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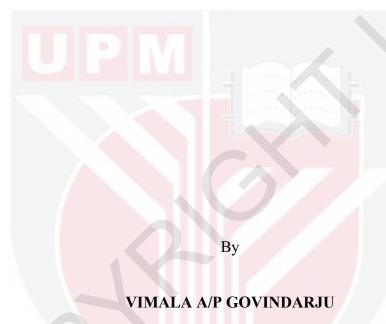
INTERPERSONAL COMMUNICATION SKILLS USED BY CARDIOLOGISTS IN DOCTOR-PATIENT COMMUNICATION AT THE NATIONAL HEART INSTITUTE, MALAYSIA

VIMALA A/P GOVINDARJU

FBMK 2017 61



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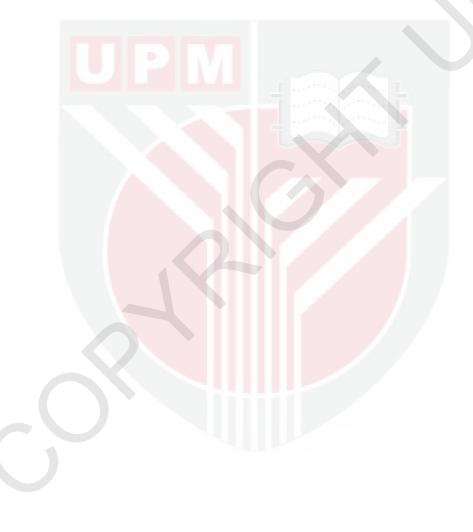


Thesis Submitted to the School of Graduate Studies, Universiti Putra Malaysia, in Fulfillment of the Requirements for the Degree of Doctor of Philosophy

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DEDICATION

I am extremely grateful for the love, support and scarification of my family, especially my husband Mr Kamalakannan who always responded to my numerous questions, listens to my problems and helps me in many ways. To my mother Mdm Kalaselvi, my gratitude who grow me alone after my father passed away and my appreciation for care my children while I busy with my course and always supported me in whatever I wanted to achieve since I am young.

Last but not least, I deeply miss my beloved brother, my son, Vasanthan Vasudevan, my father Govindaraju Vasudevan whom not with me to share this success. Finally, this thesis is dedicated to all medical professional especially medical doctors. I hope all the doctors will create a zone that all patients will be treated as a human being with love, care and concern.

Thank you and really appreciate VIMALA A/P GOVINDARAJU

Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfillment of the requirement for the Degree of Doctor of Philosophy

INTERPERSONAL COMMUNICATION SKILLS USED BY CARDIOLOGISTS IN DOCTOR-PATIENT COMMUNICATION AT THE NATIONAL HEART INSTITUTE, MALAYSIA

By

VIMALA A/P GOVINDARJU

May 2017

Chairman : Associate Professor Siti Zobidah Omar, PhD Faculty : Modern Languages and Communication

Doctor and patient communication perceived as key component in healthcare to create positive health outcome. Somehow, interpersonal communication skills used by the doctors through verbal and nonverbal communication in health care have potential to smooth the consultations between doctors and patients. However, patients dissatisfy and communication breakdown happened between doctors and patients. The aim of this study is to look at interpersonal communication skills used by the cardiologist in doctors' patient communication at the National Heart Institute (IJN). This study tries to understand the barriers faced by the cardiologists through their career life experience, and the strategies used to overcome the barriers in order to deliver positive health care outcome.

This research applied qualitative methodology through adopting a hermeneutic phenomenological approach. The approach most appropriate to describe an understanding the meaning on phenomenon where interpersonal communication skills used by cardiologists to their patient. The researcher focused on how the cardiologists use verbal and non-verbal communication with patients, the barriers faced by the cardiologists and the strategies to overcome the barriers using interpersonal communication skills with their patients.

