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Abstract

This study looks at the impact on doctor-patient communication within the framework of diagnostic processes in public hospitals in china. The study emphasises the importance of effective communication for better healthcare outcomes, patient confidence, and accurate diagnoses. The reason for this is the rising frequency of medical disputes and the escalating tensions inside china's healthcare system. After 862 individuals filled out the structured questionnaires, the quantitative data were analysed using spss software. They came from all around the country and represented all levels of healthcare facilities. Engaging communication promotes open dialogue, patient participation, and patient narratives, all of which contribute to more accurate diagnoses and fewer disagreements. Findings indicate that paternalistic attitudes and structural concerns like staff shortages make diagnosis more difficult and reduce patient satisfaction. According to the research, medical workers should concentrate on transmission training that focuses on active listening, clarity, and empathy. Training in medical policy and communication skills may be implemented in response to the increasing number of medical conflicts and the decreasing level of patientcentred care. Medical diagnosis, trust, and groundbreaking healthcare innovations are all enhanced when more people use china's publicly funded healthcare facilities, the poll found. Those working in healthcare who make it a point to hone their people skills would do well in the field. There is an increase in precision. The connection between the doctor and the patient, as well as the amount of satisfaction that patients experience, is improved by this chinese healthcare technique.

Keywords: diagnostic procedure; patient engagement; chinese public hospitals; chinese healthcare system; medical treatment.

1. Introduction

The modern chinese consumer-seller dynamic is quite like that of a doctor-patient dynamic. How patients in china's outpatient healthcare settings feel about the results of their treatment has a significant impact on their level of satisfaction with their care. Everyone who pays for medical treatment thinks they should get first-rate treatment. However, medical ethics dictate that physicians must treat all patients fairly. Be advised that the salary of chinese physicians is often correlated with the number of patients they see. These issues weaken the doctor-patient connection, making it difficult for doctors to meet all their patients' requirements and change their attitudes about doctor's visits. Medical services are not tradable goods since they cannot be immediately equated to monetary value. This long-standing problem must be addressed quickly by the chinese government (lin et al., 2025). Enhancing the level of communication that exists between medical professionals and the individuals they treat ought to be the fundamental goal of the reform. Providing healthcare personnel with consistent and comprehensive training in communication skills is one approach that may be taken to address the issue of service dissatisfaction that is brought on by communication issues. This is since the commercialisation of medical care influences the relationships between physicians and patients. When staff members at chinese hospitals showed a better level of compassion and provided improved services connected to non-



technical abilities, patients would report a higher level of satisfaction. Second, there is a need for improved trust and understanding between medical professionals, the people they treat, and the media (dong et al., 2025).

2. Background of the study

Since 1978, china's healthcare system has evolved a lot. Because of this, the way chinese patients and doctors talk to each other has modified a lot. Even though they are financially strapped and under threat to become more autonomous, china's public hospitals are very essential to the country's healthcare system. Even if medical care has become better and can now provide a wider range of services, there is still an issue between the need for and availability of health care. In recent years, people have had trouble getting medical help because drugs are too expensive, consultations are too hard, and people use medications in ways that don't make sense. People really need healthcare services. Protests over what some say are unneeded medical procedures along with elevated medication prices have made the healthcare system a little unstable. It drains valuable medical resources, damages a relationship between patients and doctors, and makes people become less inclined to trust healthcare in general (he & qin, 2023). For almost a decade, the incidence of medical disputes in china has consistently increased. The increase in doctor-patient disputes has significantly altered the standard procedures of hospital diagnosis and treatments. Consequently, the medical world has coined a new term: "medical harassers". The individuals responsible for instigating turmoil for financial gain are to blame for the conflicts between patients and physicians. Patients often exhibit distinct manifestations of anger and hostility during confrontations with their physicians. Patients sometimes have concerns about their physicians' true intentions and conduct. Ambiguous information will certainly result in conflicts and a deterioration of trust between physicians and their patients (ruan et al., 2022).

3. Purpose of the research

This study aims to examine the influence of communication skills of physicians and healthcare workers on diagnostic processes in public hospitals in china. This research attempts to assess patients' confidence in physicians and compare these levels with physicians' perspectives, consequently clarifying the importance of trusting society and particularly for the doctor-patient relationship. Healthcare personnel encounter several problems, such as significant workloads, cultural factors, and systemic challenges that impact clinical decision-making, as investigated in the research about the diagnostic process. The dynamics examined in this paper may promote a more patient-centred approach, increased communication, and greater diagnostic precision. This research has the potential to improve healthcare delivery, reduce medical disputes, and foster transparency via legislative reform. In conclusion, the subject underscores the need to combine communication tactics with therapeutic practices. The fact that this is the case demonstrates how essential it is to implement modifications that centre on positive interaction to enhance health outcomes and create the connection between the physician and the patient in china's evolving healthcare system that is more amicable.

