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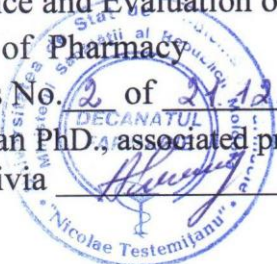
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FACULTY OF PHARMACY STUDY PROGRAM 0916.1 PHARMACY CHAIR PHILOSOPHY AND BIOETHICS

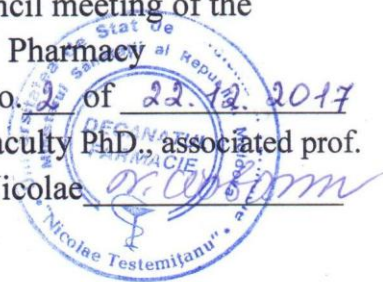
APPROVED

at the meeting of the Commission for Quality Assurance and Evaluation of the Curriculum Faculty of Pharmacy
Minutes No. 2 of 21.12.2017
Chairman PhD., associated prof.
Uncu Livia



APPROVED

at the Council meeting of the Faculty of Pharmacy
Minutes No. 2 of 22.12.2017
Dean of Faculty PhD., associated prof.
Ciobanu Nicolae



APPROVED

approved at the meeting of the chair of Philosophy and Bioethics Minutes No. 01 of 01.09.2017
Head of chair Ph. D., associated prof.
Ojovan Vitalie

CURRICULUM

DISCIPLINE COMMUNICATION AND BEHAVIOUR IN MEDICINE

Integrated studies

Type of course: **Compulsory**

Chisinau, 2017



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I. INTRODUCTION

- General presentation of the discipline: place and role of the discipline in the formation of the specific competences of the professional / specialty training program

The value and necessity of the subject *Communication and Behavior in Medicine* for pharmacists is determined by the various unclear and precarious situations with which the pharmacy worker is confronted in his work. This difficulty usually oscillates between what is good and what is bad, what is right and what is not right, what is normal and what is abnormal. The intense pace imposed on the practitioner or the pharmacist in practice makes it difficult for them to face multiple difficulties involving communication and behavioral control skills. One thing is certain that a personal communication style, professionally well shaped and oriented towards the formation of moral qualities that dictate a calm (generally normal) behavior in difficult situations in your activity, completes you with increasing patient satisfaction, verticality of your doctor and pharmacist, and , not least with the quality of the medical act.

In the context of the new professional training requirements of the future pharmacist, the *Communication and Behavior in Medicine* is advanced and recommended for all specialties in the health and pharmaceutical system.

In the desire to create an effective communication atmosphere and balanced behavior, it is not sufficient only specialized medical / pharmaceutical knowledge, but also knowledge that gives the real complexity of the relationship between the physician and the patient. Pharmacist's relationship with the patient presupposes, first of all, effective communication skills based on human nature, moral behavior based on the essence of the human being and not on the accidental appearances that often occur in the medical act.

The course *Communication and Behavior in Medicine* aims to streamline the practice of the pharmacist profession, to form the sense of responsibility as a human and as a specialist in the future worker. To create their own communicative and behavioral style in line with the noble profession of the profession.

- Mission of the curriculum (aim) in professional training

To provide pharmacy students communication and behavioral knowledge and techniques accompanied by professional moral support, as well as acquiring skills to understand the specific conditions under which the communication act is carried out to ensure a communication to change the behavior of the parties involved in medical relations and pharmaceuticals.

- Languages of the course: English, Romanian, Russian.
- Beneficiaries: students of the I year, Faculty of Pharmacy

II. MANAGEMENT OF THE DISCIPLINE

Code of discipline	U.02.O.020		
Name of the discipline	Communication and Behavior in Medicine		
Person(s) in charge of the discipline	PhD., associated prof. Vitalie Ojovan Dr., lecturer Ludmila Rubanovici Univ. assis. Ion Banari		
Year	I	Semester/Semesters	2



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Total number of hours, including:		90
Lectures	17	Practical/laboratory hours
Seminars	34	Self-training
Form of assessment	C	Number of credits
		2