The subject of this study are the cardiologists at IJN. About eleven cardiologists were chosen as informants through purposive sampling techniques and criterion-based selection. Data collected through in-depth interviews and observations. Instrument of the study was the researcher herself with the aid of the interview protocols. The researcher conducted the in-depth interview and observation for fifty minutes to two hours. The interviews session was audio recorded and observations

captured visually. The researcher then transcribed data verbatim and analyzed it using ATLAS.ti 7 software to code the key themes, and sub-themes.

Finding showed cardiologists use verbal communication with their patients by greeting and welcoming them; use multi languages which easily understand during doctor patient communication; use clear, supportive and encouraging health care information to build good relationships with patients and create a positive health outcome. The identification theme on non-verbal communication with patients are by touching them; body language and gesture; communicate using eye contact and finally use tone of voice during communicating with patients.

The themes on the barriers faced by the cardiologists when they use interpersonal communication skills to their patients are doctor's attitude towards their patients, language used during the consultation and time barrier during doctors' busy schedule in order to see patients and patients waiting hours for their appointment. Finally, in answering objective on how the cardiologists overcome the barriers, some themes were identified on the strategies to overcome the barrier on using interpersonal communication skill by the cardiologists with the patients are through communication skill; the training on communication skill and time management skill training for cardiologists. Interpersonal communication skills using verbal communication used by the cardiology doctors in IJN is highly correlated with better patients understanding on their illness and producing positive healthcare outcome.

This study concludes the quality of interpersonal communication skills will influence the patient's positive healthcare outcomes. The practical implications health care providers should improvised their interpersonal communication skills with their patients because communication help the healthcare professionals to achieve intermediate outcomes in the order to gain trust, mutual understanding, adherence, social support and self-efficacy on associated with improved health. Theoretical implications on Social Cognitive Theory describe how doctors obtain and sustain positive behavioral patterns, while providing the basis for policies involvement. Evaluating behavioral change depends on the factors environment, people and behavior. SCT provides a framework for designing, implementing and evaluating by paying equal attention to the interpersonal communication skills especially verbal and nonverbal communication.

Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk Ijazah Doktor Falsafah

PENGGUNAAN KEMAHIRAN KOMUNIKASI INTERPERSONAL OLEH DOKTOR TERHADAP PESAKIT DI INSTITUT JANTUNG NEGARA MALAYSIA

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Komunikasi antara doktor dan pesakit merupakan elemen utama dalam penjagaan kesihatan untuk menghasilkan kesan positif dalam penjagaan kesihatan. Kemahiran komunikasi antara perseorangan yang digunakan oleh doktor melalui komunikasi lisan dan bukan lisan dalam penjagaan kesihatan berpotensi untuk memudahkan process perbincangan semuka antara doktor dan pesakit. Walau bagaimanapun, perasaan tidak puas hati lalu gangguan komunikasi yang juga berlaku diantara doktor dan pesakit. Kajian ini bertujuan untuk melihat kemahiran komunikasi perseorangan yang digunakan oleh pakar jangtung, iaitu pakar kardiologi dalam menyampaikan maklumat penjagaan kesihatan di Institut Jantung Negara (IJN). Kajian ini juga cuba memahami halangan yang dihadapi oleh pakar jantung melalui pengalaman kehidupan kerjaya mereka, dan strategi yang digunakan dalam mengatasi halangan untuk memberikan hasil penjagaan kesihatan yang positif.

Kaedah kajian kualitatif digunakan melalui pendekatan fenomenologi hermeneutik. Pendekatan ini adalah paling sesuai untuk menerangkan dan memahami fenomena penggunaan kemahiran komunikasi antaraperseorangan yang digunakan oleh pakar jantung kepada pesakit. Penyelidik memberi tumpuan bagaimana pakar jantung menggunakan komunikasi lisan dan bukan lisan dengan pesakit mereka, halangan yang dihadapi oleh pakar jantung dan strategi untuk mengatasi halangan dalam menggunakan kemahiran komunikasi perseorangan dengan pesakit mereka.

