Speech: The Doctor's Toolkit

(By Akanksha: Can be used according to the orator)

Slide 1:

As you can see on the screen, our topic for today is "The Doctors Toolkit - Emotional Intelligence, Empathy, Sympathy and Body Language in Clinical Situations". Before I start, I would like to ask you on a scale of 1 to 10, how familiar are you with these words? Could you briefly explain your level of understanding?

- (This will help you to gauge into audience's understanding of the topic and tailor the presentation accordingly)

Thank you for your response. I would appreciate it if you kept coming up with questions, and answers and share your quality education on any of the related slides today because as the famous quote says "Gaining knowledge is the first step to wisdom, sharing it, is the first step to humanity. I am Dr. Vertika Kulshrestha, your host today and we are together for the next 2-hour session with each other.

Slide 2:

Why do you need this toolkit? You would say, we have studied enough and there is so much to learn technically. So, what is special about it? Well, yes, you are thinking right but today where patient-oriented healthcare systems are developing rapidly, we must become part of it.

As per NMC June Reports, there are 13 lakh registered doctors, and you are one of them! Congratulations but recent research and study shows how emotional intelligence, empathy, and body language - all help in delivering 100% success in patient outcomes. Also, you will understand the core competencies required in the medical industry. So, let's start.

Slide 3:

This presentation is structured as follows - we will cover each of the terms separately starting from Empathy, Sympathy, Emotional Intelligence, and Body Language. We can break these terms more deeply and strictly based on clinical situations so that you can relate easily.

There are total 5 videos based on concepts & situations. Also, to help you experience the benefit of an interactive session, we have designed two activities. In addition to it, we will hold a constructive discussion on various important points.

Slide 4:

Let's start with Empathy. Most simply, Empathy is having awareness of the feeling and emotions of other people. In Medical Context, we use it as "Clinical Empathy".

Now, Empathy is genuine care or connection. Can anyone tell me what it is called in Hindi? Have you experienced Empathy towards anyone?

In Hindi, it is called as "सहानुभूति". Think of our mothers- they empathize with us in many ways. She picks up our emotions/feelings, understands us, and gave us unwavering support through her nurturing presence. Not only this, mothers' advocates for our education needs, for tasty cuisines, for bunking classes and still encourage us by saying "My child is the most innocent one" - Different from Reality.

So, Empathy is putting yourself in someone else shoes, and in health care systems, we must actively promote, assist and cultivate "feeling with someone". The modern theories on detached concerns (Example Munabhai MBBS), don't work anymore. People all over the world have accepted Empathy as Medicine. It makes the patient feel that their voices are heard and their interest is protected.

Slide 5:

Empathy is not a single skill, it is multi-facet. Also, it works at various stages or dimensions. There are four levels or dimensions, - Emotive, Moral, Cognitive and Behavioral.

1. Emotive - Also, known as affective or emotional it means feeling the same what other person is feeling. When the doctor tries to understand the patient emotions it is the emotive empathy.

2. Moral - It involves the ability to empathize with others in a moral context, considering their perspectives, values, and ethical concerns. In clinical context, it is the moral empathy that drives the doctor's internal motivation and willingness.

3. Cognitive: It is like an intellectual skill or sometimes you say the "gut feeling" to sense & grasp patient's emotions and their perspective.

4. Behavioral: It involves taking action and demonstrating empathy through observable behaviors. At this dimension the doctor convey emotions and responds through language verbal & nonverbal - like tone of voice, etc.

Slide 6:

You must have understood in some shape or form, we need to employ empathy in the working culture. Let us try to understand step by step.

The doctor becomes emotionally engaged to feel with the patient which is an automotive response**. (The emotional dimension)**

The doctor's willingness to empathize would build trust & reputation as a professional**. (The moral dimension)**

The doctor picks up emotions & could easily evaluate the situation from the patient's viewpoint called perspective taking. (The cognitive dimension)

The doctor would communicate back with empathy and would show this through his gesture, movements & voice. (The **behavioral dimension)**

While going through these stages or levels, we are trying to understand the psychological, emotional and social aspects of patient care. At times, we do not realize that a certain situation can only be handled using empathy.

Slide 7:

I don't have an exact date or specific event to pinpoint when the concept of clinical empathy gained prominence in India, it is evident that empathy has long been valued in the Indian healthcare system, and efforts to promote and enhance empathy in clinical practice continue to evolve. Our next slide is on the benefits and importance of empathy. Let' see more about it.

