ORIGINAL ARTICLES

Expectation of Patients from Doctors

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Summary:

Doctors are produced to meet the health need of the people. People, as a patient have many expectations from a doctor. Doctors often don't know those expectations. The objective of this study was to find out the expectations of the patients from doctors and the goal is to make the doctors aware of these expectations so that they give due attention to those expectations. Waiting patients in GPs' clinic and the patients waiting in the out patient department of the Upozilla Health Complex and Rangpur Medical College Hospital were interviewed to know their expectation from doctors. Focus group discussion was

Introduction:

Patients are the clients of doctors. Health service provided by the doctors is the commodity which a patient receives as a client. It is being gradually recognized by the professionals that the service given to the patient should have the concordance with the expectation of the patients^{1,2}. Satisfaction of the patient largely depends on their expectation and recognition of their concern and expectation is important, because expectation drives people to seek health care for their symptoms^{3,4}. Satisfaction, moreover has positive impact on patients compliance keeping on follow up visit². It is quiet impressive to observe that patients are more satisfied and shows considerable improvement in symptoms and functional states when their expectations are met properly^{5,6}.

Studies revealed the fact that patient's expectations are often ignored by physicians. It is a matter of concern in primary care practice that physicians, "rarely take into account their patients' most important expectations, even when they have been made aware of them"⁷.

The explicit desire or request for health caring services are usually interpreted as expectations⁶. More precisely,

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done with community people to know their expectation from doctors when they need health care. It was found that most people expects good treatment(70.70%), greetings from doctor(51.91%), good history taking(100%), attentiveness(78.02%),to be allowed to narrate their ailments without interruption(87%), privacy(75%), clarification of prescription(75.15%), referral if needed(98%), dietary advice(67%), information about the ailment(75.79%), partnership in decision making(72.92%) and confidentiality(46.49%).

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"patients' expectation are anticipations that given events are likely to occur during or as a result of medical care"¹.

Dimensions of expectations are many. Richard and his colleagues studied expectations of internal medicine patient for care during office visit which revealed that most important expectations are as follows⁸.

History & Examination:	
Family history	49%
Personal history	35%
ENT examination	55%
Lung auscultation	65%
Abdominal palpation	54%
Cardiac auscultation	68%
Laboratory:	
Cholesterol test	38%
Blood test	52%
Radiology	20%
ECG	22%
Urine test	31%
Medication:	
Pain pills	13%
Antibiotic	16%
Other medication	32%
Counseling:	
Diet & exercise	38%
Discussion about how to manage condition	71%
Smoking	18%
Provide prognostic information	69%
Stress counseling	40%
Referral:	52%

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Valori et al showed that despite socio demographic contrast patients' expectations are of almost identical components⁹. These are i). Explanation and reassurance, ii). Emotional support, iii). Investigation and treatment⁹.

Patient's dissatisfaction is often rooted in unmet expectation; rational or irrational. Almost each patient comes to the physician with some perception, past experience and accumulated knowledge. These often influence their expectation¹⁰. There is almost universal agreement that one important responsibility of physician is to meet patient's needs and expectations.

Developing countries has started to reform their existing system of medical education in a way to make it more people oriented so that they really address the expectation of the community people. We may have to think in this context. So, we have to know our peoples expectation beforehand. This study is intended to know the expectations of our patients and people, both in community and health facilities.

Method of Study:

- a). Study design:
 - It is a qualitative cross-sectional study.
- b). Study place:
 - i). OPD of Rangpur Medical College Hospital
 - ii). OPD of Upozilla Health Complexes (UHC)of Rangpur District.
 - iii). Rural and Urban community of Rangpur District.

c). Study population:

- i). Patients attending OPD of Rangpur Medical College Hospital.
- ii). Patients attending OPDs of UHCs of Rangpur District.
- iii). Community people of rural and urban residential areas of Rangpur District.

d). Sample size:

- i). Patients attending OPDs = 314.
- ii). Community people = 6 groups of 10 peoples.

e). Data collection:

i). Patient's interview; An open ended questionnaire was used to interview the patients waiting in OPDs. Patients had

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been interviewed before they met the doctor.

 ii). Focus group discussion; A guide line was prepared for focus group discussion(FGD) in the community. Six groups consisting of 10 people in each group were discussed with according to the standard method of FGD.
Data was collected by one data collector

who was trained before hand.

f). Study period :

June2001 to December2001. Patients of all discipline except psychiatry were included in the study. Data were analyzed manually. Overall study design was consulted with expert group formed by WHO.