III. TRAINING AIMS WITHIN THE DISCIPLINE

At the end of the discipline study the student will be able to:

- *at the level of knowledge and understanding:*

- communication process and communication functions;
- communication techniques in the creation of functional medical-patient-pharmacist relations;
- the communication and behavioral criteria of the qualitative medical fact;
- Various situations of manifestation of communication barriers in the pharmacist-patient relationship;
- effective communication models, active listening techniques for successful vocation;
- the structure and quality of the conflict, the causes that may lead to conflicts in the therapeutic act;
- the main sources of malpractice to prevent them;
- pharmacist and patient rights and obligations;
- the components of a communication for changing health-related behavior.

- *at the application level:*

- intra and inter-organizational communication techniques for optimal integration into the medical team;
- competencies for deciphering and applying metacommunication in medical practice;
- images appropriate to a health worker by avoiding malpractice;
- Specific techniques for overcoming barriers to communication;
- the effective communication elements in the doctor-patient relationship;
- the main strategies for solving conflicts at interpersonal, personal and social level;
- managing the medical conflict through bioethics;
- intercultural behavior in the doctor-patient relationship;
- behavioral responses of patients in personality;
- Moral qualities in clarifying the problems regarding the life and health of patients and / or their entourage.

- *at the integration level:*

- communication techniques under the terms of pharmaceutical activity;
- knowledge to organize or reorganize your own communication style in the pharmacy;
- the professional image according to the status and social role of the doctor and the pharmacist;
- knowledge and skills to detect sources of conflict in pharmaceutical practice;
- Ability to overcome communication barriers in the pharmacy;
- the theory of intercultural communication in the dialogue with patients and clients from different ethnic groups;
- integrate strategies and communication techniques for changing health-related behavior;
- the moral character of the person that determines the professional conduct.



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IV. PROVISIONAL TERMS AND CONDITIONS

Basic knowledge in communication and behavioral sciences applied in medical practice to streamline individual implications and quality of the medical act, as well as changing health risk behaviors.

V. THEMES AND ESTIMATE DISTRIBUTION OF HOURS

Lectures, practical hours/ laboratory hours/seminars and self-training

No. d/o	THEME	Number of hours		
		Lectures	Practical hours	Self-training
1.	Human behavior – as a bio-psycho-socio complex.	2	4	1
2.	Behavior and Personality.	2	4	1
3.	Behavior and Society. Elements of medical sociology.	2	4	1
4.	Communication. Definitions and functions.	2	4	1
5.	Metacommunication and cultural differences.	2	4	1
6.	Barriers and cleavages in communication.	2	4	1
7.	Conflict - the essential constituent element of communication.	1	2	1
8.	Behavior and cultural context. Conflict.	1	2	1
9.	Health risk behaviors. Communication for behavior change health risk.	3	6	1
Total		17	34	9

VI. OBJECTIVES AND CONTENT UNITS

Objectives	Content units
Theme 1. Human behavior – as a bio-psycho-socio complex	
<ul style="list-style-type: none">• To define the notion of human behavior, the complex formula of building and consolidating behavior;• To know the criteria of normality;• To demonstrate the	1. The concept of human behavior. Classification of human behavior. Factors influencing human behavior: biological, psychological and social.
	2. Bio-psycho-social factors influencing the medical act. Behavior and health. Impact of human behavior on health.
	3. Normal behavior. The concept of normality. Normality as a process. Criteria of normality. Normality and communication. Normality as healthiness, normality and adaptability, health and adaptation.