4. Literature review

Classes in communication are of the highest significance when it comes to obtaining the skills necessary to deal with potentially life-threatening situations. It is necessary for patients who are coping with serious illnesses to be able to deal with the emotional toll that comes with obtaining a

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diagnosis, as well as the comprehensive and sometimes alarming information on their treatment options. It is more difficult for the medical professionals to communicate with one another while the patient is in the tough stage of the process. The medical personnel have a harder time talking to each other while the patient is going through a terrible time (zhong et al., 2024). If they are required to provide unsettling information to patients, medical professionals are required to deal with a wide range of information requirements, reading abilities, and cognitive health difficulties. However, the way patients and physicians communicate with one another has a significant influence on how individuals comprehend their circumstances, how they choose to deal with them, and how they manage to deal with them (gao, 2022).

It has been shown that there is a link between enhanced levels of satisfaction and psychological adjustment, as well as improved treatment adherence and results, and fair communication between the physician and the patient. On the other hand, inefficient communication may make people feel more worried, bewildered, unhappy, and disheartened, and it may also make it more difficult for them to manage and follow through with their ideas. When it comes to providing disease consultation services, the most important factor is, in general, enhancing communication between medical experts and the patients they are treating. During consultations for potentially deadly illnesses, the communication that takes place between the physician and the patient may be more specialist, serious, challenging, and terrifying than what is often seen in the context of conventional medical practice settings. Because the issues that are being addressed have the potential to endanger people's lives, this is the case. One of the potential outcomes of this study is that it will give insight on the features of outpatient communication in china, as well as the challenges that it encounters. As a result, it provides an overview of the features of communication in chinese outpatient settings, sheds light on the human and societal variables that lead to ineffective communication and analyses the possible solutions to the issue (sun et al., 2020).

5. Research question

• How does patient engagement influence diagnostic procedures in chinese public hospitals?

6. Research methodology

6.1 research design

This study used a quantitative research technique to conduct the inquiry. Data processing was conducted with spss version 25. Descriptive statistics were used to enhance the comprehensibility of the demographic data. The investigator assessed odds ratios (or) alongside a 95% confidence interval (ci) to determine the extent and direction of the associations. Results are of statistical significance when the p-value is below 0.05. Quantitative techniques are increasingly used due to their capacity for comprehensive statistical analyses and systematic assessments of survey outcomes.

6.2 sampling

Researchers used a simple random sample strategy to precisely reflect the study population. The rao-soft method indicates that a minimum of 838 individuals is required for a viable sample. A total of 957 questionnaires were disseminated by researchers. Of the 883 responses, 42 were discarded for being incomplete. Consequently, 841 valid responses were included into the total sample.

6.3 data and measurement

The study data was mostly collected via questionnaires. The survey had two sections: (a) basic demographic data and (b) a 5-point likert scale addressing challenges pertaining to digital and



conventional media. Most of the secondary data was obtained from several online and offline sources.

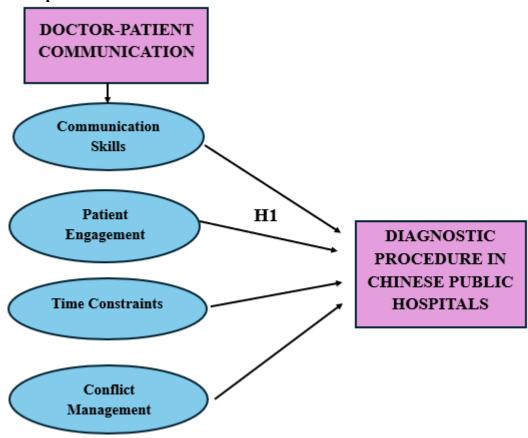
6.4 statistical software

The researchers did the statistical analysis using spss 25 and ms-excel.

6.5 statistical tools

A description-based technique was used to analyse the data comprehensively. Factor analysis should be used to evaluate reliability.

7. Conceptual framework



8. Result

• Factor analysis

Using factor analysis (fa), one may check whether a set of measuring items has a solid fundamental basis. A common misunderstanding is that hidden effects may affect the results of obvious ones. One approach that is based on frameworks is precision analysis (fa). One of the most important aims of this effort is to find out how measurement mistakes relate to observed events and what causes them.

It is possible that the data may be shown to be acceptable for factor analysis using the kaiser-meyer-olkin (kmo) approach. The scientists check that each part of the model has an enough sample size to ensure that the overall sample size is sufficient. Several of the components have a comparable variance, according to the results. Results are improved by using factor approximation to smaller data sets.

The kmo method returns a value between 0 and 1. It is important to conduct tests if the kmo value falls between 0.8 and 1.



