

## DRAFT EMPATHY CODING SCHEMA\*

### PATIENT CODES

**Empathic Opportunity (EO)**

**Potential Empathic Opportunity (PEO)**

### PHYSICIAN CODES

**Empathic Initiation (EI)**

**Empathic Response (ER)**

**Empathic Opportunity Continuer (EOC)**

**Empathic Opportunity Terminator (EOT)**

**Potential Empathic Opportunity  
Continuer (PEOC)**

**Potential Empathic Opportunity  
Terminator (PEOT)**

### DEFINITIONS:

#### **Empathic Initiation:**

Physician initiates empathic statement or inquiry in absence of any cue (EO or PEO from patient)

**Examples:** Tell me (your story); This has been a pretty tough time; What's been going on? How have you been feeling?

#### **Empathic Opportunity:**

Disclosure of feeling: I'm feeling pretty discouraged

Expression of point of view: the way I see it...

#### **Empathic Response:**

Reflection/paraphrasing of feeling: It sounds like it's been really bad

Statement of acceptance of person: You know, Mr. Jones, no matter how much trouble you have losing weight, I still think you're a great guy

Normalizing statement: A lot of people feel the same way

Self-disclosure: I've struggled with losing weight myself

"Tell me (your story)"

Summarizing statements: From everything you've told me, it sounds like these are your main concerns today...

#### **Empathic Opportunity Continuer:**

Clarification: Are you saying you feel depressed?

Reflection of point of view: So the way you see things is that...

Any statement that leads to an additional EO on patient's part

#### **Empathic Opportunity Terminator:**

Statement that ignores/cuts off patient's empathic opportunity

Any statement that is not an empathic response

**Potential Empathic Opportunity:**

Reference to difficult situation (death, finances, sex, divorce, chronic illness, trauma, stress) without explicit emotional disclosure

Difference of opinion with doctor: I don't understand why I have to take these pills

Statement of noncompliance: I just can't stick with my diet

Statement of pt. self-diagnosis: I think the problem's not my heart, it's my digestion

Statement of pt. agenda: These are the problems I'd like us to talk about

**Potential Empathic Opportunity Continuer:** (usually question)

**Examples:** Tell me more about what's been going on; How does all this make you feel? What's this been like for you?

Reflection/paraphrasing of factual statement: It sounds like it's been really bad

Clarification: Has this been getting you down?

Discussing pt. self-diagnosis: Tell me why you think the problem is your liver.

Discussing pt. agenda: You'd like us to talk about your diet today?

Discussing noncompliance: So the diet isn't going very well?

Discussing difference of opinion: I guess we don't really see eye to eye on this

**Potential Empathic Opportunity Terminator:**

Statement that ignores/cuts off patient's empathic opportunity

Any statement that is not an empathic response

**Patient Data**

Gender

Ethnicity

Problem

Interpreter

Length of interview (minutes)

**Resident Data**

Gender

Ethnicity

Date of interview

\* Based on Suchman, Markakis, Beckman, & Frankel, 1997.

## DATA ANALYSIS – EMPATHY PATHWAYS STUDY

Two data sets: 1) Regular 2) OSCE

**Vertical Axis: Identify each tape by number**

**Horizontal Axis:**

**Demographic variables:**

Patient

- ✓ Gender: M (1)/ F (2)
- ✓ Ethnicity: H(Hispanic) 1; NHW (nonHispanic white) 2; AA (African American) 3; VN (Vietnamese) 4; OA (other Asian) 5; O (other) 6
- ✓ Problem/Diagnosis: coding from diff/typ patient study? (2 col)  
OSCE: Depression 1; Anger 2; Domestic violence 3; Chest pain 4; Knee 5; Birth control 6; Geriatric 7; Seductive 8
- ✓ Interpreter: Y (1)/N (2) (not on OSCE)
- Length of interview: in minutes (2 col)

Resident

- ✓ Gender: M (1)/F (2)
- Name: Code by number (2 col)
- ✓ Ethnicity: same as above
- Year: month and year (4 col)
- Year of training: extrapolate? (leave 1 col blank) (not on OSCE)

EACH SENTENCE FRAGMENT WILL BE CODED: PT 1 DR 1 PT 2 DR 2 PT 3 DR 3 etc.

**Study variables**

Patient

**EIT** – empathic initiation terminator  
**EO** – empathic opportunity

**PEO** – potential empathic opportunity

- pt agenda
- difficult situation
- noncompliance
- self-diagnosis
- difference of opinion

**PEOCT** – potential empathic opportunity continuer terminator

Physician

**EI** – empathic initiation  
**ER** – empathic response  
**EOC** – empathic opportunity continuer  
**EOT** – empathic opportunity terminator

**PEOR** – potential empathic opportunity response

**PEOC** – potential empathic opportunity continuer

**PEOT** – potential empathic opportunity terminator

## **RESEARCH QUESTIONS:**

- 1) What is the relationship of patient demographic variables to
  - a) patient codes
  - b) physician codes
  
- 2) What is the relationship of physician demographic variables to
  - a) patient codes
  - b) physician codes
  
- 3) What is the relationship between patient codes and physician codes?
  - a) physician initiation:
    - 1) Is **EI** followed more frequently by terminating (**EIT**) or by continuing codes (**EO, PEO**)
    - 2) Are **EOC** and **PEOC** followed more frequently by terminating (**EOCT, PEOCT**) or by continuing codes (**EO, PEO**)?
  - b) patient initiation:
    - 1) Is **EO** followed more frequently by terminating codes (**EOT**) or by continuing codes (**ER, EOC**)?
    - 2) Is **PEO** followed more frequently by terminating codes (**PEOT**) or by continuing codes (**PEOR, PEOC**)?
  - c) Are **EO** codes correlated with **ER, EOC, or OET** codes?
  - d) Are **PEO** codes correlated with **PEOR, PEOC, or PEOT** codes?
  - e) Are **EI** codes correlated with **EO, PEO, or EIT** codes?