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Enhancing Interaction and Clinical Communication through Padlet in Medical English Courses

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Abstract

Teaching Medical English requires more than developing students' linguistic accuracy; it must also support meaningful interaction and effective clinical communication. At University of Medicine and Pharmacy at Ho Chi Minh City (UMP-HCM), traditional classroom practices have not always provided sufficient opportunities for medical students to engage in authentic, context-based communication. This study examines the integration of Padlet, an online collaborative platform, into Medical English courses as a means of addressing these challenges. Padlet was incorporated into a range of instructional activities, including case-based discussions, role-play reflections, vocabulary building, SOAP note writing, and patient education tasks. A mixed approach was employed, combining classroom implementation with a small-scale survey involving 60 medical students, alongside reflective feedback on learning experiences. The findings indicate that Padlet-supported activities enhanced student engagement, encouraged peer feedback, and fostered collaborative learning. Students reported increased confidence, reduced anxiety when using medical terminology, and greater fluency in professional communication tasks. These results suggest that Padlet offers a flexible and accessible digital solution for creating interactive, student-centered learning environments in English for Medical Purposes (EMP). The study concludes by highlighting pedagogical implications for ESP instructors seeking to integrate technology while maintaining disciplinary relevance and instructional practicality.

Keywords: Padlet, Medical English, interaction, peer feedback, clinical communication, digital learning. UMP at HCMC

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1. INTRODUCTION

Interactive learning is now an important part of modern medical education. Today's healthcare training focuses not only on knowledge but also on communication, teamwork, and continuous learning. In this context, English for Medical Purposes (EMP), a branch of English for Specific Purposes, helps medical students read international research, join academic discussions, and communicate with patients and colleagues in different settings. As medical education becomes more global, English courses need to go beyond teaching terminology and support real communication skills that students will use in clinical practice.

At University of Medicine and Pharmacy at Ho Chi Minh City, Medical English is a required subject in the undergraduate program. The courses aim to prepare students for practical tasks such as discussing clinical cases, interviewing patients, participating in role-plays, and writing simple medical notes. However, encouraging active interaction in traditional classrooms is not easy. Large classes, limited time, and students' fear of making mistakes often reduce participation, especially in speaking and writing. Consequently, many students lack confidence when using English in clinical situations. Another challenge is creating learning activities that are interactive and meaningful while still manageable for language teachers who may not have deep medical expertise. Tasks like case analysis, SOAP note writing, or patient education require both medical understanding and communication skills, which can be difficult to develop within the limits of a standard classroom. This gap between learning goals and classroom conditions suggests the need for flexible tools that promote collaboration, reflection, and gradual skill development.

To address these challenges, digital collaborative platforms offer a practical and flexible solution. Among these tools, Padlet stands out as an online visual board that allows students to post ideas, share resources, and comment on each other's work either in real time or at their own pace. Its simple and user friendly interface makes it accessible even for learners with limited technical experience. Importantly, Padlet does not replace face to face

instruction; rather, it extends classroom interaction beyond physical and time constraints, creating additional opportunities for participation, reflection, and peer learning.

Building on this potential, the present study investigates how Padlet can support Medical English teaching at UMP, with particular attention to interaction, peer feedback, and clinical communication. Through activities such as case based discussions, reflections on role play tasks, vocabulary development, SOAP note writing, and patient education exercises, the study explores how this platform can encourage more active engagement. Ultimately, it seeks to determine whether integrating Padlet can help students develop the practical communication skills required in real medical settings.

2. LITERATURE REVIEW

2.1 Interaction and Communication in ESP and Medical English

Interaction has long been recognized as a central component of effective language learning. From a social constructivist perspective, Vygotsky (1978) emphasized that knowledge is constructed through social interaction, with learners developing understanding through collaboration and scaffolding from peers and instructors. This view has strongly influenced second language acquisition research, particularly interactionist approaches that highlight the role of meaningful communication in language development. Long's (1996) Interaction Hypothesis further argues that negotiation of meaning, feedback, and modified output are crucial mechanisms through which learners acquire new linguistic forms.