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Objectives	Content units
<p>involvement of internal and external factors in determining behavior;</p> <ul style="list-style-type: none">• To apply the knowledge gained in determining the types of behaviors;• To integrate the moral character of man that determines professional conduct.	<p>4. Abnormality. Criteria for defining abnormalities. Abnormalities and disease. Types of abnormal behaviors.</p>
Theme 2. Behavior and personality	
<ul style="list-style-type: none">• to define what is personality and its structural elements;• to know the impact of human character on professional success;• to apply the behavioral responses of different types of personality;• to integrate effective decisions that shape different types of particular behaviors.	<p>1. The concept of personality. Characteristics and personality structure. '</p>
	<p>2. Behavior and temperament. Types of temperament: choleric, sanguine, phlegmatic and melancholic.</p>
	<p>3. Behavior and human somatic. Morphological typologies.</p>
	<p>4. Behavior and "human psychic". Psychophysiological and psychological typologies.</p>
Theme 3. Behavior and Society. Elements of medical sociology	
<ul style="list-style-type: none">• To define the concept of medical sociology, status and social role, bioethics, medical deontology;• to know the types of doctor-patient relationship;• to become aware of the rights and obligations of the doctor and the patient;• to apply appropriate images to a health worker by avoiding malpractice;• integrate the professional image in accordance with the physician's status and social role.	<p>1. The notion of sociology and medical sociology.</p>
	<p>2. The characteristics of the notions of status, social role and role conflict.</p>
	<p>3. Status and social role of the doctor. Social role of the patient. Doctor-patient relationship as role relationship.</p>
	<p>4. Types, models and strategies of doctor-patient relationship. Stages of medical act: anamnesis and symptom exploration by physician; specification of the diagnosis and treatment decision; therapeutic compliance, therapeutic process, and post-treatment stage. The informed consent.</p>
	<p>5. Malpraxis and non-compliance to treatment as deviations from the role obligation. Self-medication.</p>



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Objectives

Content units

6. Elements of bioethics and medical deontology.

Theme 4. Communication. Definitions and functions

- to define the process of communication, communication functions;
- to be familiar with various communication techniques useful in building a physician-patient functional relationship;
- to demonstrate the effectiveness of communication in various professional situations;
- to apply intra-and inter-organizational communication techniques for optimal integration into the medical team;
- to integrate knowledge to organize or reorganize your own style of communication.

1. The notion of communication. Elements of communication. Functions of communication.

2. The communication process. Types and forms of communication.

3. Significance of communication in medical activity. Types of doctor-patient communication.

4. Communication based on diagnosis. Communication with different types of patients.

5. Communication in the medical team: physician, assistant, bioethician, priest, psychologist, psychiatrist, social worker, patient.

Theme 5. Miscommunication and cultural differences

- to define the value and impact of metacommunication in the medical act;
- to know the principles of metacommunication and its importance in medical practice, in the context of respecting the bioethical norms;
- to demonstrate skills for decoding and applying the verbal, paraverbal, nonverbal and extraverbal language of metacommunication in medical practice;
- to follow the Code of Good Manners in everyday life, including work;
- to integrate patient

1. The notion of metacommunication.

2. Decoding the verbal language of metacommunication.

3. Paraverbal language: voice characterizers, qualifiers and segregates.

4. Nonverbal language: posture of the body, mimic and gesture.

5. Interaction between verbal and non-verbal communication. Intercultural positions in nonverbal communication.

6. Etiquette. History of etiquette. Elements of the code of good manners. Behavior in workplace.

7. The image as essential element in contemporary society. The concept of image. Personal image. Dress code. Language of colors. Female and male dress code.



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Objectives	Content units
<p>understanding and interpretation, to use body language in communicating with patients, appropriate assessment according to speaker culture.</p>	8. The image of the medical student and the doctor.
	9. Elements of Neuro-Linguistic Programming: the metamodel, the art of asking questions, fingers and critical words, the sensory representation, the visual access keys and how we keep the objectives.
Theme 6. Barriers and cleavages in communication	
<ul style="list-style-type: none"> • to define the concept of communication barriers, the cause of their occurrence and their classification, to know the main typologies of communication barriers; • to know the various situations of manifestation of communication barriers in the doctor-patient relationship, efficient communication models, active listening techniques; • to demonstrate specific techniques for overcoming barriers in communication; • to apply the principles of metacommunication as a model for overcoming barriers in communication; • integrate abilities to overcome communication barriers in medicine. 	1. The concept of barrier of communication, the cause of their occurrence and their classification.
	2. Technical barriers: noise, sound disturbances and filters.
	3. Socio-cultural barriers: political, religious, social and professional.
	4. Psychological barriers: attitudes and skills.
	5. Barriers of understanding: phonetic, semantic, stylistic and logical.
	6. Efficient and inefficient communication
	7. Techniques and forms of active listening.
	8. Elements of active listening: questioning, paraphrasing, summarizing and feedback.
	9. Effective doctor-patient communication. Personal barriers in the doctor-patient relationship.
Theme 7. Conflict - the essential constituent element of communication	
<ul style="list-style-type: none"> • to define the concept of conflict, its structure and type conflict; • to know the causes that can lead to conflicts; • to demonstrate skills in solving conflicts at interpersonal, personal and social level; • to apply conflict management through bioethics, by condemning immoral and amoral facts. • to integrate knowledge and 	1. The concept of conflict and conflictology. The object of study of conflictology.
	2. Structure of the conflict: the subject of the conflict, the elements of the conflict, the environment and conflict requirements, the subjective interpretation of the conflict and its individual elements.
	3. Conflict types. Conflict resolution strategies.