Scientists need to fix the problem immediately since they found a sample that isn't good enough (kmo = 0.6). Measurements typically fall between the range of 0.5 to 0.6. Enquiring about the standard of agreement among authors is a great idea before settling on a final choice. Therefore, 0.5 is often used.

When the percentage of total connections that are partial encounters reaches a statistically significant level, the kmo score goes very close to zero. When crucial relationships are at play, evaluating pieces becomes much more difficult.

From 0.050 to 0.059, frequency ranges vary immensely.

• the range of 0.60 to 0.69 is quite adequate.

the median rating generally ranges between 0.70 and 0.79.

the typical range for point values is 0.80 to 0.89.

when the value is between 0.90 and 1.00, a very unlikely event takes place.

testing the appropriateness of kmo and bartlett's sampling method (table 1):

valued at 0.891 on the kaiser-meyer-olkin scale.

The results of bartlett's test of sphericity are as follows: 3252.968 is the approximate chi-square value; 190 is degrees of freedom (df); sig = .000.

Table 1: KMO and Bartlett's Test

| KMO and Bartlett's Test | | | | | |
|-------------------------------|---------------------------------------|------|--|--|--|
| Kaiser-Meyer-Olkin Measure | .891 | | | | |
| Bartlett's Test of Sphericity | Test of Sphericity Approx. Chi-Square | | | | |
| | df | 190 | | | |
| | Sig. | .000 | | | |

The results of the bartlett's sphericity test demonstrated a strong relationship between the matrices. Kaiser-meyer-olkin has shown a sample adequacy of 0.891. The researchers used bartlett's sphericity test and got a p-value of 0.00. According to bartlett's sphericity analysis, the association matrix is inaccurate.

- **❖** Independent variable
- Doctor-patient communication:

Genuine and forthright interaction between physicians and patients is essential for the safe and successful use of drugs. To effectively interact with their patients and generate positive health outcomes, doctors must have the ability to put themselves in their patients' shoes. The three main points are the following: first, how doctors show empathy; second, the effects of empathy on

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improving communication between doctors and patients; and third, the results for patients, including their functional status, health, and satisfaction. Several pieces of evidence point to the fact that while discussing medical matters, it is crucial to have effective communication and to identify many key factors. In addition to providing and receiving information, listening and asking questions are critical components of communication. One great approach to engaging patients is to ask them questions and give them time to talk. When prescribing medicine, doctors should be forthright with their patients on how to take it. Patients' knowledge must be summarised and checked often. Time spans, natural frequencies, and absolute figures may help communicate benefits and drawbacks. Additional time in the schedule, written resources, and advice from other chemists may make talking to patients and explaining drugs easier. In recent decades, medicine has increasingly embraced ai for better illness diagnoses. Ai for illness detection raises questions about how physicians should communicate the technology to patients. Physician-patient relationships and patients' psycho-cognitive views on ai need consideration (peimani et al., 2022).

* Factor

Patient engagement:

Patients who are active participants in their own medical care help to save costs, ensure that resources are used to their maximum potential, and make sure that both doctors and nurses are pleased. To sum up, patient engagement occurs when patients are given the skills and resources, they need for playing an active role in their medical care and want to do so. Additionally, it is the healthcare staff's job to ensure sure that patients have every chance to be included. One method to reach this aim is to make a relationship that is helpful to both parties and trustworthy. Another option is to make the care plan fit the person's requirements. A shared goal in healthcare is the one that the patient and doctor are trying to achieve (snow, 2022). Numerous ethical imperatives and economic and social advantages accompany patient participation, including enhanced patient self-esteem and trust, as well as a more cost-effective system. Patient participation constitutes a patient-centric culture. It first analyses the ethical imperatives that support the patient engagement movement and transfer authority and responsibility to patients due to their roles as taxpayers, users, and consumers of health care. Secondly, it elucidates the economic and social advantages linked to patient participation and examines the reasons these benefits have been seen in some circumstances but not in others (hickmann et al., 2022).

Dependent variable

• Diagnostic procedure in chinese public hospitals:

The assessment methods for periodontal-related concerns are continually advancing to provide rapid, relevant, and scientifically substantiated outcomes. Diagnostic data and clinical assessments of periodontal tissues were formerly the primary methods for identifying problems in the structures supporting the teeth. As the limitations of conventional methods have become more evident, several alternatives have emerged and been validated via experimentation. An enhanced understanding of the periodontal disease cascade underpins these advancements. For periodontal aetiology, it is required to create a paradigm shift from disease knowledge to the prevention and treatment of illnesses. To do this, diagnostic tests need to be objective, including sensitivity and specificity, and the severity of the sickness must be described. To examine and differentiate between healthy and pathological periodontal health, gingival groove fluid, which is a biofluid that is situated in the mouth close to the gingiva, has been used extensively. There is a possibility that the biomarkers that were found in the gcf might be beneficial in detecting small changes in the



mechanism of the illness. The gingival crevicular fluid (gcf) contains diagnostic tools, as well as indicators for periodontal disease and host products, including bacterial products (liang et al., 2020).

