

# Upgrade Your Communication Skills

Sarah Jacobs, B.S., R.T.(R)(M)(CT)  
Senior Breast Imaging Consultant, Mammography Educators



MAMMOGRAPHY  
EDUCATORS

© 2025 Mammography Educators

1

## Patient Interaction

While women across the globe have many **differences**  
{language, culture, environment}...

Our **similarities** are **undeniable**.



MAMMOGRAPHY  
EDUCATORS

2

## Objectives

- Identify common communication problems with patients across all backgrounds
- Describe how improving communication can reduce errors and facilitate patient follow through
- Establish skills for improving patient communication through awareness of cultural sensitivity
- Gain an understanding of essential communication T.I.P.s



MAMMOGRAPHY  
EDUCATORS

3

## Is Poor Communication *Really* that Big of a Problem???

- May 2018 reviewed 23,000 medical malpractice suits from 2009-2013, finding 30% of the cases were a DIRECT result of miscommunication or lack of communication
- \$1.7 BILLION was awarded in malpractice-related losses



MAMMOGRAPHY  
EDUCATORS

Source: "Healthcare's Communication Problem" by Matthews, Kayla

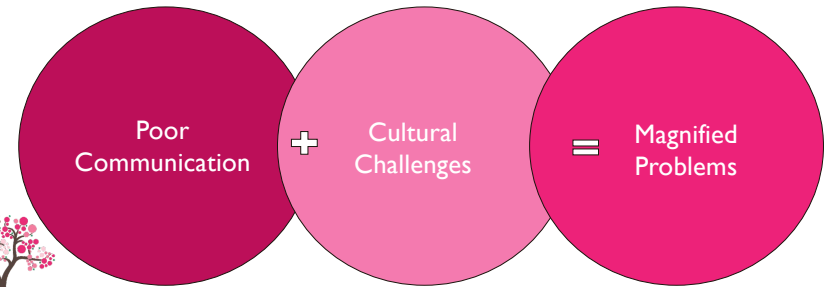
4

## Poor Communication = Dissatisfied Patients



5

## Communication Problems and Cultural Challenges



6

## Cultural Challenges

- Language barriers
- Literacy barriers
- Cultural sensitivities:
  - Personal space
  - Customs
  - Beliefs/religion
  - Patient perceptions



7

**“The biggest communication problem is we do not listen to understand; we listen to reply.”**

*-Stephen R. Covey*



8

## Communication Problems

- **Defensiveness**
- Interrupting
- Lack of Empathy
- Lack of Understanding



MAMMOGRAPHY  
EDUCATORS

9

## Defensiveness

Defensiveness is an adjective and a verb

- "I didn't know I wasn't supposed to wear deodorant?!"
- "Why are you asking me all of these questions? You should see all of this in my chart!"



MAMMOGRAPHY  
EDUCATORS

10



## Signs of Defensiveness in Patient Behavior

- Emotional state/behavior
- Body language
- Sensory response
- Tone of voice/vocal style



MAMMOGRAPHY  
EDUCATORS

11

## Emotional State/Behavior

- Being erratic, agitated or worried
- Not smiling or losing any sense of humor
- Being overly obsessive
- Feeling resigned/listless



MAMMOGRAPHY  
EDUCATORS

12

## Body Language

- Overly energetic body movements (eyebrow arching/overuse of hands)
- Averting the eyes/looking down constantly
- Rolling the eyes/head shaking/gritting teeth
- Distracted or unfocused



13

## Sensory Response

- Nausea
- Hyperventilating
- Tachycardia
- Myalgia
- Diaphoresis
- Anxiety



14

## Tone of Voice/Vocal Style

- Speaking loudly or sudden raised voice
- Speaking very softly
- Mumbling or missing words in sentences
- Inappropriate laughter/giggling or fixed grin
- Monotone or delayed response