Subjek kajian ini adalah pakar jantung di IJN. Seramai sebelas orang pakar jantung telah dipilih sebagai pemberi maklumat melalui teknik persampelan bertujuan dan pemilihan berdasarkan kriteria. Hasil kajian dikumpulkan melalui kaedah wawancara mendalam dan kaedah pemerhatian. Instrumen kajian ini adalah

penyelidik diri sendiri dengan bantuan protokol temubual. Penyelidik menjalankan setiap sesi wawancara mendalam dan pemerhatian antara lima puluh mint hingga dua jam. Sesi wawancara dirakam secara audio dan pemerhatian yang diambil gambaran visual. Penyelidik kemudian mentranskripsi atau menyalin semula sesi wawancara dan menganalisis dengan menggunakan perisian ATLAS.ti7 untuk menkodkan tema utama, dan tema-tema sampingan.

Keputusan kajian menunjukkan bahawa pakar jantung menggunakan komunikasi lisan untuk menyambut semasa pesakit masuk dalam klinik; bahasa yang digunakan oleh pakar jantung semasa berkomunikasi dengan pesakit adalah mudah difahami; penyampaian maklumat penjagaan kesihatan yang jelas, memberi sokongan dan menggalakkan menjalinkan hubungan yang baik dengan pesakit dan menghasilkan kesan penjagaan kesihatan yang positif. Hasil kajian mengenai komunikasi bukan lisan dengan pesakit adalah cara senthuhan pesakit; menggunakan bahasa badan dan isyarat; berkomunikasi menggunakan perhubungan mata dan akhirnya penggunaan nada suara untuk berkomunikasi dengan pesakit.

Hasil kajian bagi tema halangan yang dihadapi oleh pakar jangtung semasa menggunakan kemahiran komunikasi antara perseornagan adalah sikap doktor terhadap pesakit mereka, bahasa yang digukakan semasa berkomunikasi dengan pesakit, halangan waktu di mana pakar jantung sibuk dengan jadual tugasan dan masa menunggu pesakit terlalu lama. Akhirnya, dalam menjawab objektif bagaimana pakar jantung mengatasi halangan, beberapa tema telah dikenal pasti sebagai strategi mengatasi halangan menggunakan kemahiran komunikasi antara perseorangan oleh pakar jantung dengan pesakit dengan kemahiran komunikasi; latihan kemahiran komunikasi dan latihan kemahiran pengurusan masa untuk pakar jantung. Kemahiran komunikasi perseorangan yang menggunakan komunikasi lisan yang digunakan oleh pakar kardiologi di IJN berkaitan dengan pesakit yang lebih baik memahami penyakit mereka dan menghasilkan hasil penjagaan kesihatan yang positif.

Kajian ini menyimpulkan bahawa kualiti kemahiran komunikasi perseorangan akan mempengaruhi hasil kesihatan positif pesakit. Implikasi praktikal perlu meningkatkan kemahiran komunikasi antara perseorangan untuk membantu pegawai kesihatan untuk memperoleh kepercayaan, saling pengertian, pematuhan, sokongan sosial dan keberkesanan diri berkaitan dengan peningkatan kesihatan. Implikasi Teori Kognitif Sosial menggambarkan bagaimana tingkah laku positif doktor semasa memberi informasi penjagaan kesihatan. Menilai perubahan tingkah laku bergantung kepada faktor persekitaran, peribadi dan tingkah laku. Teori ini menyediakan rangka kajian untuk membentuk, melaksanakan dan menilai kemahiran komunikasi perseorangan terutamanya komunikasi lisan dan bukan lisan.

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I certify that a Thesis Examination Committee has met on 30 May 2017 to conduct the final examination of Vimala a/p Govindaraju on her thesis entitled "Interpersonal Communication Skills Used by Cardiologists in Doctor-Patient Communication at the National Heart Institute, Malaysia" in accordance with the Universities and University Colleges Act 1971 and the Constitution of the Universiti Putra Malaysia [P.U.(A) 106] 15 March 1998. The Committee recommends that the student be awarded the Doctor of Philosophy.