In the field of English for Specific Purposes (ESP), interaction takes on additional significance. ESP learners are not only acquiring general language skills but also learning how to communicate within specific professional and academic communities. Dudley-Evans and St John (1998) stressed that ESP instruction should reflect authentic communicative practices of target disciplines, requiring learner-centered approaches that encourage active participation. In Medical English, interaction is closely tied to professional competence, as effective communication is essential for academic success, clinical teamwork, and patient safety. Bosher and Smalkoski (2002) noted that limited communicative ability in healthcare settings can have serious implications, underscoring the need for instructional practices that support meaningful engagement.

Despite this recognized importance, interaction in Medical English classrooms is often constrained. Large class sizes, limited instructional time, and students' anxiety about making mistakes—particularly in speaking tasks—can result in passive learning behaviors. Activities such as case discussions, role-plays, and reflective writing are widely recommended, yet their implementation is frequently restricted by the practical realities of traditional classroom settings. These challenges highlight the need for pedagogical approaches that expand opportunities for interaction while reducing learners' affective barriers.

2.2 Digital Tools and Collaborative Learning in ESP

Advances in educational technology have opened new possibilities for addressing these challenges. Research in computer-assisted language learning (CALL) suggests that digital tools can enhance learner engagement, autonomy, and interaction when thoughtfully integrated into instructional design (Warschauer, 2000). Collaborative online platforms, in particular, align well with social constructivist principles by enabling learners to co-construct knowledge, share perspectives, and engage in reflective dialogue.

The blended learning model proposed by Garrison and Vaughan (2008) emphasizes the value of combining face-to-face instruction with online collaborative spaces. Such environments allow learners to extend interaction beyond classroom time and to participate at their own pace. In ESP contexts, online discussion boards and collaborative writing tools have been shown to encourage participation from students who may be reluctant to speak in traditional classroom discussions (Kukulska-Hulme, 2020). These tools provide opportunities for peer feedback and reflection, both of which are essential for developing professional communication skills.

In Medical English education, digital collaboration tools offer particular advantages. Authentic materials such as clinical cases, patient information texts, and short medical reports can be shared and discussed collectively, creating opportunities for contextualized language use. However, previous studies also caution that the effectiveness of digital tools depends heavily on usability and accessibility. Platforms that are overly complex or time-consuming may hinder rather than support learning, especially in demanding medical training environments.

2.3 Padlet as a Collaborative Learning Tool in Medical English

Among available digital platforms, Padlet has gained attention for its simplicity and flexibility. As a visual collaborative wall, Padlet allows users to post text, images, audio, and video in a shared online space. Fuchs (2014) described Padlet as a versatile tool that supports collaborative learning by encouraging idea sharing and

peer interaction. Subsequent studies have reported positive learner perceptions, noting increased motivation, participation, and reflective thinking (Chau & Cheng, 2020).

In ESP contexts, Padlet has been used to support task-based learning and content-specific communication. Nguyen (2021) found that Padlet facilitated collaborative engagement in discipline-related tasks by providing a low-anxiety environment for written interaction. Within Medical English education, digital discussion spaces have been shown to encourage authentic language use through case-based scenarios and clinical reflections (McLean, 2016; Rajendran, 2022). These findings align with interactionist theories of language learning, which emphasize acquisition through meaningful and purposeful communication.

Nevertheless, empirical research focusing specifically on Padlet's role in developing clinical communication skills in English for Medical Purposes remains limited. Most existing studies address general EFL contexts or focus on learner attitudes rather than communicative outcomes. This gap suggests a need for context-specific investigations that examine how Padlet can be integrated into Medical English instruction in practical and pedagogically sound ways. The present study seeks to address this gap by exploring classroom implementation and student perceptions of Padlet-supported activities in a Medical English program.

3. METHODOLOGY

3.1 Teaching Context and Implementation

This study was conducted within a six-week English for Medical Purposes II (EMP II) module in the second year at University of Medicine and Pharmacy at Ho Chi Minh City (UMP-HCM). The course is part of the compulsory Medical English sequence and focuses on developing students' ability to use English in basic clinical and academic contexts. Class sizes typically range from 40 to 50 students, and instructional time is limited, which often constrains opportunities for extended interaction and reflective discussion.