15

## Communication Problems

- Defensiveness
- **Interrupting**
- Lack of Empathy
- Lack of Understanding



16

## Interrupting

*In the Healthcare setting, where does interruption happen the most?*



MAMMOGRAPHY  
EDUCATORS

Source: National Library of Medicine

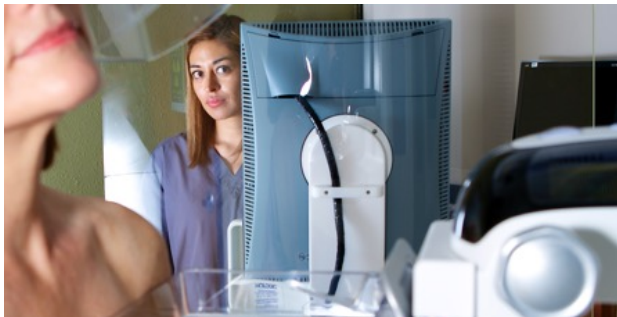
17



MAMMOGRAPHY  
EDUCATORS

18

## Listening vs. Talking



MAMMOGRAPHY  
EDUCATORS

19

## Interrupting

### End Result....

- Your connection with the patient suffers.
- You'll both feel a great sense of disconnect toward each other, perhaps even resentment.

*Make a choice: Determine if their behavior (or yours) is intentional*



MAMMOGRAPHY  
EDUCATORS

20

## Interrupting

Ask yourself: "Did they mean to offend?"



MAMMOGRAPHY  
EDUCATORS

21

## Communication Problems

- Defensiveness
- Interrupting
- **Lack of Empathy**
- Lack of Understanding



MAMMOGRAPHY  
EDUCATORS

22

## Lack of Empathy

Disconnect of reading between the lines.



MAMMOGRAPHY  
EDUCATORS

23

## Empathy: the Human Connection



MAMMOGRAPHY  
EDUCATORS

Video Courtesy of Cleveland Clinic  
[https://www.youtube.com/watch?v=DDWv1\\_du8](https://www.youtube.com/watch?v=DDWv1_du8)

24

## Lack of Empathy

Unsolicited probing of a sensitive topic or conversely, not inquiring or offering emotional support when someone *wants* to share something sensitive really inhibits a good relationship with our patients.

*What women need the most is empathy.*



MAMMOGRAPHY  
EDUCATORS

25

## Empathy

Attention to **BOTH** physical and emotional comfort:

- Keep the patient in their gown as long as possible
- Address the patient respectfully by their last name
- Respect the patient's physical space
- Offer a kind and professional demeanor



MAMMOGRAPHY  
EDUCATORS

26

## Communication Problems

Defensiveness  
Interrupting  
Lack of Empathy  
**Lack of Understanding**



MAMMOGRAPHY  
EDUCATORS

27

## Lack of Understanding

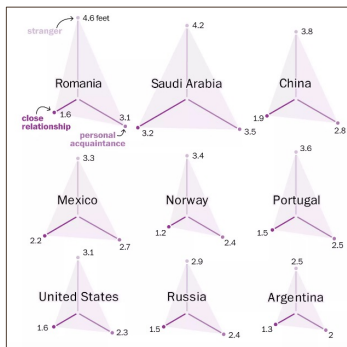
*The breakdown in communication and lack of understanding lies with **us**... not our patients.*



MAMMOGRAPHY  
EDUCATORS

28

## What Does “Too Close” Look Like?



Source: Journal of Cross-Cultural Psychology

## Understanding Your Patient’s Perceptions

- Asian American women underwent a screening mammogram, that detected an asymmetry that needed additional follow-up.
  - When told of the findings, the women became upset.
  - She truly believed that she did NOT have breast cancer before the screening mammogram, and that she now had breast cancer as a result of the exam.
- Muslim-American women have less routine mammograms than the female U.S. population
- Belief: a person’s health is out of her own control, and determined by their faith

29

30

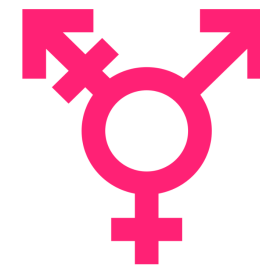
## Breast Cancer Does Not Discriminate

It affects individuals, families and communities.



## Lack of Understanding/Patient Populations

Transgender



31

32

## Transgender Patient Population Barriers

- Transphobia and discrimination
- Limited healthcare provider knowledge about issues affecting trans people (such as gender dysphoria)
- Lack of trans-specific resources
- Concerns about physical and emotional safety



MAMMOGRAPHY  
EDUCATORS

33

## Proper Terminology

- Chest or Breast
- His or Her
- He or She
- Him or Her
- They, Them pronouns



MAMMOGRAPHY  
EDUCATORS

34

## What If Your Patient Corrects You?



**Table 3.** What to Do if You Make a Mistake

<b>Be Calm</b>	Mistakes happen. Try not to be embarrassed or get defensive.
<b>Be Thankful</b>	Thank the person who corrected you.
<b>Apologize</b>	Say a quick "I'm sorry" and move on. There is no need to dwell on it.
<b>Do Better</b>	Commit to doing better. Say it and mean it.