Results:

Patients' interview; Total number of patient was 314. 73% was male and 26% female. Their educational status and occupation are shown in Table-I. Mean age of the patients was 34.12 ± 12.53 yrs.(Table-II). Expectation of patients from doctor which appeared more frequently in the response were, good treatment, cure from the ailment, good behavior, good medicine, good caring attitude, good advice, adequate examination and attention to the

Table-I

Demography of interviewed patients (n = 314)

Category	No. (%)
Sex:	
Male	231(73.6)
Female	83(26.4)
Education:	
Illiterate	50(15.9)
Up to HSC & equivalent	212(67.5)
Graduate & equivalent	31(9.9)
Post graduate	21(6.7)
Occupation:	
Service	56(17.8)
Business	44(14)
Student	50(15.9)
Other(house wife, cultivator,	164(52.2)
labour, etc.)	

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Table-II

Age of the interviewed patients (n=314)

Maximum age	80 yrs
Minimum age	18 yrs
Mean age	34.12 yrs
Std. Deviation	12.53
Median age	32 yrs
Mode	30 yrs

patient(Table-III). Expectations in specific dimensions are shown in Table-IV. More than 50% patients want that they should be greeted by the doctors and should be offered seat. Attentiveness to patient's statement is expected by 78% patients. About 60% patients expected that they should have the opportunity to stay with the doctor for about 16.5min. in average. However, 40% said that stay time depends on the nature of the disease. About 87% patients desired to talk to doctor without interruption and talk about anything they want to. 48% patients desired to be examined privately in separate space. 75% patients wanted prescription to be made clear by the doctor by verbal narration. Almost all(99%)

Table- III

General expectations of patients from doctor (Terms used are patients' own language) (n=314)

Expectations	No. of respondents(%)
Good treatment	222(70.70)
Good medicine	45(14.33)
Cure from ailment	77(24.52)
Good behavior	54(17.19)
Attention to patient	12(3.82)
Adequate examination	14(4.45)
Good caring attitude	27(8.59)
Good advise	26(8.28)
Low cost treatment	03(0.95)
Appropriate diagnosis	08(2.54)
Low consultancy fee	02(0.63)
Cordiality	02(0.63)
Availability	05(1.59)
Adequate time for consultation	01(0.31)
Sympathy	02(0.63)

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patients stated that laboratory investigation should be done if it is necessary for the diagnosis. 98% of the patients want that doctors should refer the patient to the next appropriate person when he fails to understand the problem. 67% patients are in opinion that dietary advice should be given to the patient and about 56% expect health advice from doctors. 75% patients expressed the expectation to know about their disease and prognosis. 72.92% patients felt that decision about treatment strategy should be taken jointly by doctor and patient. 46.49% patients are in opinion that their personal information should not be disclosed to anybody else. However 51.59% is in favor of disclosing information to others if necessary in the interest of the patient. Facilities expected in the waiting place are, cleanliness, sitting arrangement, fan, toilet facility, drinking water, light etc.(Table-V). There is a big list of criteria of a good doctor in patients consideration which is shown in Table-VI.

Focus group discussion (FGD): On free discussion in focus group almost uniform opinion was found. The expectations expressed by the groups during discussion is compiled bellow. These, in their language are;

"1).We want to get doctors easily and at our arms length in need. 2). We want cheap treatment. 3). We want cordiality and good behaviour from our doctor. 4). Doctor should have up to date knowledge. 5). Doctor should see the patient taking more time. 6). Patient should be allowed to tell every thing he wants to say to his doctor. 7). Diagnosis should be correct. 8). Doctor's fee should be less. 9). Doctor should see the patient attentively and listen to the patient attentively and should not be engaged in other activities like talking to others, taking tea etc. 10). We want good treatment and care. 11). Doctor should pay equal attention to all patients irrespective of social status. 12). Doctor should reveal all facts about disease to his patient and involve patient in decision making. 13). If doctor fails to cure the patient he should refer the patient to appropriate person or place. 14). A doctor should not see more than 15 to 20 patients a day. 15). The staff of doctor should be well behaved.16). A doctor should be more humane and his attitude should not be business man like. 17). Doctor should greet the patient and be more sympathetic to patient. 18). A doctor should talk more with the patient. 19). Doctor should treat the patient