Padlet was introduced as a supplementary learning tool rather than a replacement for face-to-face instruction. Its integration was gradual and closely aligned with existing lesson objectives to ensure pedagogical coherence and to avoid overloading students cognitively. The platform was used both during and beyond classroom hours, allowing students to engage with course content either synchronously or asynchronously.

Padlet-supported activities were designed to mirror authentic clinical communication tasks. These included case-based discussion boards in which students responded to short clinical scenarios by posting diagnostic questions, differential diagnoses, or treatment suggestions. Role-play reflections were used following simulated doctor–patient interactions, with students posting brief reflections on language clarity, appropriateness, and communicative effectiveness. In addition, shared vocabulary walls were created for thematic units such as the cardiovascular system and mental health, enabling collaborative vocabulary building. Students also worked collaboratively on SOAP note writing, following the Subjective–Objective–Assessment–Plan format, and drafted patient education materials in simplified English to practice adjusting language for lay audiences.

3.2 Participants

The participants in this study were sixty second-year medical students who volunteered to take part. All participants had an intermediate level of English proficiency, approximately B1–B2 according to the Common European Framework of Reference. They had prior experience using e-learning platforms such as Moodle and Microsoft Teams, which facilitated the integration of Padlet into the course without extensive technical training.

3.3 Data Collection

Data were collected at the end of the module to explore students' perceptions of Padlet-supported learning activities. A mixed set of feedback instruments was used, including a 10-item Likert-scale questionnaire measuring student engagement, confidence in using Medical English, and perceived peer interaction. In addition, students provided open-ended written reflections on their learning experiences and perceived outcomes. These qualitative responses were used to complement the quantitative data and to provide deeper insight into how Padlet influenced interaction and clinical communication. Informal classroom observations were also used to contextualize student feedback.

3.4 Ethical Considerations

All participants were informed of the purpose of the study and provided voluntary informed consent. Participation had no impact on course assessment. To ensure confidentiality, all data were anonymized and used solely for educational research purposes.

4. RESULTS

This section presents the findings of the study on the use of Padlet in Medical English courses at UMP. The results are drawn from both quantitative data collected through a Likert scale questionnaire and qualitative data obtained from students' open-ended responses. By combining these two sources, the study aims to provide a comprehensive understanding of how Padlet influenced students' learning experiences, particularly in terms of interaction, confidence, and clinical communication. The quantitative results offer measurable evidence of students' perceptions, while the qualitative comments help explain the reasons behind these perceptions and illustrate how the platform functioned in practice.

4.1 Quantitative Findings

The quantitative data from the Likert-scale questionnaire indicate a consistently positive student response to the integration of Padlet in the Medical English course. Overall, the mean scores across all domains ranged from 4.4 to 4.8 on a five-point scale, suggesting a high level of agreement regarding the pedagogical value of Padlet-supported activities.

Domain	Representative Item	Mean (1–5)	Agree/ Strongly Agree (%)
Engagement	"Padlet activities make Medical English lessons more interactive and enjoyable."	4.7	92%
Peer Feedback	"I benefit from reading and commenting on my classmates' posts."	4.6	90%
Confidence	"Padlet discussions help me feel more confident expressing medical ideas in English."	4.5	87%
Clinical Communication	"Using Padlet improves my ability to discuss cases and patient care in English."	4.4	85%
Overall Satisfaction	"I would recommend using Padlet in other medical courses."	4.8	95%

Note: Scale = 1 (Strongly Disagree) – 5 (Strongly Agree)

Table 1. Results of Student Perceptions of Padlet Integration in Medical English

Student engagement received a particularly strong endorsement, with a mean score of 4.7 and 92% of respondents agreeing or strongly agreeing that Padlet made Medical English lessons more interactive and enjoyable. This finding suggests that the platform effectively enhanced students' involvement in learning activities, addressing common challenges associated with passive participation in large classes.