MAMMOGRAPHY  
EDUCATORS

35

## ACR Appropriateness Criteria: Transgender Breast Cancer Screening

**Variant 1:** Breast cancer screening. Transfeminine (male-to-female) patient, 40 years of age or older with past or current hormone use equal to or greater than 5 years. Average-risk patient.

Procedure	Appropriateness Category	Relative Radiation Level
Digital breast tomosynthesis screening	May Be Appropriate	☼☼
Mammography screening	May Be Appropriate	☼☼
US breast	Usually Not Appropriate	○
MRI breast without and with IV contrast	Usually Not Appropriate	○
MRI breast without IV contrast	Usually Not Appropriate	○



MAMMOGRAPHY  
EDUCATORS

36

## Lack of **Patient** Understanding

- Inconsistent or no follow-up
- Delay in care
- Medication errors
- Incomplete or incorrect patient preparation
- Anger, frustration, and/or defensiveness
- Poor outcomes



MAMMOGRAPHY  
EDUCATORS

37

## Lack of **Professional** Understanding


- Inadequate informed consent
- Unsympathetic response to patients concerns, where we're quick to dismiss or underestimate the concern
- Inadequate education materials and medium for sharing information
- Incomplete follow-up instructions



MAMMOGRAPHY  
EDUCATORS

38

## Effects of Communication Problems

- Defensiveness
  - Interruption
  - Lack of empathy
  - Lack of understanding
- 
- Medical errors
  - Longer wait times
  - Workplace conflict
  - Poor decision making
  - Unnecessary stress



MAMMOGRAPHY  
EDUCATORS

39

## Communication Problems



*Dissatisfied patients AND families*



MAMMOGRAPHY  
EDUCATORS

40

## Communication Problems

Consider the source:

- **Unconscious biases/unawareness**
- Anxiety
- Cultural competence



MAMMOGRAPHY  
EDUCATORS

41

## Unconscious Bias

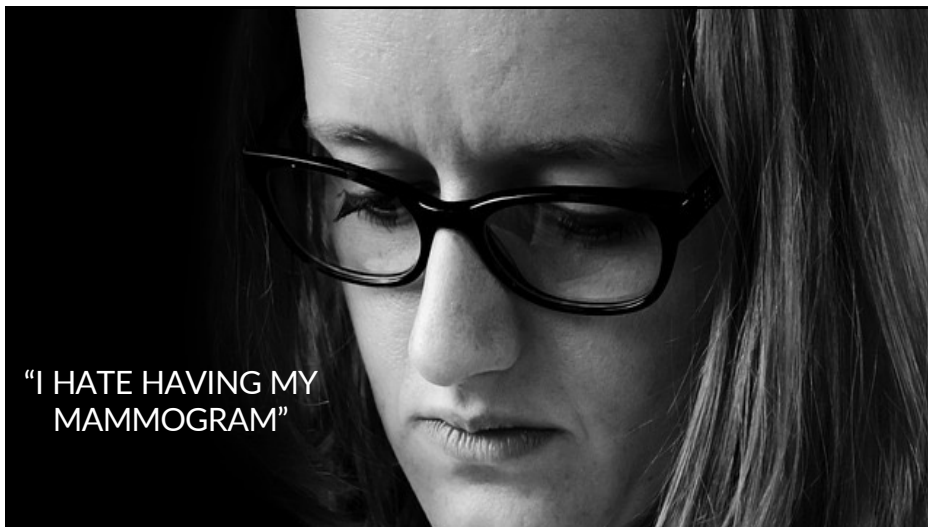
Unconscious bias is having a social stereotype about a certain groups of individuals that we form outside our own conscious awareness. Everyone holds **unconscious** beliefs about various social and identity groups and these **biases** stem from one's tendency to organize social worlds by categorizing.