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LIST OF ABBREVIATIONS

SCT Social Cognitive Theory

IPC Interpersonal communication

RHCCM Relational Health Communication Competence Model

IJN National Heart Institute

WHO World Health Organization

UKMMC University Kebangsaan Malaysia Medical Centre

MOH Ministry of Health

CHAPTER 1

INTRODUCTION

1.1 Background

The profession of doctor are perceived noble, responsible person for saving patients' lives by treating illnesses effectively. Ethically, doctors need to give preference to their patients' in order to communicate on the treatment process (Shortliffe, 2012). In recent years, scholars recognized the perception about the knowledge of communication leads to contribution through healing process in the healthcare (Hargie, 2004; 2010 & 2011). The healthcare information that is conveyed by the doctors would enable the patients to understand via verbal and nonverbal communication where patients are comfortable to share information about their health issues with their doctors.

Scholars perceived interpersonal communication skills activities involved in the decision making process that connected with fair and unfair interpersonal communication procedure (Krep, 1981). Furthermore, scholar also stated that interpersonal communication involves person to person communication by exchanging information and feelings verbally or non-verbally. The health communication is one of the character which the doctors have to use it as an intermediate to convey all the specific information and service related to health care. This study relay on the presence and implementation of interpersonal communication skill practiced by the cardiologists, during the doctor and patients communication session.

Goold & Lipkin (1999) observed communication as an element which supports the interaction process between doctors and patients in the process of identifying and establishing medical treatment management strategies and decisions making along with the patient. The previous researchers' in this field have highlighted that an experienced medical professional will be more responsive and will be more capable to support the patients and help them in overcoming the emotional challenges of the patients, if the medical professional has a outstanding communication skills (Fallowfield & Jenkins, 2004). Epstein, Franks, Fiscella, Shields, Meldrum, Kravitz & Duberstein (2005) identified that doctors' skills in communicating with the patients will be useful while they show concern on patient's beliefs, necessities, and preferences.

The doctor's good communication skill will encourage the patients to participate aggressively in decisions making with regard to their health. Scholars Martin, Haskard-Zolnierek & DiMatteo (2010) highlighted that the interpersonal communication skills that practised and used by doctors will help in creating some positive consequence and at the same time it will affect the patient's satisfaction. In

this study, the researcher specified the doctors' interpersonal communication skills as an important fact in the health care information exchanging process with their patients. Research stated there are a small number of doctors only willing to come across the barrier in giving extra ordinary health care facility. Loevinsohn (1990) found interpersonal communication skills weak and it influence some inappropriate outcome in the health care system.

Nicholas, Highby & Hatzell (1991) specified the mistake of doctors in practising interpersonal communication skills with their patients will create great gap. Scholar pointed that the gap created between potentials will influence on the health therapy which leads to weak communication and relationship between doctors and patients. Steine, Finset & Laerum (2001) recognized, problems among doctors-patient communications, particularly communication barriers, are common; and these have an emotional impact on patient health management. Researcher connected the barrier in communication using interpersonal skills, regularly through health communication concerning doctors and patients which will make a vast modification in patient medical results.

Cortez (2010) stated that the normal complaints to the Ministry of Health (MOH) against the doctors are related to issues such as absence of doctors when patients need their services, late and absent from rounds to ward; behave rudely, unethically tease patients; never update or not informing the hospital directors or not taking the essential ethical action against staff who have overlooked their task and responsibility; professionals reluctant to take action against non-performing or unmanageable health care professionals. Martin (2005) emphasized some doctors also experienced with patients who are frustrated, who discuss their health illness symbol, conveying their anxieties and accepting recommendations.