Similarly, the peer feedback domain recorded a high mean score of 4.6, with 90% agreement. Students reported that reading and commenting on classmates' posts supported their understanding and encouraged reflective learning, highlighting the social dimension of Padlet-based interaction.

Confidence in using Medical English also showed a notable increase, with a mean score of 4.5 and 87% of students indicating that Padlet discussions helped them express medical ideas more confidently in English. This result is particularly significant in the context of EMP instruction, where anxiety and fear of making errors often inhibit active participation.

In terms of clinical communication, students reported a mean score of 4.4, with 85% agreeing that Padlet improved their ability to discuss clinical cases and patient care in English. Although slightly lower than other domains, this score still reflects a strong perceived impact on professionally relevant communication skills.

The highest level of agreement was observed in overall satisfaction, with a mean score of 4.8 and 95% of students stating that they would recommend the use of Padlet in other medical courses. This finding suggests broad acceptance of the platform and indicates its potential scalability within medical education contexts beyond language instruction.

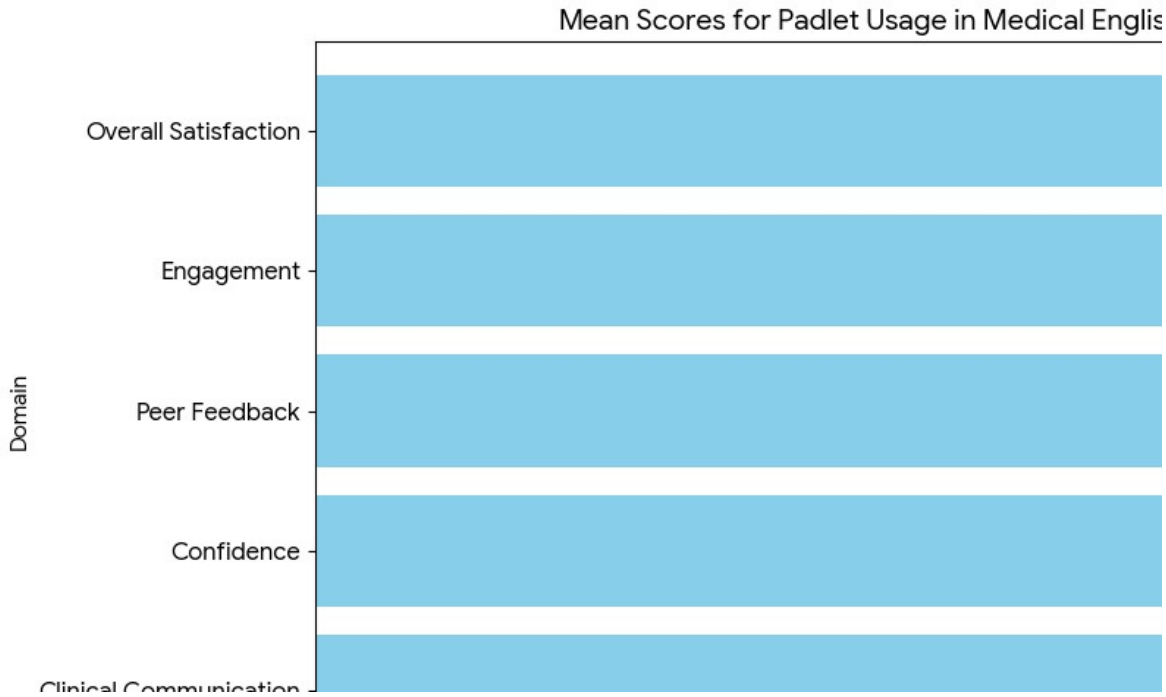

Figure 1. Student Perceptions of Padlet Integration in Medical English

4.2 Qualitative Findings

Analysis of students' open-ended responses revealed three recurring themes that help contextualize and deepen the quantitative results: increased comfort and participation, authentic use of medical language, and collaborative reflection.

Many students described feeling more comfortable participating in Padlet-based activities compared to traditional classroom discussions. Several noted that the platform reduced the pressure associated with speaking in front of peers, allowing them to contribute at their own pace. One student commented that Padlet "allowed quiet students to contribute more," while another explained that posting ideas online made it "easier to organize thoughts before using English." These responses suggest that Padlet helped create a lower-anxiety learning environment, particularly beneficial for students who were less confident in oral communication.