MAMMOGRAPHY  
EDUCATORS

Source: <https://www.qualityinteractions.com/blog/unconscious-bias-in-healthcare>

42



"I HATE HAVING MY  
MAMMOGRAM"

43

## Forms of Unconscious Bias

- Confirmation bias – looking for ways to make an initial judgement come true
- Effective heuristic – judgement based on superficial factors like a person's weight



MAMMOGRAPHY  
EDUCATORS

44

## Forms of Unconscious Bias

- Expectation anchor – adjusting expectations based off of an initial (and favored) candidate (the anchor)
- Gender bias – judging a person’s capabilities on their gender
- Intuition – “gut” feeling



MAMMOGRAPHY  
EDUCATORS

45

## Unconscious Bias

To avoid allowing these unconscious biases to negatively impact our patient care... We must first **recognize** them.

**AWARENESS IS KEY**



MAMMOGRAPHY  
EDUCATORS

46

## Be Aware of Your Unconscious Biases

- Be authentic
- Notice tone
- Use non-judgmental language
- Explain reasons for asking personal questions
- Check for understanding
- LISTEN for and LEARN a new understanding



MAMMOGRAPHY  
EDUCATORS

47

## Communication Problems

Consider the source:

- Unconscious biases/unawareness
- **Anxiety**
- Cultural competence



MAMMOGRAPHY  
EDUCATORS

48

## Anxiety... Fear of the Unknown



49

## Sources of Anxiety

- Past experiences
- Word of mouth
- Incorrect or misunderstood information
- Lack of information
- Pressure from society/community



50

## Indicators of Anxiety

- Inability to follow simple instructions
- Avoiding eye contact
- Avoiding communication (quiet voice)
- Laughing, giggling, or joke-telling
- Making comments about how “you do this all day”
- Perfuse sweating



51

## Alleviating Anxiety

- Understand cultural differences and openly discussing the patient’s concerns
- Tell the patient what to expect *before* you proceed
- Communicate with them throughout the entire exam
- Physically show the patient what to do, rather than just speaking instructions



52

## Alleviating Anxiety

- Maintain a comfortable environment
- Allow the patient's family to be involved in the exam and or follow up care
- Get to know your patient and build a connection with them bridging future care
- Use terminology that patients can understand



MAMMOGRAPHY  
EDUCATORS

53

## Communication Problems

Consider the source:

- Unconscious biases/unawareness
- Anxiety
- **Cultural competence**



MAMMOGRAPHY  
EDUCATORS

54

## UNDERSTANDING CULTURAL COMPETENCE



MAMMOGRAPHY  
EDUCATORS

55

## Cultural Competence – Awareness

- Your first step toward cultural competence is simply being aware of your own cultural beliefs
- Obtain information on cultural competency programs offered by your organization
- Maintain modesty and respect patient privacy
- Know what cultures your facility serves
- Take time to introduce yourself and tell the patient your role



MAMMOGRAPHY  
EDUCATORS

56

## Cultural Competence – Awareness

- Make sure to address questions/concerns before you start the exam:
  - Address any negative past experiences and explain how this will be different
  - Tell them what you're going to do BEFORE you do it
- Ensure your patient understands what to expect and that together you are a team
- Apologize, if necessary



MAMMOGRAPHY  
EDUCATORS

57

## WHERE DO YOU BEGIN?

T.I.P.



MAMMOGRAPHY  
EDUCATORS

58

**T** – Trust  
**I** – Improvement  
**P** – Perception

T.I.P.



MAMMOGRAPHY  
EDUCATORS

59

## Build Trust

The easiest way to build trust with any patient is to focus on effective communication which requires:

- Compassion
- Respecting personal space and cultural sensitivities
- Recognizing your patient's emotions
- Avoid and eliminate distractions

T.I.P.



MAMMOGRAPHY  
EDUCATORS

60

## Trust

- Develop appropriate scripting
- Focus on introduction/first impression
- Acknowledge the patient's feelings and attitude



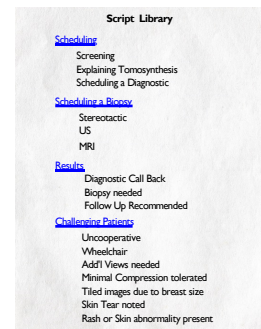
MAMMOGRAPHY  
EDUCATORS



61

## Develop Appropriate Scripting

- Develop scripts that reflect empathy and respect
- Ensure scripts are used consistently among all staff
- Use simple words and avoid medical jargon or slang terms



