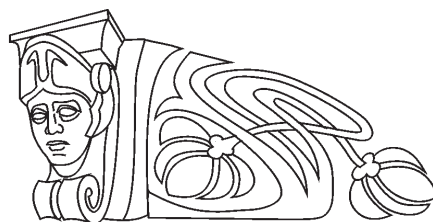




Article

## The means of expressing the category of politeness in medical discourse (On the material of the doctor and patient speech communication)



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**Abstract.** The article considers the communicative category of politeness and defines the role of this category in the process of professional doctor-patient communication. The category of politeness functions in the form of speech etiquette and is obligatory in doctor-patient conversations. The authors have analyzed the means of realization of speech etiquette and politeness in situations of professional medical communication, and determined those which are most frequently used in strategies of medical discourse. The hypothesis of the investigation is as follows: the efficiency of the dialogue created and planned by the doctor largely depends on following ethical norms of communication, which certainly is one of manifestations of politeness. The research is based on recorded materials of medical discourse in professional settings of healthcare institutions in the form of spontaneous conversations of doctors with patients. The authors prove that a polite behavior is manifested not only in the usage of speech etiquette patterns, but also in the means of expressing the doctor's attitude and his speech address. The usage of euphemisms is associated with the doctor's constant internal concern and care for the interlocutor, which is estimated as a manifestation of respect for the patient. Regarding the fact that speech taboos are socially conditioned, it is important to understand that the choice of an appropriate word depends not only on the level of the doctor's speech culture, but also on the patient's social and professional status, his or her religious beliefs, individual (personal) stability. Using other conversational elements (and extra-content components when initiating the conversation) in doctor-patient dialogues helps to create trusting relationships, the atmosphere of relaxed and unaffected communication, to ensure easy and natural speech. Speech etiquette and politeness contribute to achieving efficient professional communication. The most important role belongs to contact establishing means, the choice of which depends on the doctor's communicative habits and peculiarities of the situation of communication.

**Keywords:** the category of politeness, speech etiquette, etiquette patterns, medical discourse, professional communication, doctor-patient conversations, contact maintenance, the doctor's communicative habits, peculiarities of the situation of communication

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Научная статья  
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**Способы выражения категории вежливости в медицинском дискурсе  
(на материале речевого общения врача с пациентом)**

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**Аннотация.** В статье рассматривается коммуникативная категория вежливости, определяется роль этой категории в процессе профессиональной коммуникации врачей с пациентами. Категория вежливости выступает в форме речевого этикета и является обязательной в общении врача с пациентом. Авторы проанализировали способы реализации речевого этикета и категории вежливости в ситуациях профессионального медицинского взаимодействия и выявили наиболее частотные для стратегий медицинского дискурса. Гипотеза исследования: действенность созданного и спланированного врачом диалога во многом зависит от соблюдения этических норм общения,



что, безусловно, является одним из проявлений вежливости. Исследование проведено на материалах записей медицинского дискурса, осуществленного в условиях лечебных медицинских учреждений в форме спонтанных бесед врачей с пациентами. Авторы доказывают, что вежливое поведение проявляется не только в использовании формул речевого этикета, но и в способах выражения личного отношения врача и адресованности его речи. Употребление эвфемизмов свидетельствует о постоянной внутренней обеспокоенности врача, заботе о своем собеседнике, что расценивается как проявление уважения к пациенту. Учитывая социальную обусловленность речевых запретов, важно понимать, что выбор соответствующего слова зависит не только от уровня речевой культуры врача, но и от социальной и профессиональной принадлежности пациента, его религиозных установок, индивидуальной (личностной) адекватности. Использование других разговорных элементов (и внесодержательных компонентов в начале разговора) в диалогах врача с пациентом помогает создать доверительные отношения, атмосферу непринужденности и непосредственности общения, обеспечить простоту и естественность речи. Речевой этикет и вежливость способствуют достижению эффективности профессионального общения. Наиболее важную роль играют контактоустанавливающие средства, выбор которых зависит от коммуникативных привычек врача и от особенностей ситуации общения.

