CHAPTER 4

DATA ANALYSIS

4.1 INTRODUCTION

The focus of this research is the way in which doctors and patients use address terms within the particular form and sequential structure of the medical interview. The present research uses the methodology of conversation analysis (CA) to examine the sequential positioning of address terms by both doctors and patients within the interactional organization of the interviews as a whole. In particular, the analysis will show how patients tend to use address terms as a way of asking more requirements about their illness, in contrast to the way in which doctors use address terms as a way of not only gaining access to the turn, but also of mitigating the result of the illness to the patients. The data have been transcribed using CA transcription conventions (see Appendix A). In terms of methodology for analyzing the data of the research a qualitative method is adapted.

4.2 DATA ANALYSIS

Example 1 exemplifies a number of features typical of medical interview. It shows how doctors and patients initially exchange greetings (lines 1, 4); the patients greeting the doctor and doctor responds to the greeting (line 4). It also shows doctor and patient question and answer format-such aspects have been dealt with in detail in previous analyses and discussions of the medical conversation. Medical conversation has been investigated by many researchers, especially from the perspective of discourse and conversation analysis (Courtyard and Ashby, 1976; Myerscouph, 1992, Wodak, 1997; Chimambo and Reseberry, 1998, Valero-Garces, 2002; Adegbite, 1991 & Adegbte, 2009); therefore, it will not be addressed in detail in this research. Hence, it

would suffice to mention that the medical interview is a recognizable genre with a particular question and answer sequential structure that participants orient to during the course of the interaction. However, this chapter will find out how doctor and patient replace the address terms through the turn-construction unit, whether in pre-TCU, mid-TCU and pre-TCU to achieve acknowledgement, solidarity, agreement and avoid overlapping. The following example shows the complete discussion between the doctor and his patient.

Example (1), see Transcript (23): Medical conversation between a male doctor and a 51 year old woman D: doctor, P: patient

1	1.P:	→ *slam↓ ya doctor*
2		peace (att) doctor
3		**peace be upon you doctor**

4	2.D:	*`lykūm alslam (.) kyf halak↑*
5		upon-you the-peace how situation-you
6		**peace be upon you doctor**

7	3.P:	*alhmdu lilah↓*
8		the-thanks for-god
		Thanks god

9	4.D:	*almrah alfatat akhta alghaūt mush kida? (s{ūt sm`a) (.5)*
10		time the-last take-you the-gout is so (sound of head sit)
11		*fi āay ālam fi alrjlyn?*
12		there-is any pain in the-foot?
13		**the last time did you take the medication for your gout?**

14	5.P:	*=la*
16		no
17		**no**

18	6.D:	*ūla fi āay alm fi alasba` alkbyr*
19		or there-is any pain in the-finger the-big
20		**or there is any pain in the big finger?**

21	7.P	*=la*
22		no
23		**no**

24	8.D:	*khlas ana baktf lyk aldūa da tmshi takhdi*
25		okay I write for-you the-medicine this go-you take-you
26		**okay, I write this medicine go and take it**

27	9.P:	→ *shūkrn ya doctor*
27		thanks (att) doctor
28		**thank you doctor**

The above example shows how the Sudanese medical interview occurs. However, in (lines 1 to 8) doctor and patient start greeting each other and have normal chatting. The patient uses the address terms "doctor" in his greeting to the doctor, while the doctor use no address terms in his greeting. Then in line 9 the doctor starts to ask the patient about his illness, the patient in line 14 gives the doctor a short answer by saying yes. However, the doctor in line 18 asks the patient if he has any pain in his finger. The patient in line 21 again answers with short sentence "no". In line 24 the doctor promises the patient to give him a right medication. However, the patient in line thanked the doctor by attaching the address terms "doctor" in the close sequences.