MAMMOGRAPHY  
EDUCATORS

62

## Focus on Introduction/First Impression

- Ask for permission to touch them
- Be understanding if they want family present
- Use an interpreter, when necessary



MAMMOGRAPHY  
EDUCATORS



63

## Acknowledge the Patient's Feelings and Attitude

- Often, the best response is to listen
- Be sensitive to your patient's perspective, culture and their desired path to wellness
- Recognize their spiritual health
- Be aware of gender concordance



MAMMOGRAPHY  
EDUCATORS



64

## Ideas for Improvement



MAMMOGRAPHY  
EDUCATORS

65

## Improvement

- Work on making small improvements adapt to cultural sensitivities
- Involve the patient's family, if desired
- Interpreters – use medically trained interpreters
- Offer patient educational materials in their native language, using illustrations, if necessary



MAMMOGRAPHY  
EDUCATORS

66

## Improvement

- Start with a community needs assessment to determine the various patient populations that you serve
- Use patient navigators
- Tailor scripting, educational materials and attention to cultural sensitivity to those particular patient populations



MAMMOGRAPHY  
EDUCATORS

67

## Perception

- Understand your patient's perception
- Perception plays a role in compliance or non-compliance
- One small factor can change the patient's entire experience



MAMMOGRAPHY  
EDUCATORS

68

## Perception

- Understand your own perceptions and unconscious biases
- Leadership should focus on a cross-cultural approach to patient-centered care



69

## When We Communicate Effectively With Patients From All Backgrounds...

- Increased patient experience scores
- Increased patient engagement and compliance
- Increased trust between medical staff and patient
- Increased patient safety



70

## Positive, Effective Communication is Contagious

- Driven by leadership
- Leaders inspire action
- Focus on cultural competence
- Set a clear vision for quality care



71

*“Actions speak louder than words,  
but words inspire action”*

- Author unknown



72

## References

- Beckman HB, Frankel RM. The effect of physician behavior on the collection of data. *Ann Intern Med.* 1984 Nov;101(5):692-6. doi: 10.7326/0003-4819-101-5-692. PMID: 6486600. <https://pubmed.ncbi.nlm.nih.gov/6486600/>
- Journal of Cross-Cultural Psychology, Tim Meko/The Washington Post, Apr 24, 2017
- Pullen, R. L. (n.d.). *Communicating with patients from different cultures: Nursing made incredibly easy.* LWW. [https://journals.lww.com/nursingmadeincrediblyeasy/fulltext/2014/11000/Communicating\\_with\\_patients\\_from\\_different\\_2.aspx](https://journals.lww.com/nursingmadeincrediblyeasy/fulltext/2014/11000/Communicating_with_patients_from_different_2.aspx)
- Andrews, Caryn. Modesty and healthcare for women: Understanding cultural sensitivities. 2026 July; *Community Oncology* 3(7):443-446. DOI:10.1016/S1548-5315(1)170732-X. [https://www.researchgate.net/publication/257621264\\_Modesty\\_and\\_healthcare\\_for\\_women\\_Understanding\\_cultural\\_sensitiviti](https://www.researchgate.net/publication/257621264_Modesty_and_healthcare_for_women_Understanding_cultural_sensitiviti)
- Tejeda S, Gallardo RL, Ferrans CE, Rauscher GH. Breast cancer delay in Latinas: the role of cultural beliefs and acculturation. *J Behav Med.* 2017 Apr;40(2):343-351. doi:10.1007/s10865-016-9789-0. Epub 2016 Aug 29. PMID: 27572092; PMCID: PMC5332480. <https://pubmed.ncbi.nlm.nih.gov/27572092/>
- Chiaravallotti, D. Mammograms: How to talk to Your Patients. 2016 October. <https://www.boardvitals.com/blog/mammogram>
- Unconscious Bias in Healthcare. 2018 March. <https://www.qualityinteractions.com/blog/unconscious-bias-in-healthcare>



MAMMOGRAPHY  
EDUCATORS

## Thank You!

### Services we offer, include:

- Onsite Positioning Training
- Assistance with Accreditation & Inspection
- Live Webinars and Conferences
- On-Demand Continuing Education

For questions or more information:

619-663-8269

[mammographyeducators.com](http://mammographyeducators.com)

[info@mammographyeducators.com](mailto:info@mammographyeducators.com)



MAMMOGRAPHY  
EDUCATORS