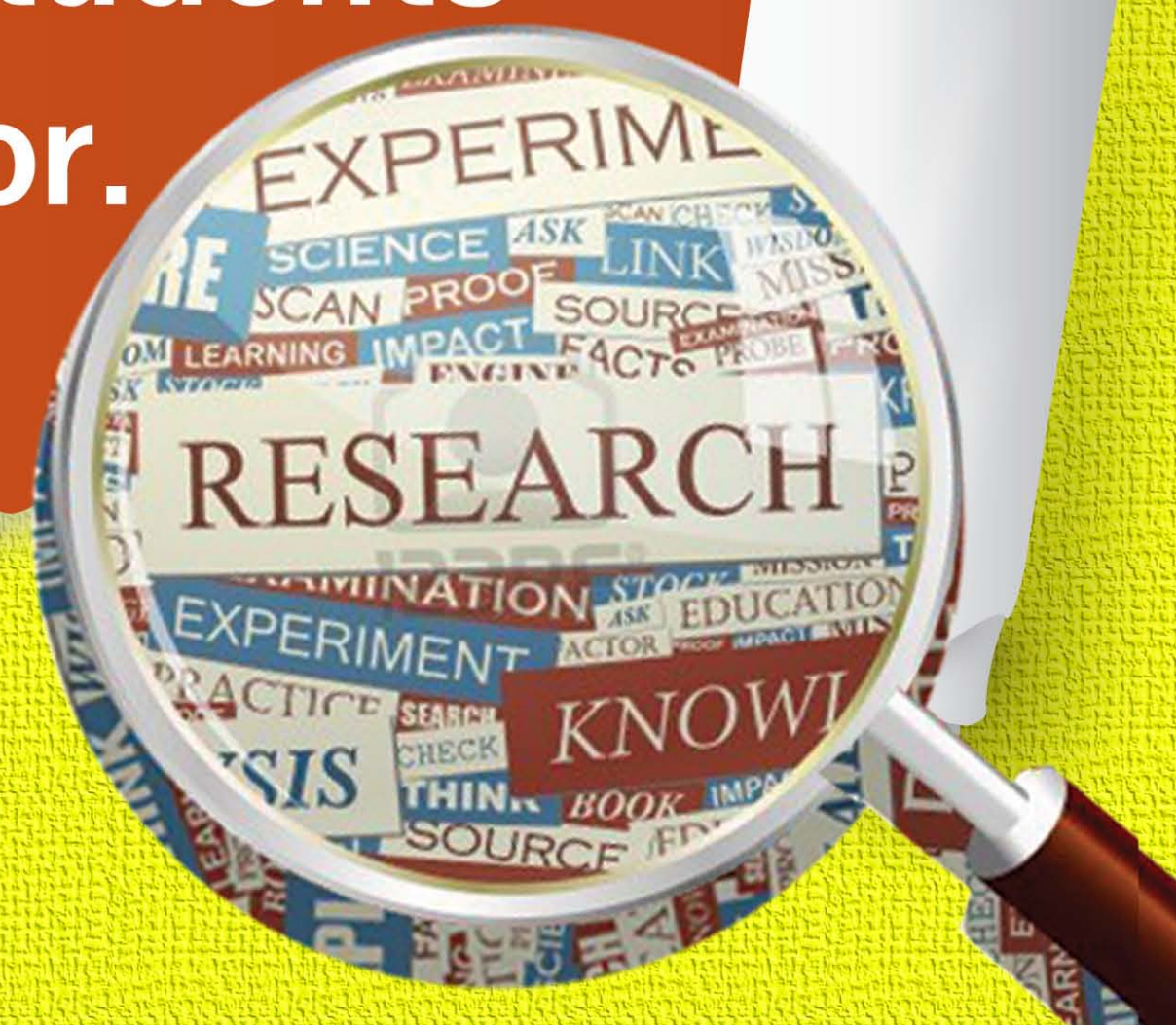
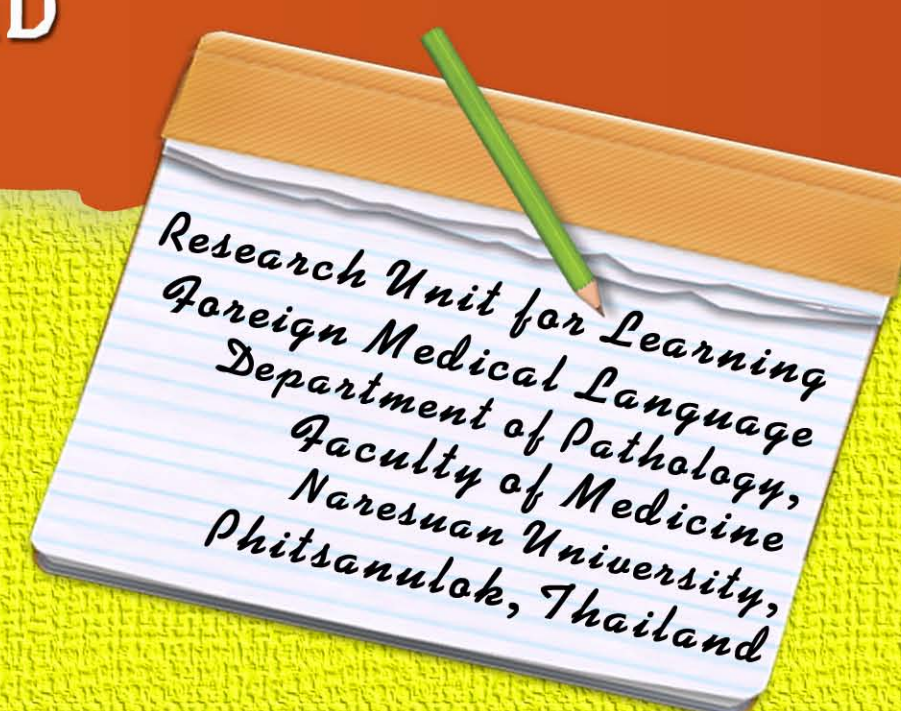