Slide 8:

Let's go straight to the points:

1. Imagine your patient is telling 2 medical problems. So, what will you do? Use your experience and decide for the patient or go in deep to know more about the history of both issues. Here, comes the role of empathy. As the doctor shows empathy - patients are more likely to open up & share information about their symptoms, emotions, etc. It helps in knowing medical history and promotes transparency & confidence.

2. Effective communication aids in improving and empowering the patient to cope up with medical issue thereby providing him/her the quality care.

3. Empathy improves the rate of successful clinical outcomes. Clinicians are able to come up with more tailored & personalized plans for patient satisfaction.

4. With enhanced patient understanding, doctors gain a deeper understanding patient's core concerns, values. They build trust resulting in higher rate of Medication adherence.

Slide 9:

Empathetic Communication:
It is about using empathetic language, acknowledging the patient's feelings, and validating their experiences, which helps establish a deep connection and fosters a sense of trust and comfort in the doctor-patient relationship.

Communication + Empathy = Empathetic Communication (**Trust Building):**

Below are some of the tips to help you:

1. Experience the feeling of the patient without losing our own identity.

2. Being Non-Judgmental & Tune into the patient's emotions - for quality care.

3. We must respect & acknowledge the patient's coping efforts and offer them support & partnerships.

Slide 10:

Try to understand this slide. This is an example of how empathy reciprocates relationship with patients.

Effective Empathetic communication empowers patients by involving them in decision-making, providing clear explanations, and addressing their concerns.

Slide 11:

Let's embark on a creative exploration. Do you believe that empathy is an innate skill that can be honed through practice, or is it more of an innate attitude that we either possess or lack?

If you are confused between the two - we have the definition of the both terms.

(Ask cross questions - If Empathy is an attitude, what about the people who look so artificial? Have you felt that they lack the sincere expression of Empathy? It is too sweet. If it is a skill, can we measure or rate it? What is your take?

Slide 12:

Thank you for your response. Now, let's dive more into your nature. Do you have such questions in your mind, because I used to think the same way.

(Make one by one stand and read the questions. Ask them which question is more related to them)?

Slide 13:

Well, all your concerns are true. It doesn't matter how much tech-savvy we are as professionals, dealing with patients practically, is a challenge.

At times, the painful reality may take its toll & the doctor starts feeling stress and exhaustion & falls into a negative mindset!

Compassion Fatigue:
Compassion fatigue refers to the emotional and physical exhaustion experienced by caregivers or helping professionals due to prolonged exposure to the suffering and trauma of others. It can lead to a decreased ability to empathize and provide effective care.

#*Burn Out* - It is also a form of emotional and physical exhaustion when the stressors of the healthcare environment, exceed an individual's capacity to cope, leading to feelings of cynicism, detachment, and reduced empathy.

#Similarly, you may experience *emotional exhaustion* and *professional distress*.

Slide 14:

So, to cut it short many say that clinical empathy is Emotional Labor. Also, addressing these challenges requires ongoing, training, support, and care for healthcare providers.

Frankly, whether you consider Empathy as a skill or an attitude, in my experience it is important to focus on ***being empathetic rather than "seeming" empathetic"***. It is the basic quality of a doctor.

Moving, further there are some strategies such as Self-Care, Compartmentalization, fostering a healthy work environment. Please look at the slide.

(Cover all the points one by one as solutions)

Slide 15:

How to build Empathy? (Video)

Slide 16:

Many of you will recall that you have used Sympathy to connect with others. For example, we may offer sympathy when a friend shares their struggles. So, it is a general fellow feeling. It is an emotion caused by the realization that something bad has happened to another person.

Slide 17:

Hey, have you ever considered trying your hand at role play? It's an incredible opportunity to unleash your hidden acting talents!
(Select two people and give them the role of a doctor & patient)

Imagine one of you is a Dramatic Patient, who acts like this is the end of the world. He is suffering from Abdominal Pain & the other one is the Doctor, who looks too relaxed. Your challenge is to communicate but use these words & phrases frequently!

You can discuss as how you would start.

Understand their character, step into their shoes, and unleash your creativity. It's like being the star of your own mini-production of NTPC!

Slide 18:

With the last role-play, we have understood that the doctor is sympathizing with the patient. This means - Empathy and Sympathy are two different traits.

When I say, I Sympathize - this means I am feeling sorry for you. I pity you. Yes, I am offering you comfort from my words, and support but it ends here only. It is the thinking and understanding part.