• Relationship between patient engagement and diagnostic procedure in chinese public hospitals:

It is true that the outcomes of medical treatment are influenced by the engagement of patients. However, in some healthcare systems, the term "patient engagement and participation" refers to something quite different. In the context of justice, ethical and political questions are often brought up during discussions about patient engagement. Since various stakeholder groups may place varying values on patient engagement techniques, the indicators that matter most will also change. Health technology evaluation and research that actively involves patients is crucial. Costs are reduced, resources are used to their full capacity, and physicians and nurses are satisfied when patients are active participants in their own healthcare (zhu, 2021). In addition, there is a substantial negative correlation between patient activation and both outcomes, highlighting the advantages of patient empowerment in their own treatment procedures. A decrease in readmissions and an increase in satisfaction could result from better patient activation. Like how medication adherence is favourably correlated with satisfaction levels and negatively correlated with readmission rates, it is very important for efficient patient care. The significance of a comprehensive strategy for better patient outcomes is highlighted by these findings, which demonstrate the interdependent character of diagnostic procedures (wu et al., 2025).

In consideration of the above discussion, the researcher in this study set out to test the following hypothesis on the connection between patient participation and diagnostic tests conducted in public hospitals in china:

- " h_{01} : there is no significant relationship between patient engagement and diagnostic procedure in chinese public hospitals."
- " h_1 : there is a significant relationship between patient engagement and diagnostic procedure in chinese public hospitals."

| ANOVA | | | | | | | |
|----------------|----------------|-----|-------------|----------|------|--|--|
| Sum | | | | | | | |
| | Sum of Squares | df | Mean Square | F | Sig. | | |
| Between Groups | 39644.553 | 348 | 5827.492 | 1103.064 | .000 | | |
| Within Groups | 471.574 | 492 | 5.283 | | | | |
| Total | 43257.790 | 840 | | | | | |

Table 2: H₁ ANOVA Test

Impressive findings are produced by this inquiry. An f-value of 1103.064 and a p-value of .000, both of which are lower than the .05 alpha level, indicate significance. This theory, " h_1 : there is a significant relationship between patient engagement and diagnostic procedure in chinese public hospitals" is obtained, whilst rejecting the null hypothesis.

9. Discussion

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The research discovered that communication between physicians and patients had an impact on the accuracy and effectiveness of diagnosis in public hospitals in china. Thus, effective communication enhances diagnostic processes whereas ineffective communication impairs patient participation and accuracy. These findings established support for earlier research that demonstrated how empathy, attention, and clarity assist in the development of trust, acceptance, and satisfaction among patients. To establish genuine relationships, chinese public hospitals are required to place a high priority on communication that is both orderly and compassionate. This is because of regulatory obstacles, a shortage of personnel, and an excessive number of patients. As a result of insufficient communication between the doctor and the patient, conflicts became even more severe. This reduced patient faith in doctors and hampered diagnosis. Because the stratified sample technique encompassed all hospital levels and geographic territories, the results were more applicable. Certain institutions were not the only ones that are affected by the systemic influence that communication has on diagnostic quality. It is essential to take notice of the fact that the study indicates that enhancing communication training for healthcare personnel might potentially minimise the number of disputes, increase the efficiency of diagnostic processes, and promote treatment that is centred on the patient. When it comes to the area of therapeutic therapy, the capacity to communicate effectively needs to be on par with technical abilities. By boosting communication during clinical operations, public hospitals in china can improve the accuracy of diagnoses, trust, and settlement of disputes, as well as the overall outcomes of healthcare inside the nation.

10. conclusion

The research investigated diagnostic procedures and the discussion between medical professionals and patients in china's public hospitals. According to the findings of study, having effective communication influences the accuracy, reliability, and efficiency of diagnostic tests. This indicates that effective communication is a treatment talent that has an impact on the precision of diagnosis, the trust of patients, and their level of satisfaction. Based to the findings, patients benefit from having consistent and straightforward interaction across all parties involved in their treatment. This communication helps patients comprehend diagnostic tests, medical instructions, and fully participate in their own care. From a professional standpoint, the research highlights the significance of medical training and interaction for career progression. Using communication tactics that are centred on the patient, hospitals can enhance diagnosis, decrease the number of medical disputes, and foster unity. An accurate diagnosis, confidence, openness, and the ability to work together are all outcomes that may be achieved via effective communication. The improvement of healthcare in china can only be sustained for an extended period if there is an open communication between administrators, physicians, and patients as they try to enhance clinical results and raise patient satisfaction.

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