Perceived readiness and needs of Thai medical students in order to become an English proficient doctor.

Natapol Supanatsetakul MD, PhD



Background

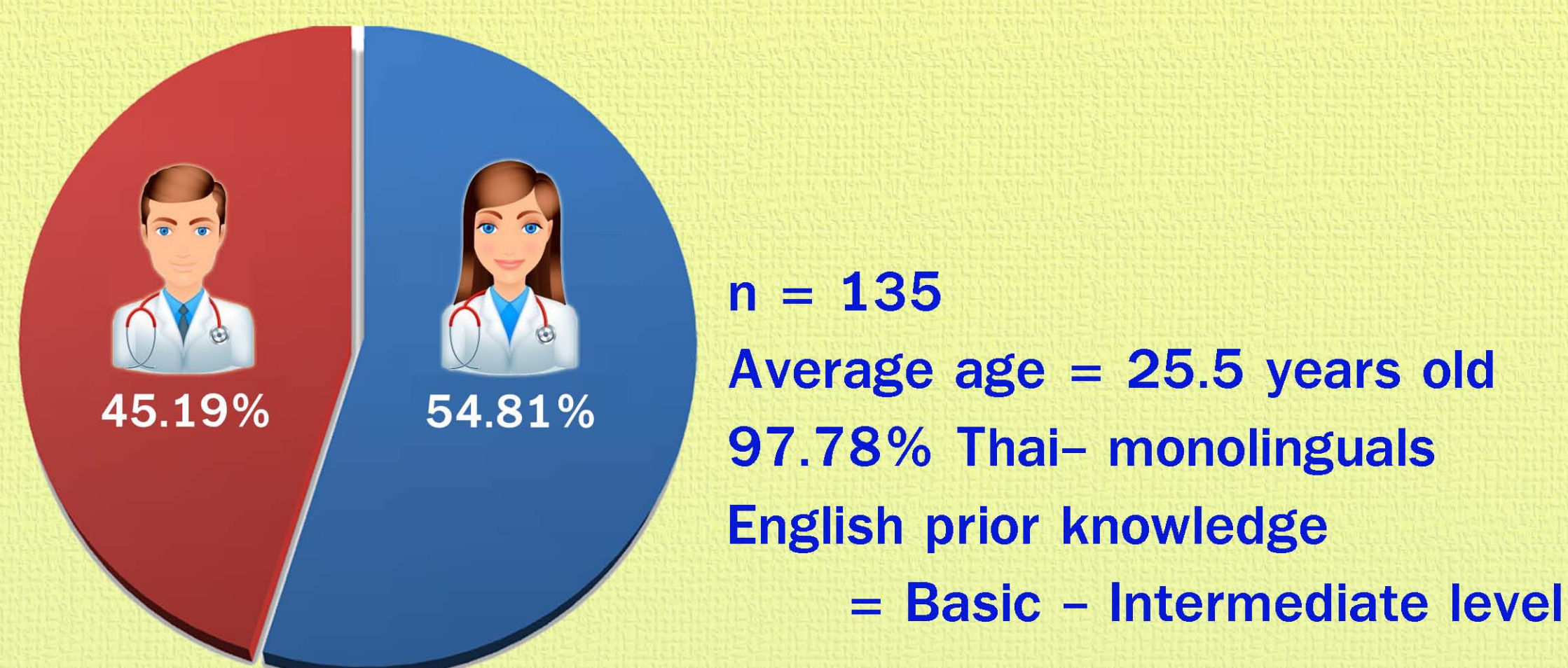
At present, Thai medical doctors are required to be proficient in English language, partly due to globalization. Perceived readiness and needs of medical students are necessary to be evaluated upon graduation in order to improve English competencies for their medical practice.