**Ключевые слова:** категория вежливости, речевого этикета, этикетные формулы, медицинский дискурс, профессиональная коммуникация, беседа врача с пациентом, поддержание контакта, речевые привычки врача, особенности ситуации общения

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Etiquette patterns are important elements of organization of the medical discourse [1]. In real communication the category of politeness is realized in the form of speech etiquette (in general sense) and is studied through speech etiquette [2]. According to the classification of communicative categories suggested by E. P. Zakharova [3], the category of politeness is not obligatory; however, in the “doctor – patient” communication this category acquires particular significance. Speech etiquette and politeness are the necessary elements of an efficient professional and psychological influence of the doctor on the patient. The doctor’s task is not only to establish the contact but also to maintain polite relations during the entire period of his communication with the patient [4]. The doctor constructs his dialogues with the patient, requests, advices, recommendations using various etiquette patterns which emphasize his respect to the patient: *будьте любезны, будьте добры, пожалуйста, я вас попрошу.*

A polite attitude of the doctor is manifested in his ability to hear out, to respond friendly (the diagnosing strategy), to persuade, to advise (the treating strategy), to demand the fulfillment of certain actions in a tactful and correct manner (the recommending strategy), i.e., to be good-natured and tactful with the patient.

Thus, the efficiency of the dialogue constructed and planned by the doctor greatly depends on obedience of ethic norms of communication, which, surely, is one of manifestations of politeness.

Though the category of politeness in the Russian language is not centered grammatically, the analysis of the studied materials demonstrates that various means and ways of expressing this communicative category are used in the “doctor – patient” dialogue.

The most vivid means of expressing politeness are lexical units of the language, the so-called “polite” words [5]. Investigation of the medical discourse has made it possible to reveal that the most frequently used lexeme is the word *пожалуйста*, which serves as an actualizer (an intensifier) of politeness:

Doctor (Dr): *Возьмите тетраточку/ и каждый день/ в одно и то же время/ три раза в течение дня/ измерьте давление// И пожалуйста/ записывайте все/ что Вы съедаете/ выпиваете//;*

Dr: *Вот так теперь// Еще пожалуйста/ глубже вдыхайте//;*

Dr: *Давайте посмотрю железу// Пододвиньтесь поближе пожалуйста//.*

The component *пожалуйста* in all revealed examples accompanies the imperative form of the verb and serves as the means of reducing categoricity of the statement since application of this lexical unit permits to transform a directive communicative act from an order into a request (modification of a demanding form into a respectful form) [6]. The component *будьте любезны*, which is the index of the doctor’s high speech culture, is used less frequently:

Dr: *Хорошо// Будьте любезны/ ко мне поближе/ я посмотрю Вас/ вот так//;*

Dr: *Теперь/ будьте любезны/ разденьтесь// А я пока посмотрю Ваши последние анализы//.*

The unit of politeness *спасибо* is considered a neutral and most common form of expressing gratitude. Examples of application of this lexeme in the studied materials are not frequent. The doctor usually does not need to thank the patient. Application of performative statements (*я благодарю*) is not characteristic for the “doctor – patient” communication either.

In some cases application of demonstrative words and interjections (*так, угу, ага*) in combina-



tion with non-verbal means (nodding of the head and an attentive glance at the patient) is, to our opinion, a neutral, situationally permissible form of expressing gratitude for correctly performed actions of the patient. In other cases application of demonstrative words and interjections is a form of manifesting attention, of a thoughtful attitude to the patient's replies. These lexemes, though not being the pattern of speech etiquette, actually express the communicative category of politeness.

