide quality patient care. Furthermore, English proficiency enhances doctors' abilities to communicate effectively with colleagues, collaborate on research projects, and publish in reputable medical journals. However, the lack of standardized English proficiency requirements in medical education and licensing exams poses challenges for international medical graduates seeking licensure and employment in English-speaking countries.

3. Study design and Participation

Participants

The study included 100 first-year students in the field of medical sciences at the University of Medicine and Pharmacy in Ho Chi Minh City. All participants were between the ages of 18 and 20 and had received English as a Foreign Language (EFL) instruction for approximately seven years during their high school education. As a result, they were well-acquainted with fundamental English language skills and grammatical concepts.

Data collection

The questionnaire consisted of four parts which was based on the questionnaire by Khaksari (2002), Shuib (2005) and Kaur (1993).

Part one of the study involved participants providing demographic information such as gender, age, and educational level.

In part two, participants were tasked with expressing their perspectives and understanding of the application of English skills. This section comprised 16 items, covering 3 items on reading, 3 on writing, 3 on

listening, and 3 on speaking, and 4 on sub-skills (grammar, vocabulary, pronunciation, communication). A five-point Likert scale, ranging from 1 (never) to 5 (always), was employed for this segment.

Part three aimed to capture the participants' perspectives on the significance of English language skills and sub-skills. They were instructed to assign ratings to the identical items found in part two, with a scale ranging from 1 (not important) to 5 (very important).

Part four was derived from Shuib's work in 2005 and was designed to evaluate the participants' competence in four English language skills (speaking, reading, listening, and writing) and four sub-skills (grammar, vocabulary, pronunciation, and communication). Participants were tasked with assessing their proficiency in executing English language skills and sub-skills, using the same questions as in part two. The scale for each item ranged from 1 (not efficient at all) to 5 (very efficient).

Following the data collection process, the researcher examined the responses utilizing Hutchinson and Waters' model for target language needs analysis. The analysis included presenting the frequency, means, and standard deviation for each section of the needs analysis questionnaire. These statistical measures were used to highlight the participants' requirements, deficiencies, and perspectives on the specific English for Specific Purposes (ESP) courses.

4. Findings

After gathering data through the needs analysis questionnaire, the following results were found.

Initially, the findings of Part 1 revealed that there were no significant differences in the English language requirements related to gender, age, or educational level among the participants. The study involved 100 first-year students in the field of medical sciences at the University of Medicine and Pharmacy in Ho Chi Minh City. All participants fell within the age range of 18 to 20 years old and had received English as a Foreign Language (EFL) instruction for approximately seven years during their high school education. As a result of this exposure, they were well-acquainted with fundamental English language skills and grammatical concepts. Despite variations in gender, age, and educational background, the participants displayed consistent levels of proficiency across the English language skills assessed in the questionnaire, including speaking, reading, listening, and writing, as well as sub-skills such as grammar, vocabulary, pronunciation, and communication. These findings suggest that factors such as gender, age, and educational level did not significantly influence the English language requirements among the first-year medical students in this study.

Secondly, with regards to the English language requirements of medical students in Part 2 and 3, the study's results indicated that reading, listening, speaking, and writing were the most frequently utilized English skills. Similarly, reading, listening, writing, and speaking were identified as the most important English language skills. Notably, the research revealed that activities such as reading articles and textbooks, reviewing medical articles in technical journals, consulting medical and technical manuals, exploring medical texts online, perusing instructions for medical instruments, studying course pamphlets, examining drug instructions, reading medical notes, delivering lectures, asking questions in class, listening to medical lectures, and attending presentations in conferences were considered both crucial and commonly practiced English sub-skills. Therefore, it is evident that reading skills ranked highest in terms of both frequency of use and importance (93%). These findings align substantially with the conclusions drawn by Al-Tamimi and Shuib (2010) and Basturkman (1998) in their investigations into the English language learning needs of petroleum engineering students. Both studies highlighted the high importance attributed to all English language skills, regardless of their frequency of use. Additionally, the research by Al-Tamimi and Shuib (2010) and Basturkman (1998) identified writing articles, reading booklets, delivering lectures, and reading textbooks as the most crucial and frequently employed English sub-skills. This study's results also bear resemblance to the work of Ghalandari, Nakhle, Razavi, and Naghavi (2013), who emphasized reading, speaking, listening, and writing as the most significant English language skills for medical students. Furthermore, in line with prior studies by Pritchard and Nasr (2004), Joesba and Ardeo (2005), Sidek et al. (2006), and Hui (2007), the current study reaffirms the pivotal role of English as a lingua franca within the medical community.