A second prominent theme was the authentic use of medical language. Students reported that engaging with peers' posts exposed them to a wider range of medical expressions and discourse patterns than teacher-led instruction alone. One respondent noted that Padlet "helped me learn medical expressions naturally through peer feedback," while another emphasized that reading multiple case responses made clinical terminology feel "more practical and easier to remember." These reflections indicate that Padlet supported contextualized language learning through repeated exposure and meaningful use.

The third theme concerned collaborative reflection. Students valued the opportunity to review, compare, and refine their work based on peer comments, particularly in tasks such as SOAP note writing and patient education materials. Several responses highlighted that peer feedback encouraged them to reconsider clarity, appropriateness, and audience awareness. This reflective process appeared to support deeper engagement with both language form and professional content.

4.3. Summary results

Taken together, both the survey results and the students' written comments show that Padlet was helpful in Medical English classes. It supported better interaction among students, increased their confidence, and helped them practice clinical communication. Because the activities were structured but still allowed students to share ideas and respond to others, learning became more active and student-centered rather than teacher-dominated.

In general, the learning environment became more positive after Padlet was introduced. Many students reported that they participated more often and felt more comfortable expressing medical ideas in English. The platform also encouraged collaboration, since students could read their classmates' posts, give feedback, and learn from

different viewpoints. This was especially useful in large classes, where not everyone has a chance to speak. In addition, Padlet provided a space where students could think carefully before responding, which supported reflection and gradual improvement of language skills.

For clarity, the results are presented in two main parts. The first part reports the quantitative findings, focusing on key areas such as engagement, peer feedback, confidence, clinical communication, and overall satisfaction. The second part presents the qualitative results from students' written responses, which help explain their experiences in more detail. Together, these findings suggest that digital collaborative tools like Padlet can make Medical English learning more interactive, supportive, and meaningful.

5. DISCUSSION

5.1 Enhancing Interaction and Participation

The findings of this study indicate that Padlet played a meaningful role in enhancing student interaction and participation in Medical English classes. High levels of agreement in the engagement domain, together with qualitative comments highlighting increased comfort and willingness to contribute, suggest that Padlet helped address long-standing participation challenges in EMP instruction. In particular, the asynchronous affordances of the platform allowed students to reflect on content and language before posting, which reduced the immediate pressure often associated with speaking in front of peers. This feature appeared to benefit quieter or less confident students, who reported feeling more able to participate when given time to organize their thoughts.

These findings are consistent with interactionist theories of second language acquisition, which emphasize the importance of creating low-anxiety environments that encourage language production (Long, 1996). Unlike traditional classroom discussions, where participation is often dominated by a small number of confident speakers, Padlet created a more inclusive interactional space. By shifting part of the interaction to an online environment, students were able to engage more evenly and thoughtfully, resulting in richer collective discussion and broader participation.

5.2 Supporting Clinical Communication Skills

Beyond general engagement, the results suggest that Padlet-supported activities contributed to the development of clinical communication skills. Students reported increased confidence and perceived improvement in their ability to discuss cases and patient care in English, as reflected in both quantitative ratings and qualitative reflections. Activities such as case-based discussions and SOAP note writing encouraged learners to use medical terminology in context, supporting purposeful language use rather than rote memorization.

This contextualized approach aligns with ESP pedagogy, which emphasizes the integration of language and professional content. By working with realistic clinical scenarios, students were required to apply medical vocabulary and discourse conventions in meaningful ways. Qualitative responses indicate that repeated exposure to peer-generated examples helped students internalize professional language patterns, increasing both fluency and awareness of appropriate register. In this sense, Padlet functioned as a bridge between clinical reasoning and language practice, enabling students to rehearse professional communication in a supportive learning environment.