In general, scholar applied Social Cognitive Theory (SCT), which closely related to creating an understanding on the research objectives, embedded in an important structure, by providing advance self-motivations and guidance to health behavior (Bandura, 1986). Additionally, the Relational Health Communication Competence Model (RHCCM) is the model which is related to the health care professionals who apply interpersonal communication skills to collect and deliver health care information in order to increase support to the patients. This model assists the health care professionals to create health care resolutions, discuss the health care system, and handle health issues which were elaborated in this research (Kreps, 1988).

1.2 Problem Statement

Communication research is one of the most central application area in health care and enables the delivery of health care services to a positive outcome. Communication is a primary mechanism used by health care professionals to gather and deliver health related information to their clients. A medical doctors are trained and competent in the knowledge of health sciences, and clinical skills. Scholars

defined the health issue closely related to patients, and their future efforts are needed to fully understand the communication practices (Thompson, 2003). Khalib (2010) perceived the interpersonal communication skills reflect on the performance of the main character as an intermediate for the health care information and excellence of the messages that delivered to "initiate, define, maintain, or further a relationship" that regulates the achievement of this manner.

However, general issues occur in the health care system concerning the communication skill are overlooked while challenges in delivering health care services by the healthcare professionals. At the same time, interpersonal communication barriers concerning the health care professionals are also discussed. In this issue, the researcher is concerned on the way cardiologist faces complications while using inappropriate interpersonal communication skills. Moreover, interpersonal communication skills is significant to the doctor and patient communication, to identify the illness, understand the problem, follow up with the patients before and after the treatment procedures.

Interpersonal communication between doctors and patients is central to the problem-solving process, enabling health care professionals gather key information from patients about symptoms, to evaluate and make sense of symptoms to develop accurate and deliver diagnostic information sensitively and meaningfully to patients. Scholars explained an effective interpersonal interaction is essential for providing informed consent to treatment, as well as for collaborative planning and delivery of appropriate cancer treatment strategies (Baile & Beale, 2001; Guttman, 1993; P. Parker, 2001; Radziewicz & Baile, 2001; Sapir, 2000; Street, 1991; Waitzkin, 1985). Interpersonal communication skills are closely related to verbal communication by the techniques of using words, oral and language.

Issues that affect verbal communication can lead to a misinterpretation of message, especially in the health care setting. Doctors with interpersonal communication skills are competent to discover issues and complications in advance, and can avoid medical disasters and expensive participation and deliver better care on their patients' health care (Jennifer & Nancy, 2010). However, researcher in this study identified various factors which can interfere specifically when cardiologists communicate verbally with patients. The past researchers have highlighted that the medical care professionals tend to concentrate more on the technical feature of their work and often fail to come across patient's psychology (Voegeli, 2013). Generally, nonverbal communication will also show if health care professional are being honest, and how he or she is listening and paying attention.

The researcher is concerned on how the doctor's nonverbal communication can increase patients' confidence, enthusiasm, and encourage opinion on their health position and health care outcome. There are attempts where the health care professionals communicate with their patients using nonverbal communication by proposing them information about their health. The way the health care professionals

listen, look, move, and react tells the patients whether they are treated with care or not. the researcher focusses on numerous problems and concerns on how the cardiologists in (IJN) communicating with patients using interpersonal communication skills, such as what are the verbal and nonverbal communications used by the cardiologists with their patients, the barriers faced by the cardiologist during interaction with patients and how the doctors overcome the barriers in interpersonal communication skills with their patients.

Khalib & Farid (2010) stated patients complain about the weak or poor communication with doctors, hospital staffs and other medical professionals in the public or government hospital, as well as private medical centre. This involves the sharing of data and information, approaches, symbols and accept the instructions from the health professional team (Vahdat, Hessam & Hamzehgardeshi, 2014). Beckman & Frankel (1984) stated that some studies have shown that doctors concerned their patients soon after they shared their health conditions. Lloyd (2000) proved there are some criticisms not on the doctor's medical capability difficulties, but pointed on communication issues and the common misconduct charges which rise from communication inaccuracies.