Questions	1 Never	2 Rarely	3 Sometimes	4 Often	5 Always
1. How often do you understand medical textbooks and research articles in English?	0	0	7	70	23
2. How often do you comprehend medical instructions or manuals in English?	0	1	10	70	19
3. How often do you extract relevant information from English medical journals or databases?	1	2	29	60	8
4. How often do you write comprehensive and accurate medical reports in English?	0	1	20	73	6
5. How often do you express your medical ideas and opinions in written English?	0	10	20	65	5
6. How often do you practice writing medical essays or research papers in English?	0	6	30	60	4
7. How often do you understand lectures and presentations delivered in English during medical classes?	0	0	9	85	6
8. How often do you follow English-language discussions or seminars on medical topics?	0	0	15	80	5
9. How often do you comprehend medical podcasts or audio materials in English?	0	0	20	75	5
10. How often do you communicate medical information in English during presentations or group discussions?	0	0	16	82	2
11. How often do you talk to patients or colleagues in English regarding medical matters?	0	5	15	78	2
12. How often do you participate in English-speaking medical workshops or seminar?	0	2	20	76	2
13. How often do you pay attention to grammar rules when reading or writing in English?	0	0	10	70	20
14. How often do you expand your English vocabulary with medical terms and expressions?	0	3	16	71	10
15. How often do you practice proper pronunciation of medical terms in English?	0	2	18	69	11
16. How often do you focus on effective communication skills when speaking or writing in English.	0	6	22	70	2

Table 1. The percentage of the frequency of the English language use of 100 participants