One of the ways to manifest politeness is the choice of the means for realization of the treating and recommending strategies of the communicative genre of request which is often expressed with the help of the performative verb *попрошу* (*прошу*):

Dr: *Так/ хорошо/ теперь **попрошу** Вас закрыть глаза/ руки вперед/ и указательным пальцем дотронуться до кончика носа//;*

Dr: *Оденьтесь/ и я Вас **попрошу**/ лягте/ ровненько на спинку/ я посмотрю Ваш живот//;*

Dr: *Сначала я **попрошу** Вас раздеться/ посмотрим/ как Ваша кожа реагирует на тот образ жизни/ который Вы себе устроили//.*

A request is a polite motivation of the person to be addressed aimed for the benefit of the speaking person. In the situation of "doctor – patient" communication, the doctor's request contains an enumeration of actions to be performed by the patient immediately (*закрывать глаза, лечь, раздеться*) or independently after the doctor's consultation, either at home or in the ward of an in-patient department [7].

Addressing the patient with a request, the doctor may use various imperative constructions:

Dr: *Обязательно гуляйте/ хорошо бы два раза в день/ утром и вечером//;*

Dr: *Вам нужно будет дома измерить объем выпиваемой жидкости// Последить лучше 4–5 дней/ чтобы понять среднесуточный объем//.*

There have been registered the examples of tactful formulation of the request according to the models "Если... , то, пожалуйста, сделайте..."; "Будет очень хорошо, если...":

Dr: *Если Вы не почувствуете улучшений на фоне этого препарата/ **то, пожалуйста**/ позвоните// Подумаем/ как отрегулировать дозу//;*

Dr: *Будет очень хорошо/ если Вы последите за давлением/ и в то время/ когда Вы спокойны/ и во время нагрузки//.*

The central place in these models is occupied by a verb in the form of the imperative mood; however, the means of expressing the request lack the categoricity. Such structures emphasize that the doctor does not try to force the patient to do some actions but demonstrates a possible positive perspective while fulfilling the request. The

materials under study contain comparatively few examples of similar communicative maneuvers.

Beside the request, in the dialogue with the patient the doctor often applies the communicative genre of advice intensifying its directivity by means of the words *обязательно* and *непрерменно*:

Dr: ***Обязательно** натошак/ можно сразу/ как только откроете глаза/ не вставая с постели...//;*

Dr: *Вам **непрерменно** надо все записывать/ изо дня в день/ хорошо бы в одно и то же время//.*

As our examples demonstrate, such intensification does not reduce the degree of politeness but, on the contrary, strengthens the influence of the advice, makes it more efficient from the pragmatic viewpoint [8].

In the communicative genre of advice, the category of politeness is also realized through the form of subjunctive mood which in such cases just manifests the degree of politeness to the person addressed, and the particle *бы* is one of the most common means of expressing various nuances of politeness:

Dr: *Хотелось **бы** хорошо взглянуть...//;*

Dr: *Хотелось **бы**/ чтобы Вы вспомнили/ что предшествовало вот такому ухудшению//.*

In sentences of such a type "the component of desirability" is expressed by the modal verb *хотеть*, and the particle *бы* serves as the means of expressing a non-categorical indirect request or advice:

Dr: *Было **бы** хорошо повторно сдать анализы/ и посмотреть в динамике//;*

Dr: *Анализ крови тоже надо **бы** повторить//;*

Dr: *Я хотела **бы** увидеть те исследования/ которые у Вас есть//.*

The tactfully formulated advice to have the blood test made is accompanied by the explanation where and how it may be done:

Dr: *Лаборатория работает по графику/ Вы могли **бы** выбрать удобное для Вас время//.*

Another means of "softening" categoricity is parenthetical (introductory) constructions of hypothetical modality (*Я бы сказала; может; может быть*), direct questions with explanation of the essence of the statements (*Почему я об этом говорю?..; Потому что мы сейчас не должны...).*

A polite etiquette communicative behavior manifests itself not only in application of etiquette patterns but also in the ways of expressing the doctor's own "я" and addressing his speech. The speaker's manner to express his "я", the choice of linguistic means for realization of the communication may also give the evidence of the doctor's communicative culture. Application of the personal pronoun "я" has been registered in the following cases:



