THE ROLE OF THE PATIENT AND THE DOCTOR IN INCREASING THE EFFECTIVENESS OF TREATMENT FOR MYOCARDIAL INFARCTION

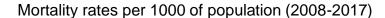


Written by Zavyrylina Polina student of 11 grade of classic city Lyceum,

Kemerovo, 10 October 2019

MORTALITY RATES



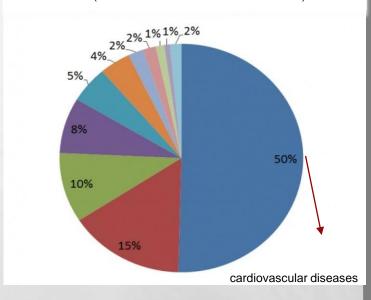




Working-age mortality per 100 of population (2008-2017)



Reasons of death of the population of the Russian Federation in 2014 (in shares of the total number of deaths)



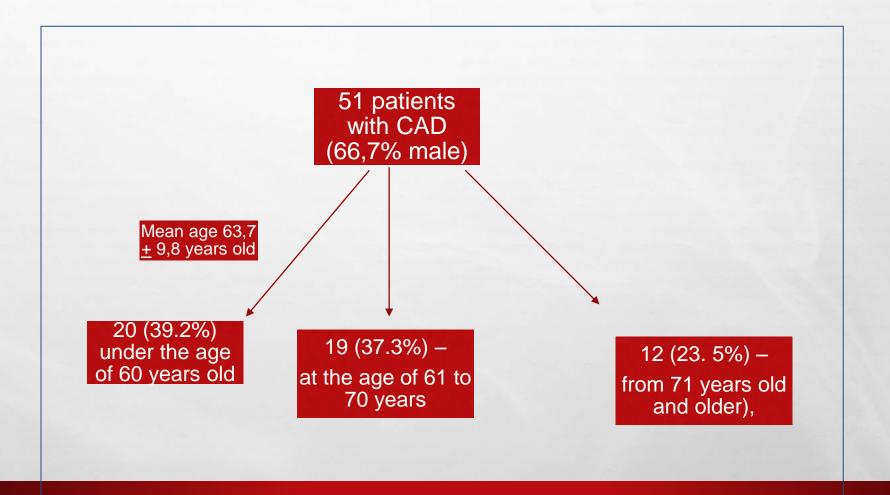
TIME - MYOCARDIUM



MAIN GOAL

 To identify factors associated with the patient and the doctor that impede the timely provision of assistance to patients with myocardial infarction.

MATERIALS AND METHODS



MATERIALS AND METHODS

THE QUESTIONNAIRE "CAUSES OF LATE AMBULANCE CALL":

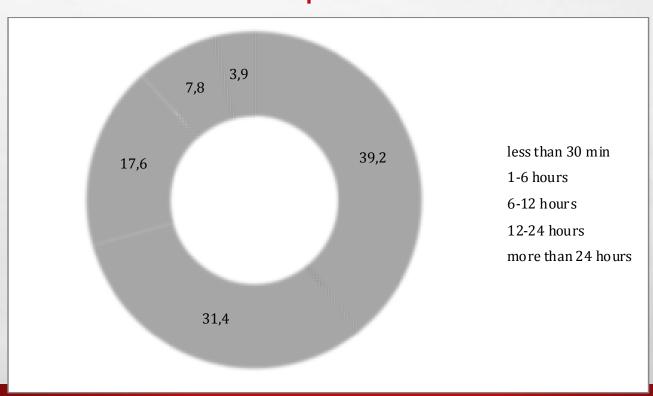
Terms of the emergency call and their determining factors

THE EUROPEAN QUESTIONNAIRE – "CARE PATIENT FEEDBACK MEASURE FOR"

- Patient's opinion on the communicative, social characteristics of the doctor as a factor that increases the patient's willingness to follow his recommendations

RESULTS

distribution of patients with myocardial infarction according to the time of seeking medical help from the onset of the development of the disease



CARE Patient Feedback Measure for

*** Type name of Practitioner here ***

Please write today's date here:

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Diagram rate the following	g statements about today	de concultation
rease rate the following	y statements about toua	y o consultation.

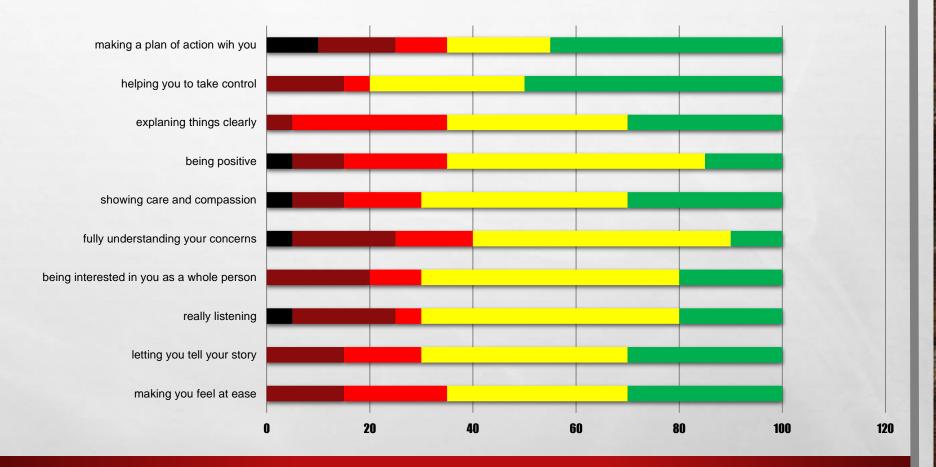
Please mark the box like this with a ball point pen. If you change your mind just cross out your old response and make your new choice. Please answer every statement.

Но	w good was the practitioner at	Poor	Fair	Good	Very Good	Excellent	Does not app
1)	Making you feel at ease (introducing him/herself, explaining his/her position, being friendly and warm towards you, treating you with respect; not cold or abrupt)						
2)	Letting you tell your "story" (giving you time to fully describe your condition in your own words; not interrupting, rushing or diverting you)						
3)	Really listening (paying close attention to what you were saying; not looking at the notes or computer as you were talking)						
4)	Being interested in you as a whole person (asking/knowing relevant details about your life, your situation; not treating you as "just a number")						
5)	Fully understanding your concerns (communicating that he/she had accurately understood your concerns and anxieties; not overlooking or dismissing anything)						
6)	Showing care and compassion (seeming genuinely concerned, connecting with you on a human level; not being indifferent or "detached")						
7)	Being positive (having a positive approach and a positive attitude; being honest but not negative about your problems)						
8)	Explaining things clearly (fully answering your questions; explaining clearly, giving you adequate information; not being vague)						
9)	Helping you to take control (exploring with you what you can do to improve you health yourself, encouraging rather than "lecturing" you)						
10) Making a plan of action with you (discussing the options, involving you in decisions as much as you want to be involved; not ignoring your views)						

© CARE SW Mercer, Scottish Executive 2004: The CARE Measure was orginially developed by Dr Stewart Mercer and colleagues as part of a Health Service Research Fellowship funded by the Chief Scientist Office of the Scottish Executive (2000-2003).

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RESULTS. Patient's assessment of the qualities of a physician's personal characteristics



SUMMARY

- To inform the population about the importance of both disease prevention measures and the correctness and timeliness of the first medical aid through information programs on radio, television, periodicals.
- To make training of future doctors as part of the educational program of the university, aimed specifically at deontology, especially communication and diplomacy.
- To use communicative personality traits as one of the criteria for choosing a profession

THANK YOU FOR YOUR ATTENTION!