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Objectives	Content units
skills to detect sources of conflict in medical practice; • to integrate conflict resolution strategies between physician and patient.	4. The ethical aspect of the conflict.
Theme 8. Behavior and cultural context. Conflict	
<ul style="list-style-type: none"> • to define the intercultural communication process, different types of intercultural communicators; • to know the sources of mistakes in intercultural communication in medicine; • demonstrate intercultural behavior in the physician-patient relationship; • to apply structurally the intercultural dialogue; • to integrate intercultural communication theory into dialogue with patients from different ethnic backgrounds. 	1. The concept of culture and intercultural communication. Multiculturalism, interculturality, transculturality.
	2. Ethnocentrism and intercultural communication. Ethnocentrism as a problem of intercultural communication.
	3. The structural features of intercultural communication. Sources of blunders in intercultural communication.
	4. Intercultural doctor-patient communication.
Theme 9. Health risk behavior. Behavior change communication	
<ul style="list-style-type: none"> • to define the forms (varieties) and content of health-risk behaviors; • to understand the knowledge needed to detect deviant and harmful behaviors in the communication process; • to know the classification of deviant behaviors; • to demonstrate communicative - behavioral capacities to maintain a physician-patient dialogue in case of detecting deviant or harmful behaviors, aiming the annihilation or diminution of the respective skills; • to apply bioethics in clarification of issues related to the life and health of patients and / or their entourage; 	1. Concept of deviant behavior. The importance of its annihilation in society and medicine.
	2. Classification of deviant behaviors.
	3. Personality disorders. Behavioral syndromes in mental illness.
	4. Domestic violence. Sexual Deviations.
	5. Persistent conflict situations.
	6. Harmful behavior: general characteristic.
	7. Delimitation of the main problems of harmful behavior.
	8. Physical and nervous strain. Unbalanced eating.
	9. Smoking, alcohol and drug use.
	10. Behavior towards medicines: repulsion, indifference, habits, abuse. Effect of Placebo.
	11. General Aspects of the Behavioral Change Process: Principles and



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Objectives	Content units
<ul style="list-style-type: none">to integrate the design, support and evaluation of a speech adapted to the criteria for the prevention of deviant or harmful behaviors;to integrate communication strategies and techniques for changing health risk behaviors.	Steps in Assessing Change of Behavior.
	12. Essential conditions for changing behavior.
	13. The importance of communication in changing behavior. Strategies and communication techniques for changing behavior. Behavior towards the drug.