When I Say, I empathize with you, this means I understand from your perspective. On the other hand, Sympathy is a more self-oriented purpose. To elaborate as an example, I might say "I understand that this has been a tough situation for you and your family. I am truly sorry for your loss and pain. Is there anything you like me to help with"?

Slide 19:

If we differentiate it from the patient's way of thinking various studies show us this part.

- *Emotionally Distant vs. Emotionally Engaged*- Sympathy as per patient is superficial. Empathy is more emotionally engaging. Or we can say, Sympathy may or may not be emotionally engaging but it like overwhelmed seeing someone suffer.

- *Reactive Response Vs. Skilled Response* - Sympathy is reactive emotion that is short-lived just like get well soon cards, phone calls, etc. It is personalized for a moment but then got depersonalized. In Empathy, Patient think it is a skilled response that makes them feel welcomed and valued. It makes them more positive.

- *Superficial vs. Actual Support*- in Sympathy, Patients experienced that they may or may not get a helpful advice but Empathy help them alleviate their pain as it gets to the root cause.

Slide 20:

Have you noticed that both these terms - Sympathy & Empathy has a suffix pathy? It came from the Greek Word which is called pathos (Emotions and Feeling). Can you think you more terms - used in medical terminology?

(Pathology Lab): Diagnosis of the people suffering which is again connected to the feeling and emotions of the people. Why I am telling you this because we are talking intelligently about emotions.

So, here comes the next chapter based on Emotional Intelligence - An extremely important topic of the day.

Slide 21:

Let us take a leap to understand each other's sense of emotional intelligence first through this activity.

Slide 22:

Stand up at your place. Listen to the statement. If you agree with the statement then start rolling your hands. If you think the statement is false or you disagree, shake your hands with arms straight up in the air! The speed of rolling or shaking hands depicts how much you agree or disagree with the statement. Also, discuss as why you think so! Please alter your speed accordingly and let me know your views. Why are you doing so?

Slide 23:

There are "Good "and "Bad" Emotions?

(Ask them to name a good emotion and bad emotions. Then ask them is Fear not a good emotion. Let the doctors know that the answer is false because by this way of thinking, we misunderstand the functions of the emotions. For example, Fear is not a negative emotion. It helps us setting an alarm as a caution. There are only positive & negative circumstances that gave the feeling. What is being happy for a criminal is sad for a common-man. So, understand each emotion serves a purpose and we must value all the feelings.

Slide 24:

While making decisions, it is best to leave Emotions out of it.

(False, Whoever tells you to do so and leave emotions out of it is making you a live a robotic life. Whatever, we do in our life, we must try to maintain a balance and leaving emotions means you are just thinking practically. A person with 100% CGPA score cannot be the happiest person. He must have social life to enjoy friendship, love, care and other emotional relationships. Also, if an emotion is left unchecked or ignored, it intensifies with time.)

Slide 25:

I Often See Motivational Videos when Feel Low!

(True, I knew you would be rolling your hands. This is simple because we are somewhere connected to the experience and struggle of the person on the screen. It relieves our pain and our approach becomes solution-oriented.)

Slide 26:

I feel happy when my friend has the same hobbies!

(True, you feel relatedness. You think finally you have someone to talk in common. This helps in relationship building both in professional and personal life. Imagine your colleague is a surgeon and you too, you will surely help each other since your areas of interest match. It is a part of human behavior.)

Slide 27:

Since Childhood, I knew Red Color is for "HEART" or "Emergency".

(True: Can you tell why? Close your eyes for a moment and drift back to the memories of childhood. You will soon realize that an apple was always red in color. Sky is blue and grass is green. This is how our parents & teachers introduce us to colors. This is applying color psychology using emotional intelligence. Each color carries an emotion and it affects human behavior. Now, open your eyes and reflect examples of wearing different colors - that express your emotional state.

Slide 28:

SO, DOES IT REQUIRE ANY ACADEMIC QUALIFICATION TO ANSWER?

No, your answers were based on your level of Emotional Intelligence!

Slide 29:

Any idea on how many categories of emotion we experience?

A recent study reveals that there are 27 categories of emotion and they blend with each other in our daily experience. 6 of them are basic - happiness, sadness, anger, surprise, fear and disgust.

The crux is we as humans; experience a mix of emotions caused by our thoughts. This in turn influences our decision-making process and shapes our personality. What if, we can understand and purposefully manage them to help us succeed?