– when the doctor speaks about his intentions:

Dr: *Я напишу все подробно/ Вы сможете прочитать//;*

Dr: *Я напишу аналоги/ Вы посмотрите/ что выбрать//;*

– when the doctor explains his viewpoint:

Dr: *Я написала подробно все// Здесь нет ничего/ что могло бы вызывать беспокойство // Но питание и режим дня...// Я попрошу Вас соблюдать//;*

Dr: *Я посмотрела все Ваши результаты// Думаю/ нам этого пока достаточно/ через некоторое время я напишу Вам/ что нужно будет еще сделать/ чтобы я посмотрела динамику//.*

Speaking about his intentions the doctor uses the constructions with subjunctive mood, which makes *Вы*-statements especially tactful. This maneuver may be extremely necessary when the information delivered by the doctor is unencouraging for the patient. In such cases the doctor may use a compliment:

Dr: *Барышня Вы симпатичная/ во всем замечательная// Конечно я была бы рада сказать/ что изменения связаны только с естественной перестройкой организма/ но не сказать Вам/ про новообразование/ не могу//.*

The respectful attitude of the doctor to the patient is emphasized by application of syntactical constructions with indication on the person addressed. The addressing often contains the first and second names of the person:

Dr: *Я Вас хорошо помню/ Валентина Васильевна/ давайте посмотрю//;*

Dr: *Я напишу Вам/ Валентина Васильевна/ что нужно сделать//.*

There has been also registered the usage of one-component definite-personal sentences for expressing the speaker's "я":

Dr: *И еще попрошу/ полощите регулярно/ даже если Вам будет казаться/ что в этом нет необходимости//.*

Application of the pronoun "мы" ("мы-joint": the doctor and the patient) creates the effect of joint efforts aimed to achieve the desired results, the atmosphere of cooperation:

Dr: *И мы с Вами все отрегулируем/ подберем препарат//;*

Dr: *Делать выводы мы с Вами пока не будем/ давайте дождемся результатов анализов//.*

In the "doctor – patient" dialogue, application of this means emphasizes the commonality of the tasks to be solved ("мы-confederates"). "Мы-statements" make the patient a participant of the process of treatment.

"Мы-joint" in the meaning of "мы-doctors" has been registered in many cases. It "strengthens"

the patient's faith in correctness of the established diagnosis or of the chosen method of treatment. The investigated materials show that the pronoun "мы" may consist of "я" + "a certain, familiar doctor" and of "я" + "doctors in general":

Dr: *Мы сейчас с Натальей Георгиевной подумаем/ когда лучше запланировать операцию/ мы подготовим Вас/ и все будет наилучшим образом//;*

and

Dr: *Мы обязательно Вам поможем/ Вы же видите/ все наши специалисты/ все очень хорошие врачи/ с большим опытом//.*

"Мы-joint" in combination with the words-specifiers is a particularly efficient means for maintaining contact with the patient. Such patterns are most commonly used in the tactics of success.

The pronoun "мы" in the meaning of "мы-people in general" is used in the examples-stories which serve as the means of illustration of the basic moment, or are the means of argumentation:

Dr: *Мы ведь контролируем уровень сахара/ мы делаем это на постоянной основе/ регулярно//;*

Dr: *Мы двигаемся/ ходим/ работаем/ и наш организм быстрее перерабатывает все/ что мы наели...//.*

Emphasizing his closeness to the patient, the doctor unites himself with the patient by some indicator:

Dr: *Мы с Вами знаем/ как важно заботиться о своем сексуальном здоровье//;*

Dr: *Ну что Вы/ нас просто так не возьмешь//.*

Together with non-verbal means of communication (usually an attentive long glance into the patient's eyes), such a tactics gives positive results.