4.2.1   Address Terms at the Beginning of the Medical Interview

Address terms usually occur at the opening stages of a conversation due to the strong and overt recognition work achieved by naming (Schegloff, 1979; 2007). According to the address terms used, participants can demonstrate whether they are intimates, such as through a term of endearment, or more distant, such as through title and last name (Ervin-Tripp, 1972). This also appeared in Sudanese doctor-patient as shown in the following examples:

Example (2), see transcript 1: Opening

D: doctor, P: patient

1	1.P :	→	*alslam alykum ya doctor*
2			the-peace upon you (att) doctor
3			**peace be upon you, doctor**

4	2.D:	→	*a'lkum alsalam (.) Fatima*
5			upon-you -peace Fatima
6			**upon you the peace, Fatima**

7	3.P:		*.hhh sudaa' ya doctor*
8			hhh headache (att) doctor
9			**I have headache doctor**

10	4.D:		*Fatima Yusif `Athman? ((s{ūt waraq)) (.10)*
11			Fatima Yusif Athman? Sound paper
12			**Fatima Yousif Athman ((sound of paper))**

In example 3, patient greets the doctor in the beginning of the sequences, where in Line 1 the patient says "peace be upon you, doctor". However, in line 4 the doctor says "upon you the peace Fatima". Then, in (line 7) the patient with breathing complains about his illness. The doctor in (line 10), reads the patient's name for confirmation.

Example (3), see transcript 2: opening

```
1        1.P:    →   doctūr k::yf halak
2                    doctor how you
3                    how are you doctor
4        2.D:        marhab ya↑ astaz
5                    welcome  mister
6                    Welcome mister

7        3.P:        klu sana ūanta ty::p
8                    each ear and-you good
10                   ↑Happy new year↑

11       4.D:        als{aha   ūalslama
12                   the-health and-safity
13                   with health and safety
```

In example 3 the patient in line1 greets the doctor by saying "How are you, doctor". However, the doctor in line 4 says "Welcome mister". Then the patient in (line 7) continues to say "happy new year" adding no address term. Then, the doctor in line 1 says "you too"

However, Examples 2 and 3 show both doctors and patients using an address term within the greeting sequence, although the 'level' of address term is not equivalent. The patients usually use the institutional role (doctor) to address the doctors in the first pair part of the greeting sequence, where, the doctors addresses the patients by her first name as "Fatima" in example 1 or by the title as "Mistress" in example (2).

In the current data set (25 interviews), if there was a greeting sequence at the beginning of the interview, patients always accompanied the greeting with an address term. Of the 25 interviews, 23 interviews followed this format of the interview commencing with a greeting plus address term. On the other hand in 2 interviews, patients did not greet the doctors, and so there was no address term in this position. Doctors are more likely to address patients by their name at the beginning of the medical interview, although how often address terms are used depends upon the particular patient being interviewed. Greeting doctors and patients by name within the Sudanese context appears to be different from other Arabic-speaking countries, where the titles are important in addressing someone in other Arabic countries.

4.2.2   Address Terms at the End of the Medical Interview

Address terms also usually occur within the closing of the interviews, as demonstrated by the following example.

Example (4), see transcript 1: Closing

121   36. P.   *shukrn ya doctor Athman*

122   Thanks (att) doctor Athman
123   **Thank you doctor Athman**

Example 4 shows the patient using title plus last name (Dr. Athman) to address the doctor in the closing sequence, and the doctor reciprocally addressing the patient by first name Ex. (Fatima). **The** patient overwhelmingly addresses the doctor by title in the closing sequence. For example, all the patients in the current data set (24 interviews) use an address term when thanking the doctors for the medication. In contrast, the doctors are much less likely to use address terms in the closing sequence of the medical interview.

However, doctors and patients do not only address each other within the greeting or closing sequences. Address terms are also used throughout the interview as a whole. In the following, section 4.3 examines how patients use pre-positioned address terms (pre-TCU) to require more information about their illness, whereas doctors use pre-positioned address terms as a way of mitigating the shock of the illness. Section 4.4 examines how doctors use (pos-TCU) address terms within mitigating requests or as a mechanism for resolving overlap. Finally, section 4.5 examines (mid-TCU) address terms. Although mid-TCU address terms are less likely to occur within the medical interview, the following analysis will show one of the contexts in which they may occur. Such a context occurs when the typical questions and answers sequential structure of the medical interview changes so that the interaction more closely resembles everyday conversation. It is in this context that post-TCU address terms are likely to occur, when speakers feel free to give their attitude or stance towards the other participant.

4.3 PRE-TCU ADDRESS TERMS

There are numerous instances of doctors using address terms within a TCU, although patients are more likely to use pre -TCU address terms. It could be argued that calling a patient by name is a way of showing that the doctor knows the patient's name and that s/he is able to use it interactionally to demonstrate a positive attitude towards a person on personal level. This is particularly clear when doctors use a patient's more intimate first name. However, it is more likely that doctors will use a patient's name to achieve a certain action, for example to achieve solidarity.