It is all about making emotions work for you, instead of against you!

Slide 30:

Here is the definition:
Emotional intelligence or emotional quotient (EQ) is the capability/ability to identify, assess and manage the emotions of oneself and other people as well!

Emotional intelligence (EI) and emotional quotient (EQ) are terms that are often used interchangeably, but they have slight differences in their meaning. EQ is the numerical measure of the intelligence. For this there are various tests and assessments being done - Just like I did ask you certain questions!

Emotional Intelligence can be learned & developed. Our brain has this remarkable ability to do so, these skills are no different.

Slide 31:

The concept of EQ is deeply rooted in India. It is in our blood.

•Bhagvat Gita refers to an emotionally intelligent person as "Sthithapragyna".

By becoming aware of Emotional Intelligence, many of us can easily gain SQ (Spiritual Quotient). It takes things deeper into the world of compassion. But, we would stick to the clinical situations. Let's try to learn what patients are saying or behaving is because of their state of situation medically, emotionally and psychologically. Try to evolve maturely through these emotions.

•Also we have glorious codes of medical ethics since the days of Sushruta & Charaka Samhita. Imagine around twenty thousand years back, we knew all about ethical medical practices, patient care, and the importance of a surgeon's skill and compassion.

(If someone asks, Shushruta Samhita is attributed to the sage Shushruta and is believed to have been written around the 6th century BCE. Charaka Samhita, attributed to the sage Charaka, is estimated to have been compiled around the 2nd century BCE. Shushruta Samhita special is its detailed and systematic approach to surgical techniques, covering a wide range of topics including anatomy, physiology, diseases, and treatments. It describes various surgical instruments, surgical procedures, and even provides guidelines for post-operative care.

Slide 32:

Intelligence has always been thought to be very important but now it is proven that emotions are the motivational factor for success and happiness in person's life. IQ is cognitive thinking but EQ is both Cognitive & emotional experiential.

Researchers revealed that success in our life or at work rest on 80% EQ & only 20% IQ.

IQ helps perform better academically but EQ helps in handling stress & recover faster. It helps in effective communication. IQ can surely help you reach your highest goal but how long you hold on is the result of EQ. It simplifies the relationship & connections.

IQ grasp, plan and strategize while EQ adapt feelings and behave as per the situation! IQ provides logical reasoning. EQ sets that need for adaptability. Like, it will help you to read a negative emotion and turn into positive one and resolve the conflict within and outside.

Slide 33:

Just like, we study in Empathy, Emotional Intelligence also works at different levels. We cannot control our emotions but we can control how we let them influence us - in a positive way or negatively.

- Perceiving Emotions is how we detect the emotions in self & in others through Verbal/Non-Verbal Signs. It includes understanding emotions through pictures, images, voice tone, etc.

- The next level is using the Emotions - Here, we harness Emotions. Like we react & response to best fit the task. It also helps us to prioritize which emotion is important and how to change the mood or react as how to respond.

- Understanding emotions means ability to comprehend emotional language. If the patient is angry, understand the reason behind and how it evolves over time.

- Managing Emotions is the ability to regulate Emotions in ourselves & others. It is the highest response to emotions. This final level will let you understand EQ is

more that than just common sense. So, it doesn't matter if your IQ is high, EQ must be equal to higher!

Slide 34:

Daniel Goleman, a renowned psychologist, identified five key components or pillars of emotional intelligence (EQ):

- Self-awareness: This pillar involves recognizing and understanding one's own emotions, strengths, weaknesses, values, and beliefs. Investigate self-feelings.

- Self-regulation: Self-regulation refers to the ability to manage and control one's emotions, impulses, and reactions. Like - delaying response to stressful situations.

- Motivation: Motivation in the context of EQ is the drive and passion to pursue goals, persist in the face of challenges, and maintain a positive outlook. So, we need to keep pushing and moving forward.

- Empathy: Empathy allows individuals to connect with others, build relationships, and respond compassionately. All this results in a happy work culture.

- Relationship Management: It includes all the social skills to develop trust at all levels. All these contribute us in our emotional well-being and social competence.

Slide 35:

When we talk about clinical situations, Emotional Intelligence promotes patient-centered care in many ways. Including this, its benefits and importance help the entire clinical staff to perform intelligently during crises. In the next two slides, we are going to understand how?