The category of politeness in the "doctor – patient" conversations is manifested in all types of questions put by the doctor in the process of realization of different tactics. Etiquette patterns have been fixed in etiquette questions:

Dr: *Скажите, пожалуйста/ как Вас зовут?//;* and in proper questions:

Dr: *А скажите мне, пожалуйста/ вот эти пятна/ давно появились?//*

Quite a common means of establishing contact with the patient is a direct question initiated by the imperative "Скажите...". Simultaneous application of two contact-establishing means – *скажите* and *да* in one reply-question – has also been registered:

Dr: *Скажите/ у Вас регулярные вот такие ощущения/ да?//*

Besides, the word-sentence *да* also expresses the degree of the doctor's assurance (in this particular case, in the fact that a persistent discomfort of the patient is not associated with taking meals).





It should be noted that the usage of etiquette patterns may sometimes be caused by the doctor's desire to have some time to think over and formulate a new question, i.e., etiquette patterns in such a construction may play the role of a peculiar filling of a possible pause. (Compare, for example, the usage of hesitatives in the similar situation).

The amount of interrogative statements containing etiquette patterns is different in the studied materials, and it is associated with the individual characteristics of the doctor's communicative and behavioral portrait.

The doctor's permanent sincere anxiety and concern for the person to talk with are manifested by the usage of euphemisms. Their presence in speech is regarded as manifestation of respect toward the patient. Using the euphemisms the speaker tries to make his speech "kind", "decorous", "favorable", "happily sounding". The basic purpose of the speaker's usage of euphemisms is his "desire to avoid communicative conflicts and failures, the urge not to create the sense of communicative discomfort in the person to talk with" [9, p. 106].

"Euphemisms are emotionally neutral words or expressions used instead of synonymous words and expressions which seem indecent, rude or tactless to the speaker..." [10, p. 590]. The effect of applying euphemisms originally lies in the term: "euphemism – from Greek *eu* – well (*хорошо*) and *phemi* – I am speaking (*говорю*)".

The discussion of delicate, intimate problems is a characteristic feature of conversations of some medical specialists with patients. For instance, gynecologists converse with their patients deliberately using the words in their direct meaning and do not try to "muffle" frankly sounding words. It may be explained by the doctor's desire to show the patients that such a discussion (which is a taboo in modern society) is absolutely natural, so they should not be embarrassed to frankly speak out the truth [11]. And on the contrary, when talking with their patients, endocrinologists use euphemisms, scientific terms and neutral words instead of the "banned" notions regarded as "indecent". Besides, the doctor may initiate a delicate conversation by using whole constructions preparing the patient for discussing the problem:

Dr: *Так// Скажите, пожалуйста// Ну/ эта тема/ такая деликатная// Но все равно/ я вынуждена об этом спрашивать// Скажите/ во сколько лет Вы начали жить половой жизнью?//*

As it can be seen, the doctor's reply begins with the demonstrative pronoun *так* which serves as a signal for initiation of a new part of the dialogue. Then, after a pause which is certainly an important element of the general communicative conception, the doctor notifies the patient that the problem of

discussion is delicate. The effect is intensified due to the usage of the definite pronoun *такая*, framed by "knowing" pauses. The opposite conjunction in the word combination *но все равно*, the performative *вынуждена спрашивать* and the demonstrative pronoun *об этом* (in this particular case the pronoun also performs the function of the euphemism) "complete" the psychological preparation of the patient for correct perception of the question.

Since the awareness of people about decent and indecent things may not coincide in different social groups, i.e., communicative taboos are socially conditioned, the choice of the appropriate word depends not only upon the doctor's level of speech culture but also upon the patient's social and professional characteristics, his religious precept and his individual (personal) adequacy.

Thus, application of euphemisms is dictated by the doctor's desire to "soften" categoricity of the statement; and this makes it possible "to smooth over sharp corners" and sometimes even "to veil" the essence of the spoken out phenomenon or fact:

Dr: *Скажите/ а у Вас всегда такие/ влажные/ мокренькие ладони?//*

The moist surface of the patient's palms attracts the doctor's watchful attention. In order not to provoke the patient's untimely and, probably, groundless uneasiness the doctor appropriately uses the euphemism thus avoiding an outspoken description of the patient's appearance. The awareness of the patient's age peculiarities necessitates the doctor to be especially tactful.