The following analysis demonstrates how both patients and doctors use address terms in the pre-TCU position in certain sequential environments to achieve certain interactional aims.

4.3.1 Doctor's pre- TCU

The participants in the opening stages of a conversation are frequently addressing each other by name or with a term of endearment that due to the strong and overt recognition work achieved by naming (Schegloff, 1979; 2007). Participants can show whether they are intimates depending upon the address term used this can be through a term of endearment, or more distant, such as through title and last name (Ervin-Tripp, 1972), as shown in the example (5).

4.3.2 Solidarity

The greeting between the doctor and patient followed by the address terms is orienting to successful recognition and to the open and friendly nature of their relationship.

Example (5), see transcript 3: solidarity

```
1            1.D:  → ya↑ Mohammed KYF (.5) wallahi alsūkar   kitr   khlas
2                    hay  Mohammed how  i-sweer the-daibatics  increase more
3                    hay Mohammed KAIF (.5) diabetics is become high

4       2.P:  →.hhh alhagyga  shrbta  shai ya doctor
5                    the-reality i-drunk tea (att) doctor
6                    the reality is I drunk tea doctor

7       3.D:   248 (.) shai bilsukar ?
8                    248    tea  with-suger ?
9                    48 (.) Tea with sugar?
```

In example 5 (line 1) doctor uses pre-TCU "ya Mohammed" to inform the patient about his illness as the way of mitigating the reaction of hearing the bad news. In another word, the doctor deliberately mentioned the patient's name to show him solidarity to reduce the shock of the bad news. However, the doctor in the above example read the medical examination of the patient, then informed him with the result of the examinations (line 1) "ya↑ Mohammed KYF (.5) wallahi alsūkar kitr khlas" which means "Mohamed, how are you" the diabetics becomes very high". However, the patient took a deep breath and told the doctor that the diabetics increased "hhh alhagyga shrbta shai ya doctor" (line 4) which means "the reality is I drunk tea doctor". Moreover, the use-of the patient's first name in pre-TCU in example (5), (line 1), shows the solidarity and friendliness between the doctor and patient, that makes patient more comfortable to reveal about his illness. On the other hand, patients never used the doctors' proper name in the entire interview. In other words, one can say that doctor is trying to show more solidarity and friendship with the patient, while, the patient is committed by the institutional role of medical interview (see Table 3.3).

4.4 PATIENT'S PRE-TCU

Patients use pre-TCU as a way of requesting for more explanations about their illness. The following example shows 'doctor' address term being used within the context of making a request of certain medication prescription. Address terms can play a mitigating role when attached before a TCU that carries an illocutionary force that might negatively impact on the other participant, such as when making a request. The following example shows the patient using the address term, 'doctor' (line 48) as a preface to introduce a new request (line 48).

Example (6), see transcript 4.

42	12.P:	*ā:ai↓ yla alhimūda babl` habtyn fi alyūm= ma`mlta haja*
43		yes then the-sourness take tablets-two in the-day not-do **thing**
44		**but i used the tablets two times a day and does not work**

45	13.D:	*=LA LA binktub lyk wahda tanya*
46		no no we-write to-you one again
47		**no no, I will give you a new one**

48	14.P: →	*ya doctor aktub lai wahda gūya, Allah yadyk al`fya*
49		**(att) doctor write to-me one strong, god give-you the- health**
50		doctor give me strong one god may give you good health

52	15.D:	*alsūkary ta`khdi haba sabah wa haba ba`d al`sha*
53		the-daibatics take-it tablets morning and tablets after **dinner**
52		**for daibatics you can take one tablets morning and**
		one tablets after dinner

The patient in the above-example (line 42) complains to the doctor about the ineffectiveness of the medication that he had taken it. However, the doctor in high intonation said that he would change it for you. Then the patient requires from the doctor to give her strong medication as in (line 48).

4.5 POST- TCU ADDRESS TERMS

Address terms in Sudanese medical interview most commonly occurs in the post-TCU position. The following analysis will examine where such post- TCU address terms are most likely to occur, within the interaction, in order to understand what it is that address terms achieve when occurring in such positions.