VII. PROFESSIONAL (SPECIFIC (SC)) AND TRANSVERSAL (TC) COMPETENCES AND STUDY FINDINGS

✓ Professional (specific) (SC) competences

- **PC1.** Knowledge of the theoretical bases of the disciplines included in the curriculum of the faculty, of the general principles in the elaboration, analysis and registration of pharmaceutical and para-pharmaceutical products; knowledge of the general principles of organization and functioning of pharmaceutical institutions with different legal forms of activity; knowledge of the legislative framework in the field of pharmacy; knowledge of the pharmacist's rights and obligations.
- **PC2.** Forecasting the basic economic indices of pharmacy: achievements, pharmaceutical preparations stocks; travel expenses; benefit; assessing trends in the development of population assistance with medicines; performing various practical work related to the preparation, analysis and standardization of synthetic and phytopreparate medicines; knowledge of the drug in terms of action, indications, contraindications, adverse effects, mode of administration and their interactions; the practical implementation of patient counseling and pharmaceutical assistance.
- **PC5.** Determining the criteria for assessing the efficacy of the pharmaceutical system and the personal activity according to the real conditions and in the concrete social context; determining how to conduct pharmaceutical activity based on the results of the evaluations; identifying research issues in the field of pharmacy; knowing the methodology of scientific research in the practical work of a pharmacist or a head of the pharmaceutical unit.

✓ Transversal competences (TC)

✓ Study findings

Upon completion of the course the student will be able to:

- distinguish the components of an effective communication act;
- identify human moral character in order to successfully practice medicine;
- maintain emotional and moral balance in difficult professional situations;
- identify the sources of malpractice encountered during the doctor and patient relationship;
- make constructive decisions in conflict situations with either patients or colleagues;
- to improve the techniques and strategies, types and models of communication and behavior in professional activity and everyday life;
- to appreciate the value and necessity of moral behavior in accomplishing the medical act;
- characterize deviant and harmful behaviors to promote healthy living behavior.



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STUDENT'S SELF-TRAINING

No.	Expected product	Implementation strategies	Assessment criteria	Implementation terms
1.	Working with books and ICT.	Work systematically in the library and audiovisual services. Exploring the current electronic sources on the topic under discussion.	1. Quality of formed judgments, logical thinking, flexibility. 2. The quality of the systematization of the informational material obtained through its own activity.	During the semester
2.	Essays	Analysis of relevant sources on the topic of the paper. Analysis, systematization and synthesis of information on the proposed theme. Compilation of the paper in accordance with the requirements in force and presentation to the chair.	1. The quality of systematization and analysis of the informational material obtained through its own activity. 2. Concordance of information with the proposed theme.	During the semester
3.	Case study analysis.	Choice and description of the case study Analysis of the causes of the issues raised in the case study. Prognosis of the case investigated. Deduction of the expected outcome of the case.	1. Analysis, synthesis, generalization of data obtained through own investigation. 2. Formation of an algorithm of knowledge based on the obtained conclusions.	During the semester

VIII. METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-ASSESSMENT

• *Teaching and learning methods used*

The lecture consists of an interactive exposition of the course's basic content.

The student's seminar and extra-curricular activity involves the application of a variety of methods as follows: heuristic conversation, problem-solving, brainstorming, group work, individual study, debate, problem solving, role play, case study.

• *Applied (specific to the discipline) teaching strategies / technologies*

Study of document texts; role plays; case study; computer assisted training.

• *Methods of assessment (including the method of final mark calculation)*

Current: frontal and / or individual control by:

- ✓ Evaluation of the level of involvement of students and their quality in the accomplishment of the current tasks;



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- ✓ Evaluating answers (students' arguments and decisions) to questions of problem situations or case studies;
- ✓ Evaluation of the control work.

Final: Differentiated colloquium.

Final test - oral test consisting of 3 questions: one question for assessing knowledge and two questions for competence assessment.

Answers are scored in grades 0 to 10 in accordance with national knowledge and competence assessment regulations. The annual average is formed from the sum of all grades divided by the number of accumulated notes.

The final grade will be calculated from the annual average score (coefficient 0.5) and the final grade score (coefficient 0.5).

Method of mark rounding at different assessment stages

Intermediate marks scale (annual average, marks from the examination stages)	National Assessment System	ECTS Equivalent
1,00-3,00	2	F
3,01-4,99	4	FX
5,00	5	E
5,01-5,50	5,5	
5,51-6,0	6	
6,01-6,50	6,5	D
6,51-7,00	7	
7,01-7,50	7,5	C
7,51-8,00	8	
8,01-8,50	8,5	
8,51-8,00	9	B
9,01-9,50	9,5	
9,51-10,0	10	A

The average annual mark and the marks of all stages of final examination (computer assisted, test, oral) - are expressed in numbers according to the mark scale (according to the table), and the final mark obtained is expressed in number with two decimals, which is transferred to student's record-book.