The success of communication between the doctor and the patient is achieved by application of the tactics of approach. For this purpose the doctor uses the lexemes of the colloquial style. This tactics makes the doctor's speech more alive, natural and emotional, demonstrates his closeness to the patient. The doctor actively uses colloquial particles, probably due to their polyfunctionality [12]. In our materials the particle *вот* is used most frequently and performs the following functions:

– it indicates the components of the text (*Вот сколько я Вам написала*);

– it makes the meanings of pronouns and pronominal adverbs more concrete and definite (*Вот так мы и поступим*);

– it indicates the closeness to the place and time of communication, making the words with spatial-temporal meanings more concrete (*Вот в нашу предыдущую встречу/ Вы...; Вот неделю назад/ Вы сдали анализы на гормоны щитовидной железы*);

– it introduces the examples into the text, often together with the particle *ну* (*Ну вот, например/ Ваша усталость*);



– it is used for explanation, detalization of the general idea of the phrase (*Вот Вы начала пить... [лекарство]/ и что на этом фоне...*).

These examples demonstrate that the use of the particle *вот* contributes to making the conversation more concrete and understandable, “connects” the doctor’s speech with the communicative situation.

The particle *ну* also performs the text-forming functions:

– it introduces the examples into the text (*Ну например...*);

– it indicates the beginning of the new part of the text (*Ну/ скажите/ давно такие проявления?*);

– it serves as the means of fixation of a new question in a series of interrogative statements (*Ну а еще чем Вы лечились?*).

Besides, the particle *ну* contributes to intensification of emotional-expressive coloration of speech. In our materials, for instance, the interrogative constructions with the particle *ну*, in which the particle emphasizes the doctor’s particular interest, are expressively colored (*Ну почему Вы так считаете?*).

The communicative word *угу* is also quite representative in our materials. When used in the beginning of the reply, it performs a number of functions which serve to maintain the contact with the patient:

– it demonstrates to the patient that the doctor is interested in the conversation (This is often accompanied by the nodding of the head), i.e., it performs the etiquette function;

– it is used to fix the beginning of a new topic of the conversation by separating one idea from another;

– it returns the conversation into the previous channel.

The particle *да* has been registered in the sentences with an obviously understandable content (*Да потому что без этого препарата...*).

The usage of other colloquial elements also helps to create the atmosphere of natural and relaxed communication, to provide a simply understood and natural conversation:

Patient (P.): *Мне давали такие катышки/ крупинки какие-то//*

Dr.: *Так/ какие катышки?//* (вопросительно смотрит на пациента; не дождавшись ответа, продолжает) *Врачи всегда при общении обязательно объясняют/ что назначают/ во всех деталях / как лучше принимать// Так/ чтобы вы поняли// на понятном языке/ без терминов непонятных//* (вопросительно смотрит) ... *Может быть/ звучало слово «дистиреоз»//*

P.: *Термины не запомнила...//*

Dr.: *Расстройство функции щитовидной железы/ может быть?//*

In this dialogue we can trace a skillful combination of the scientific style and colloquial speech.

Trying to obtain the necessary information from the patient the doctor uses the synonymous substitution of the borrowed medical term (*дистиреоз – расстройство функции щитовидной железы*) [13].