Slide 36:

Clinicians or health professionals deal with people who are under extreme emotional stress and they may or may not express themselves. So, by using EQ by doctors and

other leaders we can fill in the communication gap for smooth operations. We often see EQ applications in:

1. Interactions between Doctor- Staff- Patients.
2. While Delivering difficult News
3. Managing Stress
4. Working together as a team
5. Avoiding mistakes and burnouts

In short, EQ is comparatively more powerful, decisive in nature and develop excellent social skills for team building.

Slide 37:

"EQ is the Essential Skillset for the age of AI" - Capgimini. This quote is absolutely true. How? Skip to the main points.

1. Quality Care and Organizational Commitment - With quality and effective care of the patient, organization prove their words. Always remember workplace is known for its quality work not by technologies.

2. Manage Exhausting Life Balance at Operational Theaters: It helps in getting out negative and exhausting emotions coming from the duty performed in the operation theaters. We can easily navigate through those hard situations smoothly and get back to the normal life.

3. Overall Team Productivity: The coordinated workflow divides the pressure in teams thereby improving the overall productivity. Also, it helps in staff retention.

4. Good Rapport with Medical Staff: Right from the doctors to nurses, caregivers and other health care providers - everyone strive hard towards one single goal thereby maintaining good rapport towards each other.

5. Leadership Skills: Model of EI is such that anyone being a physician, doctor, nurse can improve their emotional and physical aspect of caring. This in turn provides them with the necessary leadership roles.

Slide 38:

Intelligence is not just rational it is also emotional. To improve EQ, various programs are being designed such as Counseling, Simulations, and Role-Plays as per choice. Here are simple tips to improve EQ - broader Sense!

1. *Listen*: Always have listening ears. Pay attention to the patient. Take time to listen what the patient is trying to communicate verbally and through non-verbal cues.
2. *Empathize*: Practice empathizing and imagine how would feel in that situation.
3. *Reflect*: As you spend time with patients, analyze how they behave and assess the role of their emotions. This will help you to study the common behavioral patterns in the future medical practice.

Slide 39:

By the time you reach this slide, you must have captured all the insights that I have told you. You would be thinking, ok every term is worth discovering. We can learn it in next 5 years, 10 years or while doing our practice. We have a long way to go! Of course but your answer is right here! Paradigm Shift!

I have a question for you. Look at the next slide and tell me what this paradigm shift all about is?

Slide 40:

The definition says Focus on the Evolution of Intelligence from Old Times to the Current Scenario is called as Paradigm Shift. With digitization and AI, Patient-Centered Care is the main goal. This is why; you are seeing e-hospitals, labs growing faster.

Through this slide, you can imagine that it is easier to operate access and take care of the patient, except one that is how to deal with people on an emotional level. Yes, one can make robots and other high-end caring devise but still AI cannot fully replace the emotional intelligence (EI) of human beings, as EI encompasses complex human experiences, emotions, and interpersonal skills that are deeply rooted in human consciousness and understanding.

Therefore, if you want to be the real survivor and a leader, you must know EI and practice just after stepping out that door.

"The human touch is irreplaceable; it carries the power to heal, console, and ignite the spark of love and compassion within us."

Slide 41:

Since we are discussing our emotions and feelings intelligently, how can we skip the non-verbal communication? Except the verbal spoken parts, we express 60 to 65% through our body language, signs, facial expression, etc.

Slide 42:

Deborah Bull (dancer & an author) quotes "Body language is a very powerful tool. We had body language before we had speech, and apparently, 80% of what you understand in a conversation is read through the body, not the words."

If we exclude the body language, we cannot judge anyone alone through the words and their true intentions. I can really say this, since every tilt of your head, flicker of eyes, hand and facial movements reveals to me - what are you feeling. A smiling face means a lot and how are you feeling means a lot to me! So, shall we try another activity?

Slide 43:

Make a Circle. One by one come in the center and Say "I am Feeling _____". Others have to act as per their body language, what they do when they feel the same!

For example, I am stepping in the middle of the center and saying, I am so excited. So you have to express it what you do when you feel excited. Don't speak just do it. You can even jump, dance do anything except leaving this room! Thank you so much for co-operating!

(Ask them to cover words like feeling Impatient, feeling Insecure, happy, sad, nervous, confident, aggressive, romantic, defensive, etc.)

Slide 44:

Body Language in Clinical Situations:
Body Language adds another layer of communication. Always reflect on your body language vs. patients to gain insights.