Table-IV

Expectation in specific dimension $(n=314)$	()
Dimensions of expectation	No. of respondents (%)
First interaction:	
Doctor should greet the patient	163(51.91)
Doctor should ask the patient to sit	185(58.91)
Doctor should ask about ailments	64(20.38)
History and clinical examination:	
Doctor should ask about what happened to me	314(100)
Doctor should examine the patient	91(28.98)
Doctor should ask for laboratory investigation	20(6.36)
Doctor should listen attentively	245(78.02)
Doctor should note down the ailments of the	
Patient	23(7.32)
Stay time with doctor depends on disease	126(40.12)
Doctor should not interrupt patient while narrating	274(87.26)
Doctor may interrupt if feels things are not	
Relevant	38(12.10)
Doctor should examine patient privately	151(48.08)
Prescription should be narrated verbally	236(75.15)
Verbal narration of prescription is not necessary	16(5.09)
Investigations should be done only if necessary	311(99.04)
If doctor do not understand the problem of the patient he should refer the pa	atient to specialist/Hospital
Other advice, patient expect from a doctor:	309(98.40)
Dietary advice	
Health advice	212(67.51)
Advice for next visit	175(55.73)
Preventive knowledge	15((4.77)
What else to be done apart from medicine	22(07)
Family problem	04(1.27)
Family planning advice	01(0.31)
Spiritual healing	06(1.91)
No additional advice is necessary	01(0.31)
Information about nature and prognosis of the disease:	64(20.38)
Nature and prognosis should be informed to patient	
Nature and prognosis need not be explained to patient	238(75.79)
No response	71(22.61)
Participation of patient in decision making:	05(1.59)
Only doctor will decide about treatment strategy	
Only patient will decide the treatment strategy	84(26.75)
Doctor and patient both will take part in decision making	01(0.31)
Secrecy of patients private information:	229(72.92)
Doctor should keep it secret	
May reveal to others in patient's interest	146(46.49)
Don't care	162(51.59)
06(1.91)	

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Table-V

Facilities expected in waiting place (This is the overall extract of the expectations of patients)			
1	Cleanliness	12.	Air cooler
2.	Sitting arrangement	12.	Drinking water
3.	Fan	14.	Magazine
4.	Toilet	15.	News paper
5.	Light	16.	Attendant
6.	Table	17.	Water glass
7.	TV	18.	Locker for keeping patients' belongings
8.	Bed for seriously ill patient	19.	Toys for children
9.	Adequate space	20.	Telephone
10.	Separate arrangement for male and female	21.	Arrangement for food
11.	Good ventilation	22.	Quiet environment

Table-VI

Criteria of a good doctor in the opinion of the patients (This is an overview of the criteria set by the patients)

Good behavior	• Give good advice
Honesty	• Examine patient properly
Politeness	Gives good medicine
Sound professional knowledge	Gives correct medicine
Higher degree	• Punctuality
Attentive to patient	• Nonsmoker
Low consultancy fee	• Enough experience
Ability to cure patient	• Humane ness
Sympathetic to patient	• Give equal attention and care to every patient
Available in need	• Patience
Give good treatment	Show honor to patient
Give enough time to patient	-
Diagnose correctly	• Healthy
Smartness	• Pious
Reassure patient	• Foreign degree
Good professional skill	• Gives low cost treatment
Cordiality	• Non threatening attitude

considering them as his own family member. 20). Doctor should examine the patient properly. 21). Doctor should be a life long learner and he should do research. 22). Doctor should have a good degree(not specified). 23). Doctor should reassure patient. 24). Doctor should be skilled. 25). Doctor should not smoke. 26). Doctor should prescribe good medicine(medicine which works good) and should not prescribe medicine which is not available in the market and he should narrate properly how to take medicine. 27). In emergency doctor should take quick action and he may seek other's help if necessary. 28). Doctor should show patience and answer all queries of a patient. 29). Patients should be asked to come for follow up and doctor should write letter to the patient to come for follow up if patient does not come. 30). Doctor patient relation ship should be very friendly. 31). Doctor should not hurt the patient during examination. 32). Doctor should have high moral character. 33). Doctor should advise about diet and other good health habits. 34). Unnecessary investigations should not be done.