Summary of Work

The questionnaires were sent to 144 final-year medical students at Naresuan University, Phitsanulok, Thailand. General information, a Likert scale (1–5) for both self-evaluation of perceived readiness and individual needs to improve English language skills (listening–speaking–reading–writing) were analyzed.

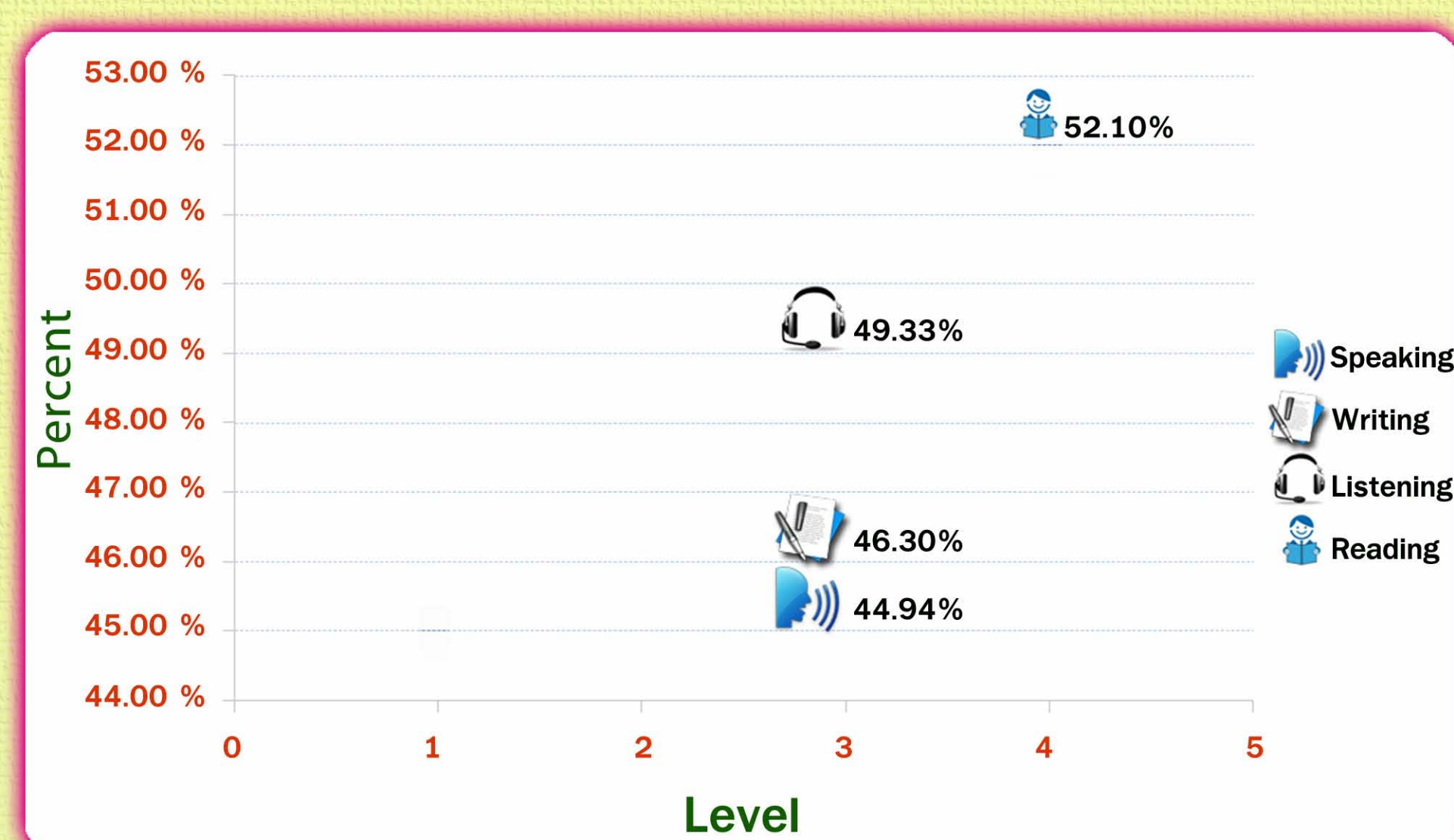
Summary of Result

Figure 1 General information of the responders



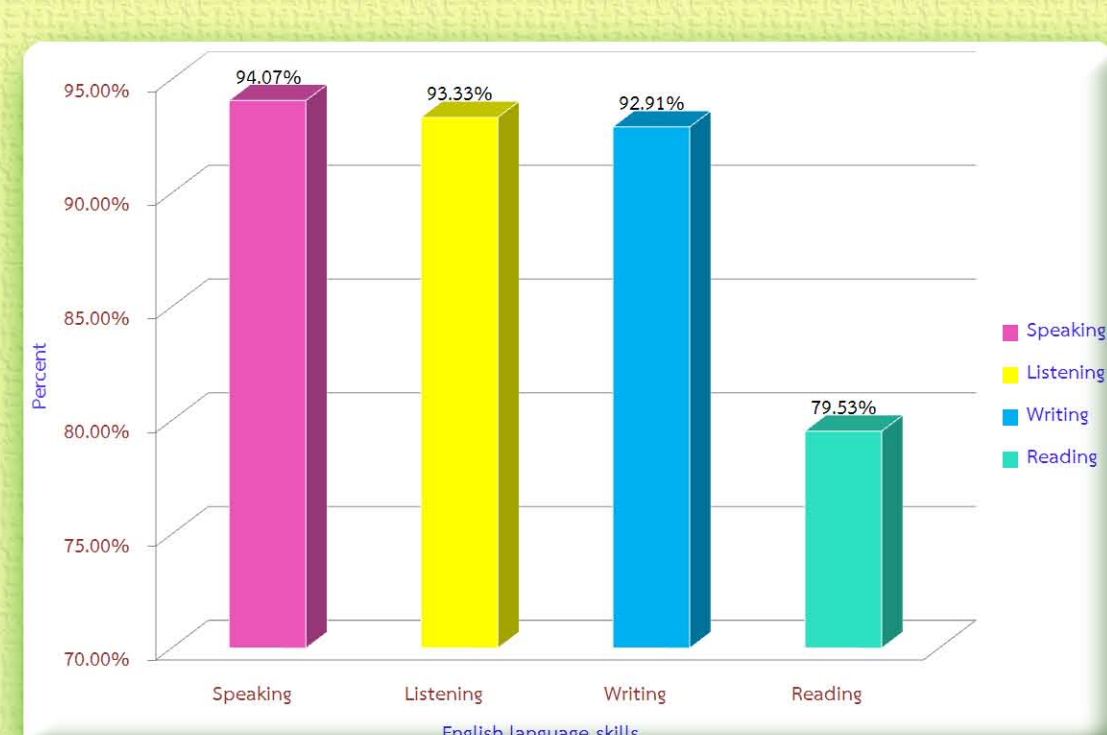
Of all completed questionnaires (n=135), there are 61 males (45.19%) and 74 females (54.81%) with the average age of 25.5 years old. Most of them are Thai-monolinguals (97.78%). And, 128 medical students have a prior knowledge of English at primarily basic to intermediate level.

Figure 2 Perceived readiness of the students in order to perform English language skills in their medical practice



Most of the students consider that listening (49.33%), writing (46.30%) and speaking (44.94%) skills can be performed at level 3. Reading skills can be performed better at level 4 (52.10%).

Figure 3 Needs of the students to improve English language skills



Training to improve speaking skills is utmost needed (94.07%), followed by listening (93.33%), writing (92.91%), and reading (79.53%) skills respectively.

Various topics needed to improve speaking skills are presented in the following table:

Table 1 Needs to improve speaking skills in various objectives

Needs to improve speaking skills	Average level*
1. To communicate in a special situation such as giving bad news, communicating with children, or communicating with the patient's relatives	4.01
2. To deliver a case presentation in a medical meeting	3.94
3. To give a lecture or an oral presentation in an international	3.94
4. To explain the medical diagnosis and to discuss the plan for	3.92
5. To speak during the procedure of patient interview and	3.82
6. To give instructions during the procedure of physical examination, laboratory investigation and medical intervention	3.81

*Remark : There are 5 scales which "5" is the most needed and "1" is needed the least

Conclusion

It is quite difficult, but possible, to prepare our non-native English medical students to become a proficient in English communication. Better performance in reading skills may result from a continuous practicing during the medical program. Inadequate training of speaking skills may cause student's discouragement for English communication. Needs for training of speaking and listening skills should be fulfilled during the medical program.

Take home message

For non-English medical program, more trainings to improve speaking and listening skills are urgently needed to strengthen our medical students.

Acknowledgment

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