5.3 Peer Feedback and Reflective Learning

Peer feedback emerged as a central pedagogical benefit of Padlet use. Students valued the opportunity to read, compare, and comment on classmates' contributions, which exposed them to multiple language models and approaches to clinical tasks. This process aligns with social constructivist perspectives, in which learning is viewed as a shared activity shaped through dialogue and collaboration (Vygotsky, 1978). Rather than relying solely on teacher feedback, students engaged in collective meaning-making and reflective evaluation of language use.

The multimodal nature of Padlet further supported this process. The combination of written text, visual organization, and, in some cases, audio or visual input created a learning space that encouraged reflection and sustained engagement. Students' increased confidence, as reported in the findings, echoes previous research suggesting that digital collaborative tools foster language ownership and learner autonomy (Fuchs, 2014; Nguyen, 2021). Through peer interaction, students were able to refine their understanding of both linguistic accuracy and communicative appropriateness.

5.4 Practical Implications and Limitations

From a practical standpoint, the findings suggest that Padlet is a feasible and effective tool for Medical English instructors, including those without extensive medical training. The platform allowed teachers to focus on

language support and task design while enabling students to engage with medical content at an appropriate depth through peer interaction. This flexibility is particularly valuable in EMP contexts, where balancing linguistic and disciplinary demands can be challenging.

However, several limitations should be acknowledged. The study relied primarily on self-reported data, which may not fully capture actual gains in communicative competence. In addition, the absence of a control group limits the ability to draw causal conclusions. Some challenges were also noted, including uneven participation among students and occasional technical issues related to internet connectivity. Despite these constraints, the overall positive response and high levels of student motivation suggest that the benefits of Padlet outweighed these limitations.

Taken together, the findings indicate that Padlet can effectively promote interaction, reflection, and professional communication in EMP contexts. By creating a collaborative, low-pressure environment grounded in authentic tasks, Padlet supports core principles of ESP pedagogy and offers a practical pathway for enhancing Medical English instruction.

6. CONCLUSION AND RECOMMENDATIONS

This study explored how Padlet can support teaching and learning in Medical English courses at University of Medicine and Pharmacy at Ho Chi Minh City (UMP). Using survey results and students' reflections, the study found that Padlet helps increase interaction, peer feedback, and clinical communication practice. Because it provides a flexible and low-stress space to share ideas, Padlet helped shift classes from teacher-centered lessons to more active, student-centered learning. An important benefit of Padlet is that it allows students to use medical English in real contexts. Through activities such as case discussions, SOAP note writing, and patient education tasks, students practiced language as a tool for professional communication, not just memorizing terms. Many students reported feeling more confident, more fluent, and more willing to express clinical ideas in English. Learning happened through discussion, collaboration, and reflection, rather than only through direct teaching.

For instructors, Padlet is practical and easy to use. It can be integrated into lessons without heavy preparation or advanced technical skills. This makes it suitable for ESP teachers in medical settings, even if they are not medical specialists. Padlet helps connect language learning with medical content while keeping teaching manageable. Although this study relied mainly on students' self-reports and did not include a control group, the consistently positive responses suggest that simple digital tools can still make a meaningful difference in engagement and communication development.

Based on these findings, several recommendations can be made for Medical English teaching at UMP and similar institutions. First, Padlet should be used regularly in blended courses to continue discussions beyond classroom time. Asynchronous activities give students more time to review language, improve their ideas, and learn from classmates. Second, teachers should design clear, purposeful Padlet tasks linked to clinical communication goals, such as case analysis, SOAP note reflections, and patient education activities. Well-defined instructions and guiding questions are important to keep discussions focused. Third, Padlet works best when combined with other digital tools. For example, Quizlet can support vocabulary learning, while Kahoot can be used for quick formative assessment. Using several tools together can address different aspects of language development. Future studies should follow students over a longer period and use multiple research methods to measure real improvements in clinical communication skills. Objective data, such as writing samples or simulated patient interactions, would strengthen the evidence.

In summary, Padlet is a useful and practical tool for Medical English education at UMP. By encouraging interaction, reflection, and collaboration, it helps students become more confident and effective communicators in medical contexts. Its use also supports broader efforts to improve teaching quality and innovation in medical education.

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