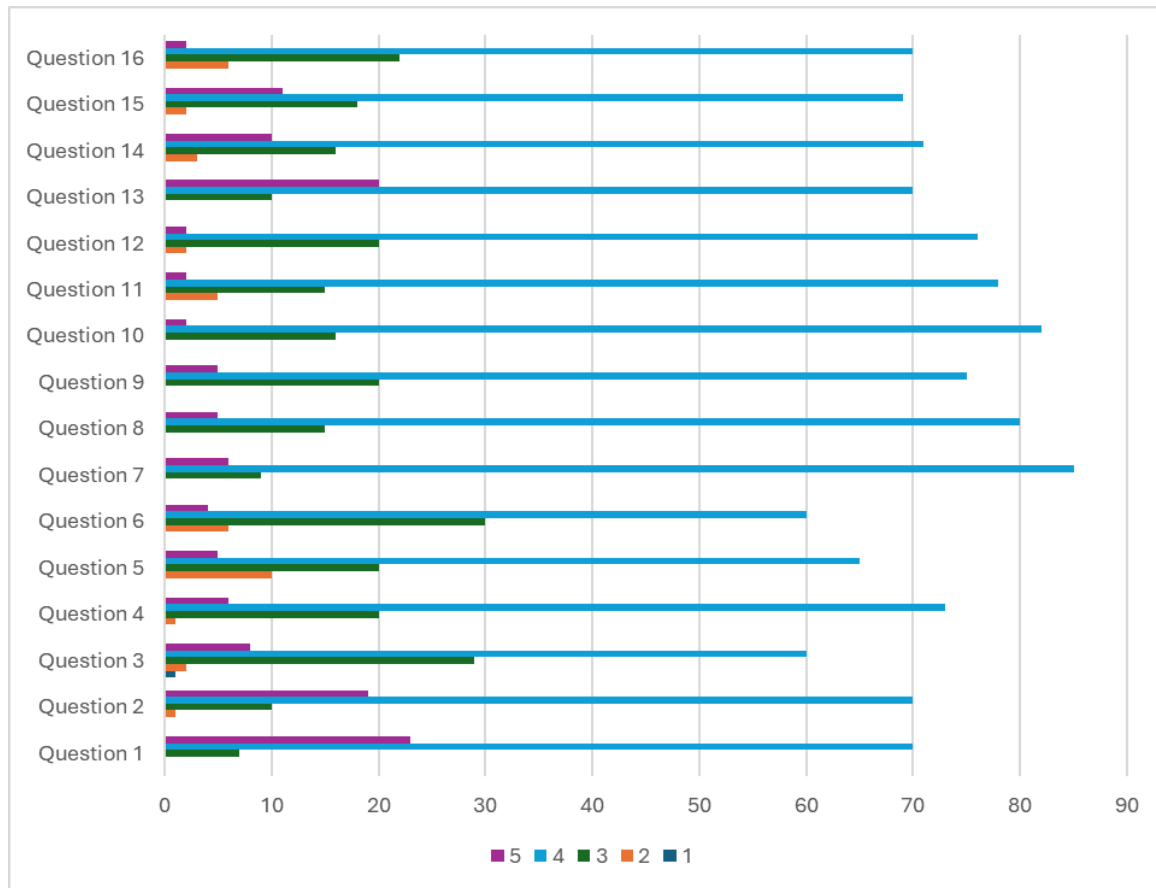


Chart 1. The percentage of the frequency of the English language use of 100 participants

Questions	1 Not important	2 Slightly important	3 Moderately important	4 Important	5 Very important
1. How important do you consider understanding medical textbooks and research articles in English?	0	3	4	79	14
2. How important do you consider comprehending medical instructions or manuals in English?	0	1	8	70	21
3. How important do you consider extracting relevant information from English medical journals or databases?	2	3	29	57	9
4. How important do you consider writing comprehensive and accurate medical reports in English?	0	4	16	72	8

5. How important do you consider expressing your medical ideas and opinions in written English?	0	6	19	64	11
6. How important do you consider practicing writing medical essays or research papers in English?	0	8	29	58	5
7. How important do you consider understanding lectures and presentations delivered in English during medical classes?	0	0	9	63	28
8. How important do you consider following English-language discussions or seminars on medical topics?	0	0	11	65	24
9. How important do you consider comprehending medical podcasts or audio materials in English?	2	15	20	54	9
10. How important do you consider communicating medical information in English during presentations or group discussions?	0	8	19	59	14
11. How important do you consider talking to patients or colleagues in English regarding medical matters?	0	2	9	56	33
12. How important do you consider participating in English-speaking medical workshops or seminar?	0	3	21	57	19
13. How important do you consider grammar rules when reading or writing in English?	0	0	10	69	21
14. How important do you consider expanding your English vocabulary with medical terms and expressions?	0	7	14	62	17
15. How important do you consider practicing proper pronunciation of medical terms in English?	4	18	23	48	7
16. How important do you consider focusing on effective communication skills when speaking or writing in English?	3	15	17	53	12

Table 2. The percentage of the importance of the English language requirements of 100 participants