Example (6), see transcript (4). Request

1	1.D:	*alslam a'lykum*
2		peace upon-you
3		**peace be upon you**

4	2.P:	*alykum alslam↑*
5		on you the-pease
6		**on you the peace**

7	3.D: →	*=tshki min shnu ya akht*
8		complain from what (att) sister
9		**what do you complain, sister**

4.5.1 Doctors' post-TCU address terms

4.5.1.1 The overlap:

West and Zimmerman (1983) describe interruption as simultaneous speech, which can be divided into interruptive and non-interruptive, where interruptive as intrusion into the deep structure of a "speaker utterance and penetrate within syntactic boundaries of the current speaker utterance". While non-interruptive simultaneous speech is described as simultaneous speech 'which starts and ends while the participant who has the floor is talking (Feldistein & Welkowitz, 1987: 441) in other words, the second utterance does not disturb the second. However, overlap is likely to be closer to non-interruptive simultaneous speech where, keeps the utterance of the first speaker intact (see Table 3.3 below).

One of the well-described environments in which overlaps can occur (Schegloff, 2000) is when two speakers start speaking at the same time. Following a TRP, the floor is open for either speaker to take a turn. In accordance with Sacks et al. (1974) turn-taking rules, when a current speaker completes a TCU, either party can start talk. In other words, either party may self-select (Rule 1b), or the current speaker may continue if no one self-selects (Rule 1c). Therefore, if both participants practice their rights under these rules simultaneously, then it is possible for two speakers to commence speaking at the same time. However, sometimes in Sudanese medical interviews these rules can be broken, as shown in example 7.

Example (7), see the transcript 1:

```
50      16.P:    ma`ha   esbreen (.) best`malū ba`da    kūlū alūja`    ma`ayz
51               with-it aspirin     i-use-it   after-this all  the-pain not-want
52               yakhleni(.5) zman    gabl (kam sana) a'malta ndara bitaa't nazr]
53               leave-me(.5)past   befor(many year) do-I spectacle  for eyes
```

54			**with aspirin (.) but in spite all these still paining (.5) before**
			(many years) I used spectacle
56	17.D:	→	[`ndik qūda] bardū wala gūlti shnū ya Fatima
57			have-you gland also or said what (att) Fatima
58			**Do you have gland inflammation or what did you say Fatima**
59	18.P:		*NDARAT [NZAR]*
60			glass
61			**glass**
62	19.D:	→	*[ma`ndik sūkari ya Fatima]*
63			not-have diabetics (att) Fatima
64			**do you have diabetics Fatima**
65	20.P:		*LA LA*
66			no no
67			**no no**

In the above-example as the patient was describing her illness in (lines 50-52), the doctor attempts to take the turn at the end of the patient's TCU (line 53). However, the patient continues his turn following the TRP (line 52) resulting in overlapping talk in (line 52) The overlapping talk occurs because the doctor anticipates the possible completion point of the patient's turn at talk and so starts his turn in (line 53). According to Schegloff (2000), when such overlap occurs that is clearly orienting to the turn taking rules, one speaker will withdraw. In this example, the patient withdraws (line 52) and the doctor continues to hold onto the turn (line 53). However, the doctor uses the first name of the patient "Fatima" to elevate the talk overlapping (line 52 and 56) "[`ndik qūda] bardū wala gūlti shnū ya Fatima]" which means "do you have gland inflammation or what did you say Fatima".

However, address terms in the post-TCU position are a way for taking the turn during overlapping talk. Address terms are used to get response when the other participant is communicating where; doctor uses post-address terms as technique for resolving overlap. However, with use of address terms having the desired effect of ensuring that the other participant stops to talk.

4.5.1.2 Requests:

Also doctors sometimes use post-TCU when they ask patients to repeat their questions as in example (10). (line 29), whereas the doctor does not listen to the patient first TCU, then in second TCU the doctor asks the patient to repeat her talk by attaching the address term "haja" at the end of the TCU. Also doctors use post-TCU to require some sensitive information as demonstrated in example (8) (see Table 3.3).

Example (8), see transcript (1).

```
13      5.P           āai (.10) da    alfahis      alkan    [fahasto]
14                    yes      this  the-examination the-had examine-it
15                    yes      this  the examination  I had      before

16      6.D:    →                    [`andik daqit  ya haja?]
17                                   have-you blood pleasure  pilgrim?
18                                   do you have blood pressure, pilgrim?

19      7.P:          ā::ai

20                    yes
21                    yes

22      8.D:          ayūa:

23                    Yes
24                    ok:::ay

25      9.D:    →     bitakhdi    `alaj      ūala ma  betakhdi ya haja?

26                    you-take   treatment  or    not take-you (att) pilgrim?
27                    Have you taken any treatment?
```