Berry & Dianne (2004) believed, patient's anxiety and dissatisfaction is connected to uncertainty and shortage and nonexistence of facts, description and response from the doctor. Furthermore, scholars identified that doctors and patient participation and involvement in decision making on patients health care is very important. This helps the doctors in conveying suggestion and opinions about different treatment plan procedures to the patients. The professional standard has been developed by the medical council to get the recognition certificate or professional license, as well as to follow the code of medical behavior and values of proficiency while carrying out the professional duties (Ekayanti, Dwiyanti & Nasrudin, 2015).

1.3 Research Question

Based on the problem and issues discussed in the previous section, several questions may araised. The questions are :

- 1. In the context of delivering healthcare information using interpersonal communication skills, how do the cardiologist use verbal communication with patient at the National Heart Institute?
- 2. How nonverbal communication is practiced by doctors with their patients during their interaction session?
- 3. What are the barriers faced by doctors to use interpersonal communication skills with patients during interaction session?
- 4. How the doctors overcome the barriers in interpersonal communication skills with their patients?

1.4 Objective of the study

General Objective

The main objective of this research is to understand how the cardiologists communicate with their patients using interpersonal communication skills during providing and conveying health care information in National Heart Institute Malaysia.

Specific Objectives

- 1. To identify the verbal communication used by doctors as a tool to communicate effectively with patients.
- 2. To identify the non-verbal communication used by doctors with their patients during interaction session.
- 3. To identify the barriers faced by the doctors in using interpersonal communication skills with patients during interaction session.
- 4. To identify the strategies doctors use to overcome the barriers in interpersonal communication skills with their patients.

1.5 Significance of Study

The study focusing on the interpersonal communication skills used by the cardiologist during communicating with patients at the National Heart Institute, Kuala Lumpur, Malaysia. From the policy perspective, all health care professionals are encouraged to be tolerant and give respect to others in order to sustain a pleasant relationship specifically while using interpersonal communication skills with patients (MOE, 2008). This study can be an idea on the health care plan emphasizedthe communication process between the health care professionals will be improved. Moreover it can be a option how Malaysian health care system organize the health care professionnals to sustain use interpersonal communication skills in doctors and patients communication. This is because, Ministry of Health (MOH) emphasized on communication elements be focused, truthful and effective to make sure to increase better health care services..

Practically, interpersonal communication skills in doctors and patients communication help leads to upgraded and better-quality patient's fulfilment, continued and sustained procedure of facilities, and better health care decisions (Bertrand, 1995; Kols & Sherman 1998; Vera 1993). Scholar identified doctors provide a good and better quality of health care through better understanding and in knowing their patients' needs beyond the medical terms with regard to listening, talking, exchange health care information, balancing the communication with patients, nonverbal communication skills through touch, body movement and eye contact (Myers, 2011).

Interpersonal communication skills assist the doctors to express their interest and concern to patients. from the theoritical perspective, Social cognitive theory and Relational Health Communication Competence Model are closely interrelated health care system with cardiologists and the patients by focusing on the interpersonal communication skills is applied in the process of delivering health information. Theoritically, this study inline with some points that show some improvement collaboration from health care professionals, making decisions on their health and illness, discuss the healthcare system and manage with health complications why using interpersonal communication skills witht their patients.

In line with the methodological perspective, the researcher will be demostrated of an understanding on the career life experiences of the cardiologist. In this qualitative study, the researcher let the informants to talk more than asking questions. Researcher perceived that in healthcare system, relationships among doctors and patients build through interaction, self-respect, belief, hope and mutual decision on positive result. The medical treatment procedures are more effective together between doctors and patients who have an energetic character in their health care such as plan for the treatment process, questioning on the illness and making decision on the appropriate modifications in their health performances.

Interpersonal communication skills between doctors and patients is a process of dual communication where both communicate, speak and listen without disruption, both doctor and patient ask questions, expressing and exchanging ideas and information between them, and both are able to recognize the information on what other is trying to mean about the health care information. In this research, sufficient opportunity is given and provided for the patient to describe about his or her disease which leads to strong interpersonal communication skills. It may also give the medical doctors to interpret understand, and discover the implication of the symptoms and signs the patient provides. The primary group that will gain profit in this study are doctors, specifically the cardiologists in National Heart Institute Malaysia. This study is focusing on interpersonal communication (IPC) skills used and practiced by the cardiologists at IJN.