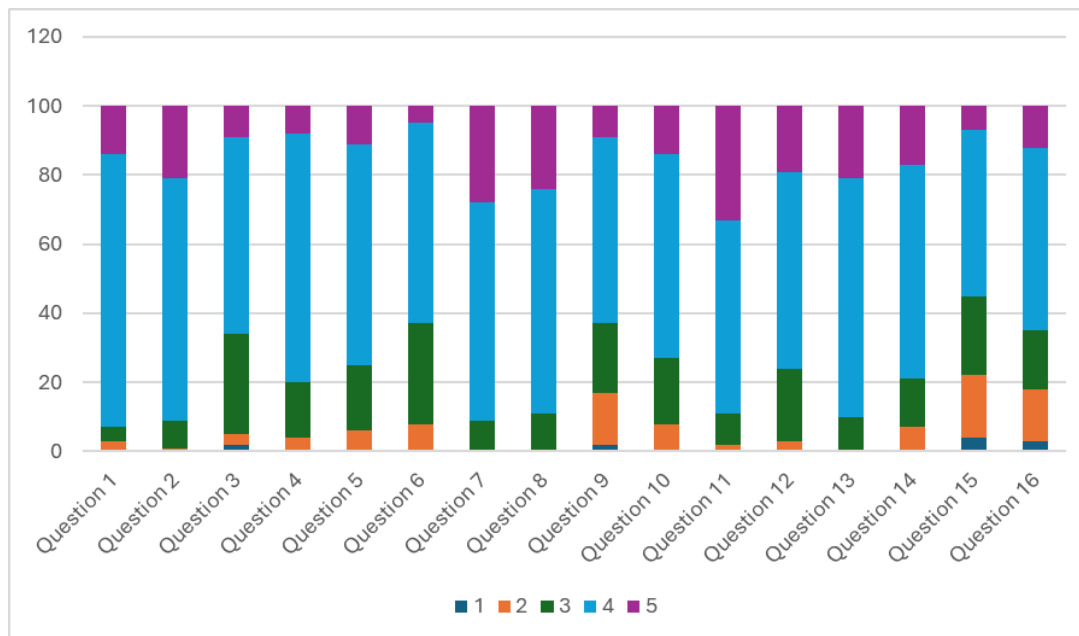


Chart 2. The percentage of the importance of the English language requirements of 100 participants

Finally, regarding the English language proficiencies of medical students, the study findings indicated varying levels of efficiency across different English language skills and sub-skills among the participants. Overall, the majority of participants reported moderate to high levels of efficiency in comprehending and expressing medical information in English, as well as in utilizing grammar rules and vocabulary. In other words, the results revealed that that medical students considered themselves adequately skilled in receptive skills (reading, listening), vocabulary, and grammar. However, they perceived their proficiency to be lower in productive skills (speaking and writing), pronunciation, and communication skills. Additionally, the self-assessment revealed that students viewed themselves as weak in one of the sub-skills (communication skills when speaking or writing). Notably, even though speaking was identified as a frequently used skill among students, their performance in this aspect was deemed unsatisfactory. This aligns with the observations of Ghalandari et al. (2013), who similarly highlighted students' inadequacies in writing and speaking skills and sub-skills.

Questions	1 Not efficient at all	2 Slightly efficient	3 Moderately efficient	4 Efficient	5 Very efficient
1. How efficiently can you understand medical textbooks and research articles in English?	0	0	10	69	21
2. How efficiently can you comprehend medical instructions or manuals in English?	0	0	12	71	17
3. How efficiently can you extract relevant information from English medical journals or databases?	1	12	26	52	9
4. How efficiently can you write comprehensive and accurate medical reports in English?	4	17	32	44	3
5. How efficiently can you express your medical	1	11	37	49	2

ideas and opinions in written English?					
6. How efficiently can you practice writing medical essays or research papers in English?	2	15	39	41	3
7. How efficiently can you understand lectures and presentations delivered in English during medical classes?	0	3	12	73	12
8. How efficiently can you follow English-language discussions or seminars on medical topics?	0	2	13	76	9
9. How efficiently can you comprehend medical podcasts or audio materials in English?	2	17	19	56	6
10. How efficiently can you communicate medical information in English during presentations or group discussions?	1	9	31	55	4
11. How efficiently can you talk to patients or colleagues in English regarding medical matters?	0	6	28	59	7
12. How efficiently can you participate in English-speaking medical workshops or seminar?	6	21	26	44	3
13. How efficiently can you make use of grammar rules when reading or writing in English?	0	1	5	68	26
14. How efficiently can you expand your English vocabulary with medical terms and expressions?	0	4	14	70	12
15. How efficiently can you practice proper pronunciation of medical terms in English?	0	2	18	69	11
16. How efficiently can you focus on effective communication skills when speaking or writing in English?	5	16	29	47	3

Table 3. The percentage of 100 participants' proficiency in executing English language skills and sub-skills