In example 8 the patient brought his examinations of blood pressure to the doctor in (line 13), Then the doctor goes over the results and asks the patient whether she had blood pressure or not by using post-TCU address term " haja" in (line16), where, the address term "Haja" is used only in Sudanese culture for old people to show respect. However, the doctor was already aware that the patient had blood pressure from the examination report and he used the post-TCU address term "haja" to reduce the shock of the bad news. Then the patient answer "yes" in line (19) shows she also

knows about her illness. Then the doctor starts asking more questions about the illness in line (25). Also example (6) (line 6) shows the same situation, where the doctor uses the post-address term "akht" for requiring more information. Therefore, one can argue that doctors use post-address "haja" or "akht" in the above-examples as mitigators as well as to show solidarity and closeness.

4.6 PATIENTS' POST-TCU ADDRESS TERM

One of the most common places for patients' address terms to occur is following requests, agreements, acknowledgements, and appreciations. However, 'ya' followed by "doctor" is remarkable address terms used by patients, whereas "ya" and "doctor" occurs together through all interviews.

4.6.1 Request

Patients usually require a lot of information from the doctors, due to their fear of the illness. Therefore, patients use post-TCU address terms to mitigate their force of requests. As administrated in example (9).

Example (9), see transcript (3).

69	22.D:	*etnan gabul alfator gabul algada wa gabul al'sha*
70		two before the-breakfast, before launch and before the-dinner
71		**two before breakfast, before launch and before dinner**
72	23.P:	→˚*gabul alfatūr˚ ya doctor?*
73		before breakfast (att) doctor?
74		**before breakfast doctor?**
75	24.D:	*ā:ai*
76		yes
77		**yes=**
78	25.P:	=*gabul algada ya doctor ?*
79		before the-launch (att) doctor
80		**before launch doctor?**
81	26.D:	*ā:ai*
82		yes
29		**yes**

In line 69 the doctor describes the of the medication to the patient "*etnan gabul alfator gabul algada wa gabul al'sha"*. Whereas, in line 72 the patient asks the doctor when he should use the tablets. °gabul alfatūr° ya doctor?" In (line 78) the patient requires the doctor again "=gabul algada ya doctor". However, patient attaches the post-TCU address term 'doctor' frequently after requiring the doctor about the use of the medication to mitigate the request.

4.6.2 Agreement

Address terms of agreement usually occurs in post-TCU as demonstrated in the example (13) (line 26). The doctor informed that the patient should take an extra dose of insulin in (line 24). However, the patient agreed to use the medication, "aiwa:: ya doctor" in (line 30). In the current data set, there are no instances of address terms occurring in the pre-TCU or mid-TCU position when used with agreement. However, this to say that patients use post- TCU address terms "doctor" to insure that he/she will follow the doctor advice.

4.6.3 Acknowledgement

Patients use post-TCU address terms to reduce the force of the responses to the doctors' requirements, which usually come after words such as: "atkhyl" (the reality). However, the word "atkhyl" in Sudanese culture usually used with close friends or relatives, because is friendly word and unsuitable to use it with not close persons.

Example (10), see transcript (2).

22	8.D:	°*aldqet kūys*°	
23		the-pressure good	
24		**the blood pressure is good**	
25	9.P: →	*atkhyl ma akhta alhbūb ly asb::ū` SEM`TANI*	
26		imagine-you not take the-tablets since a week you-hear-me	

```
27              doctor
28              doctor
29              could you imagine I haven taken the pills since week ago (0.2),
30              did  you   hear me doctor

31    10.D: →  shinu  ya   haj
32              what (att) pilgrim
33              what pilgrim

34    11.P:     hebūb aldqet        [khlata lai asbu`]
35              tablets the pressure    i-left since week
36              i haven not taken the pills a week ago

37    12.D:  →                  [˚lyk kam   yūm ma akhtha ya   haJ? ˚]
38                               sine-many day not take    (att) pilgrim
39                               How many days you have not taken it?

40    13.P:    sb`a yūm
41              Seven day
42              Seven days
```

In the above-example the patient uses the post-TCU address term 'doctor' to mitigate the force of telling the truth to the doctor. In line (22) the doctor informs the patient that the blood pressure is good. However, in spite of the doctors' speech, the patient hesitates in line (25) to inform the doctor that he did not take the tablets of blood pressure for a long time. One can argue that, patients sometimes use the post-TCU address terms when they avoid to inform the doctors about the truth of the increasing of the illness that due to the close relation between the patients and the doctors. However, sometimes the patients do not follow the doctors' exact advice and instruction to maintain their health, e.g. doctor usually advice those who have diabetic to stop using sugar, but usually patients do not follow their advice, therefore, they are afraid to make them angry. In the next turn (line 29) the doctor is surprised and asks her to repeat what she said. In line (32 and 35) doctor and patient are overlapping, where the doctor ask the patient with high intonation "how many days you have not taken it", this is to say that the patients use post-TCU to reduce the doctors' reaction of being angry.