The interpersonal communication skills in Malaysia health care is required to create understanding on the difficult characters carry out by health care specialists in the Malaysian health care system. For instance, health care structures encompass a general choice of different, however mutually dependent communicators (health care customers, dealers, and executives) those who apply numerous different channels, and exchange many, sometimes inconsistent, messages that stimulate health care results. The study is consequently planned for individuals on the health care knowledge and communication among doctors and patients to upgrade the health care service.

1.6 Scope and Limitation of Study

The scope of this research was narrowed down on cardiologist's interpersonal communication skills which is used to communicate with patients in IJN. This study totally applied qualitative research method as the researcher emphasized on the phenomenology hermeneutic which concentrated on particularly exposing the understanding of life experience as the stories between doctors and patients. Cardiologists share their career life experience on how they communicate with their patients using interpersonal communication skills.

Data analysis was specified and focused only on interpersonal communication skills used by the cardiologists to their patients at the single particular medical institute. This was a nationally recognized medical institute and the institute specialized in heart disease or illness treatment. A regulating issue in this research was the existence and operation of interpersonal communication skills practiced by the cardiologists and patients measured through observation method. The study was limited only to the doctor's interpersonal communication skills between the patients.

1.7 Keywords definition

Interpersonal communication - Interpersonal communication recognized as dyadic or two way communication between people, exchanging the characters of receiver and sender, to be associated over the common action of generating meaning. Interpersonal communication will be seen as "the process by which information, meanings and feelings are shared by persons through the exchange of verbal and nonverbal messages" (Brooks & Heath, 1993; Hargie, 2011). Interpersonal communication skills include listening skills, questioning skills, skills in showing understanding for others, skills of explaining, skills of persuasion, skills of self-disclosure, and skills of assertiveness (Hargie, 2011).

Verbal communication - Scholars stated verbal communication, specifically face-to-face and person to person, is at the center of human social relationships and psychoanalysis (Eric Berne, 1961). Verbal communication refers to words, codes and symbols are the main signs that make up communication verbally (Krauss, 1999). Words also act as symbolized as signs underlying message such as like discussion exchanging idea and information.

Nonverbal communication - Nonverbal communication is defined as the aspect of communication that information is exchanged through nonverbal cues which are not purely linguistic in content, such as facial expression, posture, gesture, body movement, touch and eye contact (Mohanlal, 2010).

Barrier – A barrier is defined as "a condition that makes it difficult to make progress or to achieve an objective" (Schoepp, 2005).

Relationship - Specific type of association between two or more persons or phenomena. A compulsory, frequently uninterrupted relationship between individuals in which one has some effect on emotional state or actions of the other.

Doctor-patient communication - The process of exchanging information, supporting patients' self-management, on emotions, decision making and enhancing the physician-patient relationship (Street, 2009).



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- Vimala, G., & Omar, S. Z. (2016). Interpersonal Communication skill Barrier Faced by Cardiology Doctors at National Heart Centre Malaysia. *International Journal of Academic Research in Business and Social Sciences*, 6(6), 355-369.
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- Vimala. G., Siti Zobidah Omar, (2015). Interpersonal Communication Skills Used By Doctors towards Their Patients. 2nd International Conference on Media and Society 2015 (Conceptual Paper Presented)
- Vimala. G., Siti Zobidah Omar, (2017). Verbal Communication used by Cardiologist at National Heart Centre Malaysia. *International Journal of Academic Research in Business and Social Sciences*. (Article Submitted)
- Vimala. G., Siti Zobidah Omar, (2017). Information Communication Technology Implementation in Healthcare. *Information Technology for Development*. (Article Submitted)



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