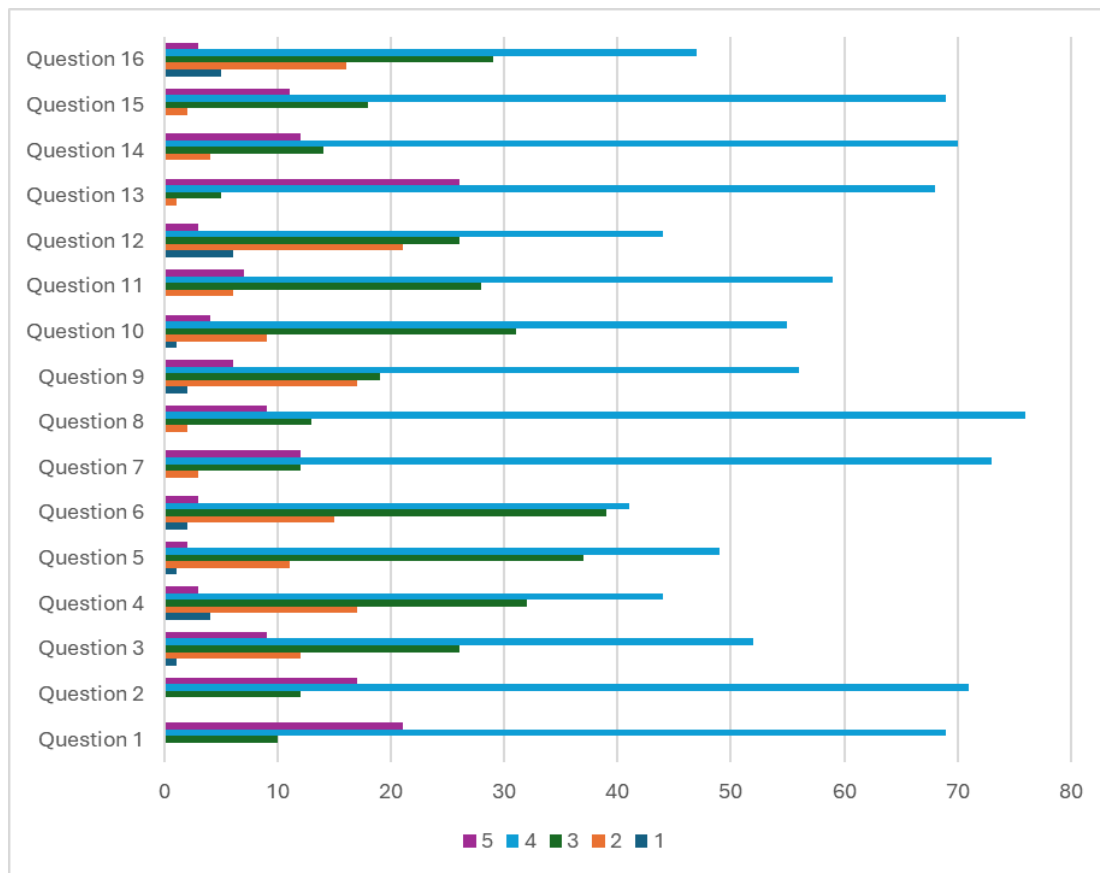


Chart 3. The percentage of 100 participants' proficiency in executing English language skills and sub-skills

5. Discussion

Concerning the English language requirements of medical students, the results indicated that students expressed a need for additional training in speaking, listening, writing, and reading skills to enhance their language proficiency. Students must attain proficiency in fundamental language skills, including reading, writing, listening, and speaking. Moreover, the practical application of this knowledge is crucial, necessitating the acquisition of Professional English language skills, often referred to as English for Medical Purposes (EMP).

The importance of English for Medical Purposes (EMP) in the context of medical education and practice has been investigated. In a study conducted by Poedjiastutie & Puspitasari in 2019 [3], it was found that proficiency in English is beneficial for doctors, contributing to enhanced performance in their professional roles. A sound understanding of proper medical terminology is particularly crucial for future doctors. Another study by Muhammad et al. in 2018 [4] highlighted the various aspects where professional English proficiency is essential for doctors. This includes active participation in seminars, comprehension of English medical literature and equipment manuals, effective communication with foreign patients and fellow health professionals, as well as the ability to write medical purpose letters and prescriptions and take accurate medical histories. The research underscores that to perform their duties effectively, doctors need to possess strong reading and comprehension skills for complex medical texts, along with proficient listening and writing abilities. Fluency in English is crucial for seamless communication with patients and colleagues from diverse linguistic backgrounds. Therefore, a solid grasp of the English language is seen as a key factor for success in both medical studies and professional careers.

Reading

The initial focus in teaching medical English should be on developing reading skills, as it serves as the foundational step in language acquisition. The ability to read professional books and manuscripts is crucial for individuals seeking to understand evolving medical terminology. Becoming familiar with key terms and

grammatical structures facilitates easier comprehension of textbooks, leading to more accurate information retrieval.