Absence on examination without good reason is recorded as "absent" and is equivalent to 0 (zero). The student has the right to have two re-examinations.



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IX. RECOMMENDED LITERATURE:

A. Compulsory:

1. Ojovanu V. (coord.). Comunicare și comportament în medicină (cu elemente de bioetică). Suport de curs. Chișinău: CEP Medicina, 2016.
2. Codul cadru de etică (deontologic) al lucrătorului medical și farmaceutic. Chișinău: Min. Săn. al R.Mold., 2008.
3. Dicționar de Filosofie și Bioetică. Chișinău: Medicina, 2004.
4. Dumitrașcu Dan L. Comunicare medicală. Curs pentru studenții la medicină. Cluj-Napoca: Editura Medicală Universitară „Iuliu Hațieganu”, 2013.
5. Fica Simona, Minea Liudmila. Ghid de comunicare și comportament în relația cu pacientul. București: Editura Universitară „Carol Davila”, 2008.
6. Miu Nicolae. Științele comportamentului. Cluj-Napoca: Editura Medicală Universitară „Iuliu Hațieganu”, 2004.
7. Spinei Angela. Comunicare și comportament. Chișinău: Medicina, 2005.
8. Țirdea Teodor. Bioetică: origini, dileme, tendințe. Suport de curs. Chișinău: Medicina, 2005.
9. Campbell Alastair, Gillett Grant, Jones Gareth. Medical ethics. Oxford: Oxford University Press, 2006.
10. Cole Thomas R., Carlin Nathan S., Carson Ronald A. Medical humanities. An introduction. Cambridge: Cambridge University Press, 2015.
11. Gramma Rodica, Paladi Adriana. Behavioral sciences: compendium. Didactic material for medical students. Chisinau: Medicina, 2011.
12. O'Neill Onora. Autonomy and trust in bioethics. Cambridge: Cambridge University Press, 2012.
13. Smith Stephen W. End-of-life decisions in medical care: principles and policies for regulating the dying process. Cambridge: Cambridge University Press, 2012.

B. Additional

1. Birkenbihl Vera F. Semnalele corpului. Cum să înțelegem limbajul corporal. București: Gemma Pres, 1999.
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3. Cosman D. Psihologie Medicală. Iași: Ed. Polirom, 2010.
4. Dinu Mihai. Comunicarea. București: Editura științifică, 1999.
5. Guillemont A., Laxenaire M. Anorexie mentale et boulimie. Le poids des facteurs socioculturels. Ed. Masson, 1994.
6. Hogan Kevin. Depășește cele 8 obstacole în calea comunicării. București: Editura Amaltea, 2006.
7. Jung C. G. Descrierea tipurilor psihologice. București: Ed. Anima, 1994.
8. Jung C.G. Despre formarea personalității. În: Psihologie individuală și socială. București: Ed. Anima, 1994.
9. Legea cu privire la exercitarea profesiei de medic (Nr. 264 din 27.10.2005). În: <http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=313062>.
10. Marinescu A. Codul bunelor maniere astăzi. București: Ed. Humanitas, 2002.
11. Munteanu D. Politețe și bună cuviință. București: Ed. Ramida, 1992.
12. Pascu Rodica. Comunicare interculturală. Sibiu: Editura Universității "Lucian Blaga", 2007.
13. Pasecnic V. Psihologia imaginii. Chișinău: Știința, 2006.
14. Pease Allan, Garner Alan. Limbajul vorbirii. București: Ed. Polimark, 1994.
15. Popa-Velea O. Științele comportamentului uman. Aplicații în medicină. București: Ed. Trei, 2010.



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17. Râmbu Nicolae. Comunicare interculturală. Suport de curs universitar. În: Comunicare socială și relații publice. Iași: Editura Universității "Al. I. Cuza", 2007, p.167–218.
18. Rogoza L. Etică și Deontologie medicală. Brașov: Editura Universității TRANSILVANIA, 2006.
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