Eye Contact:
Look into the eyes of the patient while talking. Analyze how the patient is looking at you. Is it Intense or Just Right?

Body Posture:
Your Body Posture must be relaxed and welcoming. Also, watch if the patient is stiff or immovable to reflect if he is comfortable.

Facial Expression:
Facial Expression reveals the emotions of the person. So, keep a gentle smile and judge if the patient is unexpressive or masking the feelings.

Hand Gesture:
Your hand gestures support your ideas and execution so make sure you use them sophisticatedly. Notice signs, if the patient is tapping fingers, or biting nails which means - Nervousness!

Along with body movements, consider how you use the space and observe the patient reaction. Your body language must be according to the situation - like adjusting medication, facilitating hospital discharge, and try to discover your consultation style!

Slide 45:

Now, it's time for you to answer through videos & role plays! All the best!

Slide 46:

OPD Patient:

While handling an OPD patient, a combination of medical expertise is needed along with good communication skills and empathy. These are the basics, rest; approach can be tailored according to the patient's behavior, state of emergency & priority.

What Went Wrong?

1. No Greetings
2. No Eye Contact

3. Casual Attitude
4. Chewing Gum
5. No Active Listening
6. Mobile Disturbance
7. Avoiding Patient & Relative Concerns
8. No Evaluation of Medical History
9. No Empathy during the physical examination
10. No information was revealed leading to the Patient

Solution:
A warm smile and respectful greeting tone should be the start of the conversation. The doctor should have actively listened to the patient's concerns, history, and symptoms. No external disturbance should be there. After a thorough assessment, it is important to talk empathetically to gain more information. A gentle examination is a must and then proper counseling about the procedure of the admission.

One should always maintain professionalism throughout the interaction, ensuring privacy and respect for the patient's dignity. Your first consultation is just like your first impression.

Slide 47:

Admitted Patient:
Handling an appendicitis patient requires a collaborative approach from all doctors and nurses. Let us analyze the role play and try to understand if this approach is right. What else could be done?

Doctor's Empathetic Skills:
The doctor was able to convince the patient and maintain a strong relationship providing a solution. He was attentive and alert in his approach. His language was fluent. He asked open-ended questions calmly and gave reassurance to the patient.

Improvement:
He could have avoided using the same phrases and words repeatedly. Using the same words looks a bit fake or artificial. Instead of blaming the manpower situation and defending the nurse, he could have simply suggested another nurse. He could have let her talk more in order to calm her down!!

Slide 48:

Emergency Situations:
Treating a patient experiencing heart pain involves swift and decisive actions. Right from proper assessment to consulting the specialists, a little negligence can result in serious consequences.

What went wrong?
I am wondering except for the linguistic skill and confidence, nothing is right. Still, let us point out:

1. No Empathy - None of the levels was reached
2. No Emotions were Perceived
3. Judgmental
4. Casual Approach
5. Carefree Attitude
6. Untrained Staff
7. Ignoring the facts told by Patients
8. Aggressive and impatient
9. No Moral Ethics
10. A perfect example of High IQ and No EQ

Possible Solution:

1. An empathetic understanding of the patient's situation must be developed.
2. Go for intellectual understanding rather than just the guesswork
3. Never Answer the feeling with a fact
4. Notice the Non-Verbal Signs Carefully
5. Try to stabilize the patient and perform a quick ECG/EKG
6. Administering medication and consulting a heart specialist if needed.
7. Schedule a follow-up meeting as to where to contact during emergency

Slide 49:

We, at, NTPC know the art of multitasking. As you can see in the slide, we have to see the patient and handle the administrative activity like 5S BE, ISO & Safety. At times, we have to do preventive medical examinations for employees and CISF contract workers. Our moral duty also involves participation and leading the awareness sessions and many more.

It is not about doing everything at once, but, it is about switching the roles given to us like experts. The real work of EI, Empathy, Sympathy, and Body Language is reflected clearly in the daily responsibilities.

In short, it is not just for us to become leaders but to set an example to our subordinates on how to deliver the best as NTPC doctors.

Slide 50:

As we come to the final notes of this symphony, let us pause and reflect on the power of the toolkit provided to you! Our goal must be to embrace empathy, foster connections and deliver 100% patient satisfaction nurturing the human spirit.

Together, let us embrace a journey through empathy and Emotional Intelligence creating a transformative positive environment. I would say "The only person you are destined to become is the person you decide to be."
—Ralph Waldo Emerson

Thank You for joining me!

_____The END_____