The ultimate objective in reading proficiency is to feel at ease with the English language. Initially, reading may pose challenges due to the pronunciation difficulties of numerous complex words. Some words may be challenging to both pronounce and memorize, necessitating the use of medical dictionaries or seeking assistance from teachers and colleagues. A lack of proficiency in pronunciation and reading can negatively impact self-confidence and hinder the learning process. The key is to persist in efforts to develop reading skills in medical English. Over time, as reading proficiency is mastered, medical terminology becomes more accessible and comprehensible.

Listening

The speed at which we learn any language is directly linked to our proficiency in listening, making it a crucial skill to enhance. Being attentive during lectures, seminars, meetings, or conferences is essential, as it provides an easy way to acquire valuable information and knowledge without active interaction. Carefully listen to the speakers, focusing on the information and messages they convey.

Research suggests that a person's ability to comprehend a subject through listening surpasses their ability to speak about it. Even in a complex discussion about an unfamiliar topic, one can understand almost everything, even if they can express only a few sentences on the subject. Therefore, the development of listening skills is of utmost importance. Additional strategies to improve these skills include listening to oneself reading aloud, watching English movies with English subtitles, tuning into TV news broadcasts, and, of course, attending conferences.

Speaking

Following the development of reading and listening skills, the next crucial step is to embark on the journey of speaking in English. Speaking is a challenging skill that requires consistent effort, involving issues such as finding the right words and pronouncing them correctly. The awareness of making mistakes in speech can lead to fear and hesitation, undermining one's confidence to communicate effectively.

Lack of confidence not only hinders communication with colleagues but also impedes interactions with strangers and individuals fluent in English from different countries. The inability to articulate thoughts and feelings in a precise and consistent manner becomes a barrier. Overcoming the fear of embarrassment is essential, and taking the initiative to speak, even with imperfect pronunciation, is crucial. Making mistakes initially is acceptable, and gradually, as comfort levels increase, one can break free from the cycle that has limited effective communication. It's important to participate, express opinions, and overcome the fear of making errors to develop proficiency in spoken English.

Talking

The essence of effective communication lies in both speaking and talking, each serving a distinct purpose. Speaking often involves prepared communication on a specific topic, allowing individuals to express their views. On the other hand, talking is an interactive process, occurring spontaneously between two or more people. It requires the ability to respond extemporaneously. The vocabulary needed for both activities varies, encompassing common words and specialized medical terminologies, often requiring on-the-spot use.

Creating personal notes on medical terms and compiling a customized medical English book is recommended, given the increasing specialization in medicine. Physicians of the same specialty often struggle to understand each other when discussing specific matters.

In interactive conversations, there may be instances where one understands the basic words, knows the key concepts, and comprehends the sentence but struggles to articulate phrasal words or specific medical terms. The challenge is not merely to be understood but to express thoughts and feelings appropriately and impressively. Developing expertise and experience in English communication distinguishes a medical professional. A helpful approach is to emulate actors in the theater, envisioning participation in these conversations. Writing and practicing sentences in front of a mirror can contribute to making the process of talking more natural.

Writing

Mastering writing is the final stage in the process of learning English. The ability to write is crucial for taking notes in a classroom setting, where the information conveyed through the teacher's spoken words often proves more valuable than what is found in textbooks. The advent of modern communication technologies, such as computers, mobile devices, and the internet, has brought about changes in the writing process and style. While

these technologies have, to some extent, facilitated writing in English, it's important to distinguish between writing in a commonly understood language and the specialized English required for medical communication.

Initially, medical terminologies may seem unfamiliar, and seniors may reassure learners that understanding will come with time. Both perspectives are accurate. It's essential to recognize that many medical terms not only stem from English but also have Latin or Greek origins. Thus, a thorough understanding and mastery of medical terminologies are necessary for effective communication in the medical field.

6. Conclusion

In the contemporary interconnected global landscape, possessing a strong command of the English language is not limited to international business or travel; its significance is particularly pronounced in the healthcare sector. Proficiency in English has evolved into an indispensable asset, enabling effective communication with colleagues and patients who come from diverse linguistic backgrounds. Moreover, it serves as a gateway to engage in global research, exchange knowledge, and access various career opportunities. Individuals seeking this level of proficiency can benefit from the guidance of a specialized language coach with experience in healthcare settings.