The scientists who investigate the problem of effective communication have determined the rules of communicative behavior for those who are speaking and for those who are listening to the speaker. These rules are directly concerned with polite communication. The most important rules for each doctor to obey in the process of communication with patients are as follows:

– not to inflict a damage to the addressee by the speech (offence, affront, neglect). The basic rule for doctors is not to harm! (*Non nocere!*);

– to demonstrate respect to the addressee, to be polite;

– not to impose his own viewpoint and, if necessary, to try to convince the patient tactfully by using arguments;

– to remember that the threshold of concentration of attention and perception of speech is limited. In order to reconcentrate attention it is advisable to use the means of authorization and addressing of the text;

– to use optimal means of expressing thoughts, feelings, evaluations regarding the capabilities of perception;

– to remember that in oral and direct communication the patient perceives the information not only through hearing but also through vision; that is why the doctor should skillfully and appropriately use his mimics, pose, expression of the eyes, intonation and other means of non-verbal communication.

Regarding the fact that the medical discourse is realized through the dialogue (the doctor and the patient constantly change the roles of “the speaker” and “the listener”), each doctor should also obey the rules assigned for the listener which are aimed to contribute to polite communication in the situation of professional-business settings [14]. These rules are as follows:

– to give preference to listening to the patient alongside with all other types of activities, i.e., to listen to the patient obligatorily and attentively;

– to be attentive, watchful, kind-hearted and patient with sick people;

– to confirm constantly the contact of attention and understanding with the help of interjective statements, gestures and mimics (nodding of the head, an appropriate smile, agreements, support);

– to enter skillfully into the communicative interrelations, to utter timely replies, thus organizing the dialogue with the patient.

“The Code of Speech Behavior” of the doctor is (and will be) in correspondence with these rules



which, in fact, may be used as recommendations. The above described functions of the speech etiquette are, certainly, connected with the rules of politeness.

In the process of real communication, in order not to destroy the created friendly atmosphere and to avoid communicative failures, the doctor has to prevent the patient's negative reaction to some situation or problem [15]. In such a case the doctor explicates the supposed position, possible comments, evaluations, objections and questions of the patient and gives answers.

As it is known, the act of communication is considered efficient in case it reaches the assigned purpose, i.e., successful transmission of information, its correct perception, motivation for performing certain actions. Aimed at the patient's adequate perceiving of information delivered by the doctor, and performing the required actions, the doctor is obliged "to conform" his speech to the patient's interests and communicative capabilities. The efficiency of communication also depends on the doctor's ability to determine the patient's personal characteristics and, accordingly, to organize his own replies, which would contain certain information (complete, partial, selective) and express his opinion, judgment, evaluation in the form optimal for the given circumstances. Parenthetic words of various semantics help the doctor to state his thoughts in the necessary perspective (*увь, правда, впрочем, конечно, может быть*):

Dr.: *Эта избыточная масса/ конечно/ могла сыграть какую-то роль/ конечно могла// Но все-таки это комплекс всяких проблем// Может быть/ с этого все началось/ Трудно сейчас сказать//.*

Different particles and modal words make the statement more concrete, emphasize the most important moments (*Именно это я посоветую Вам сделать; И что самое главное Вы сделаете...*).

Insertions, or the inserted parts, do not impede the efficiency of communication, but even contribute to it to a certain extent, making the speech content closer and better understood; and the patient feels that his conversation with the doctor is natural and relaxed.

Numerous repetitions, sometimes with transformation, make the perception of the necessary information easier for the patient.

Thus, speech etiquette and politeness help to achieve the efficiency of professional communication. The most significant role belongs to contact-establishing means which are aimed to establish a favorable contact with the patient, to be sympathetic with him and to maintain the desired tone of communication. Also, quite effective contact-establishing means to create trusting relations in the "doctor-pa-

tient" dialogue are extra-content components which are aptly "entwined" into the structure of the initial part of the conversation.

For creating harmonious relations in the process of communication, the doctor is obliged to take into consideration all possible characteristics and individual peculiarities of the patient's personality. Equally with the verbal means of communication, doctors actively use non-verbal means in order to establish friendly relations with their patients.

In professional communication the category of politeness is of particular importance since it performs the contact-maintenance function. The means of maintaining the contact may be different; their choice depends upon the doctor's personal communicative habits and peculiarities of the communicative situation.

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