Discussion:

Expectation of our patients as expressed during their interview and focus group discussion is almost same as the expectations of the patients elsewhere in the world. They want good behaviour, cordiality, sympathy, advise in different health aspects including diet and prevention, availability of doctor in need, caring attitude, proper history taking and clinical examination, correct diagnosis and treatment, degree, knowledge and skill of doctor, prompt and easily available and appropriate emergency service, information about disease, confidentiality, low cost treatment, referral, ownership in decision making. Referral advice is one important expectation of the patients often ignored^{3,6,8}. Verbal narration of the prescription, health information and advice about the diet are the expectations frequently observed. Other studies also revealed that the patients give much importance on these expectations^{6,8,11}. These expectations should be taken care of adequately. It is quite likely that doctors concentrate more on examining and diagnosing the ailments and feels free of any responsibility by giving only the written order(prescription) to the patient which contains only some medicine. They are likely to be careless about other necessary advice like diet, relevant health information and how to take drugs. In fact it needs talking to patients adequately and appropriately. This is an avenue of patient- physician communication. This also includes explanation about disease and it's prognosis. These are also expected by the patients frequently. This is observed in our study and in many other studies also^{5,8,9,12,13,14}. Most patients expect to be involved in decision making along with doctors. This is our observation and other studies also have the same observation^{11, 15,16}. In 1980 the supreme court of Canada suggested that physicians have a legal obligation to disclose and explain the treatment and letting the patients make their own choice¹⁷. Confidentiality is a major area of patients' expectation. In our study a good number of patients

also expressed the view that the secret information may be revealed to others if necessary for patient's interest. In a study by Jung, Wensing and Grol, GPs and patients agreed equally that patients' information should be kept secret¹¹. Investigation for diagnosis is advised frequently by doctors. Majority of the patients' expectation is that laboratory investigations should be done if it is necessary for diagnosis. In other studies also laboratory test emerged as a significant expectation of the patients^{3,18,19}.

Patients has to wait for a considerable time in the waiting room of the concerned doctor. Logically waiting facilities is a general concern of the clients. In our study patients have expected to have many items present in waiting place. It is a natural human instinct to get as much as possible and to demand it. However some of the facilities demanded by the patients need to be considered with importance. These are; adequate space, cleanliness, comfortable sitting arrangement, fan, toilet, safe drinking water, adequate illumination and ventilation, good manner of staffs and quiet environment.

The criteria of a good doctor is also remarkable. Good behavior, humaneness, knowledge, cordiality, honesty etc. are the attributes of a good doctor indeed.

Patients expect that the doctor will be attentive to the patient, allow the patient telling his ailment as much as the patient desires, charge minimum fee, have empathy to patient. Above all a doctor should be a good friend and should be trustworthy and he should be available in emergency situation. Apparently there are many expectations which can only be met if a doctor is a missionary. In real life situation a doctor is an ordinary human being. He has all the personal priorities for his family members. He is a professional rather than a missionary. But as he is a service provider he should take consideration of what his clients(patients) expect form him. However, we have to see what the doctors' attitude is towards the expectation of the patients. We have to look at the expectation and reality gap. Then we can see how this gap can be shortened if not eliminated.

Conclusion:

It is obvious from the above discussion that the expectations of our patients are almost same as that of others in different parts of the world. Expectations are of many folds and dimensions. These expectations needs to be addressed adequately. As the satisfaction and expectation goes parallel, to give highest satisfaction to the patient, doctors should address as much expectation as possible. However we have to see how doctors can accommodate best with these expectations. So, we should create awareness among the doctors as regard to the expectation of the patient from doctors.

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