Healthcare professionals have compelling reasons to acquire proficiency in English. Given the critical nature of the healthcare industry where lives are at stake, any miscommunication poses significant risks. Hence, careful attention to language becomes crucial in establishing a trustworthy and clear communication channel between healthcare staff, patients, and their families. The choice of words is of utmost importance to prevent misunderstandings and to reassure and comfort the minds of family members.

Considering the aforementioned factors, it can be deduced that English holds a pivotal role in the healthcare sector. It serves as the language that connects professionals, facilitating the transfer of experiences, skills, and knowledge. Proficiency in English is vital for delivering high-quality care to patients.

7. References

- Aglaua, C. M. (1999). *Ethnographic needs analysis as basis for the design of EAP syllabi*. Paper presented at the 34th RELC-SEAMEO International Conference, Singapore, April 19.
- Hutchinson, T & Waters, A. (1987). *English for specific purposes: A learning centred approach*. Cambridge: CUP.
- Farhady, H. (1995). *On the specificity of purpose in ESP. The proceeding of the second international conference in linguistics and applied linguistics* In: H. Farhady (2006). *Twenty-five years of living with applied linguistics, collection of articles*. Rahnama press, 575–586.
- Khaksari, M. (2002). *An evaluation of the ESP courses of Management, Accounting and Social Sciences at the Islamic Azad University, Kerman*. Unpublished M.A Thesis. Islamic Azad University. Shiraz, Iran.
- Kaur, S. (1993). *Analysis of the English language needs of consultants at NCVC*. Unpublished Master dissertation, University of South Australia.
- Lucaya J, 2005. *In Foreword to "Medical English" by Ribes, Ramon and Pablo R. Ros*. 2006. ISBN-10 3-540-25428-5 Springer Berlin Heidelberg.
- MCI. 2018. *Competency Based Undergraduate Curriculum for the Indian Medical Graduate*. Medical Council of India, Sector- 8, Dwarka, New Delhi.
- MCI. 2018. *Attitude, Ethics and Communication (AETCOM) Competencies for the Indian Medical Graduate 2018*. Medical Council of India, Dwarka, New Delhi.
- MCI, 2019. *"Foundation Course for the Undergraduate Medical Education Program 2019"*. Medical Council of India, Dwarka, New Delhi.
- Muhammad, et.al. (2018). *English for Doctors: An ESP Approach to Needs Analysis and Course Design for Medical Students*. International Journal of English Linguistics; Vol. 8, No. 5; 2018 ISSN 1923-869X E-ISSN 1923-8703, retrieved from <https://www.researchgate.net/publication>
- Nunan, D. (1989). *Designing tasks for the communicative classroom*. Cambridge: Cambridge University Press.

Poedjiastutie D., Puspitasari R., *Do Doctors Need Communication in Their Job Places?* - Indonesian Journal of English Education 5(2):127-142, April 2019

Ramon R, 2005. *In Preface to Medical English* by Ribes, Ramon and Pablo R. Ros. 2006. ISBN-10 3-540-25428-5 Springer Berlin Heidelberg.

Shuib, M. (2005). *An English language needs analysis of factory production operators in Malaysia: A case study*. The Proceedings of International Literacy Conference 2005, 15–16 August, Penang, Malaysia.

Silva, F. (2002). *ESP Teaching for Learners in the Health Sciences Field*, Brazilian Journal of Nursing, 1, 35–40.

Smoak, R. (1996). *What is English for Specific Purposes?* Bureau of Educational and Cultural Affairs. English Teaching Forum, 41(2), 22–30. Retrieved from <http://forum.state.gov/vols/vol41/no2/>.

Wright, C. (1992). *The Benefits of ESP*. Cambridge Language Consultations. Retrieved from <http://camlang.com/art001.htm>.

Yazdjerdi, K. (2000). *A summative evaluation of two ESP courses in Engineering at the Islamic Azad University*. Shiraz branch. Unpublished M.A. Thesis. Islamic Azad University of Shiraz, Iran.

<https://www.hunimed.eu/course/medtec-school/test-preparationcourse/> (Downloaded January 31, 2020).