4.6.4 Appreciation

The Patients also use post-TCU to thank the doctors for their efforts to find their illness and describe the medication. This occurs usually in the close sequences, as demonstrated in example (12).

Example (12), see transcript 1:

115	35.D:	*ā::ai haktūb <u>lyk</u> alūarqa di tamshi bāha ((sūt*
116		yes i-will-write to-you the-paper this go with-it ((sound
117		kitaba))
118		writing))
119		**Yes I will write this paper for you**

120	36.P:	→ *shukrn ya doctor Athman*
130		thanks (att) doctor Athman
140		**thank you doctor Athman**

In example 12 (line 1) Where, the doctor promises to prescribe the right medication in (line 115), ā::ai haktūb lyk alūarqa di tamshi bāha ((sūt kitaba)). The patient in (line 120) thanks the doctor by using post- TCU address terms doctor "shūkrn ya doctor Athman". However, the patients usually use post-TCU address term to express their appreciation to the doctors.

4.7 DOCTORS' MID-TCU ADDRESS TERMS

4.7.1 Acknowledgement

Example 13 shows how doctors use mid-TCU address terms to inform the patients about their illness.

Example (13), transcript (3):

26	8.D: →	*a`arf ya Mohamed(.) ela nedyk jura'a bitaa't anslyn*
27		know (att) Mohamed unless give-you dose of insulin
28		**do know, Mohammed you need dose of insulin**
29	9. P: →	*aiwa:: ya doctor*
30		yes (att) doctor
31		**yes doctor**

The doctor in example 13 (line 26) hesitates to inform the patient that he will give him a dose of insulin, therefore, he uses mid-TCU address term "ya Mohamed". The patient in next turn (line 30) agrees to have the insulin dose. However, doctors, use mid-TCU to mitigate the patients' reaction, when they inform them the bad news.

4.8 PATIENTS' MID-TCU ADDRESS TERMS

The patients in this data frequently elaborate responses to the doctors. Therefore, they use mid-TCU address terms to elongate their speech when they are complaining about their illness or explaining something.

Example (14), see transcript (7):

```
13          5.P: →  albatun      di↓  bdaighni    tūali    ya doctor  gadur ma ākul
14                  the-stomach  this blathering-me always ) (att) doctor  when   eat
15                  there is always pain in my stomach doctor, especially when I eat

16          6.D:  ba`d matakli mush kida ?
17                after eat-you  is    like-this?
18                is it after you eat?

19          7.P:  aldahar   da ymsikni  °t{aūali °
20                the-back  this grasp-me always
21                also I have always backache
```

Example 14 (line 13) shows address terms occurring following complaints, such as, "albatun   di bdaighni tūali ya doctor" whereas, the patient uses the address term "doctor" in the middle of the first TCU to extend his speech to his next TCU. The second turn (line 16) the doctor asks the patient to ensure his first speech "ba`d matakli mush kida?" is correct. However, the patient does not respond to the doctor and continues his speech complaining about his back. Although, example 15 (line 54) "ansulyn↓ ana   safri katyr ya doctor bamshi alshimaleya" shows the patient uses mid-TCU to justify the reason that makes him not able to take the insulin dose.

4.8.1 Disagreement

The Patients' opinions that contrasted the doctors with advices are considered disagreements refusing certain medication are also considered disagreements. The example below shows a patients disagreement.

Example (15), see transcript (3)**.**

```
54        17.P:   → ansulyn↓ ana    safri     katyr ya  doctor bamshi alshimaleya
55                  insulin  i-am    travelled a lot   (att) doctor  i-go      the-north
56                  I am travelling a lot to the north, doctor

57        18.D      matshelo ma`ak-  wallahi asi   alsukri    kutyr   ya Mohamed
58                  take-it with-you   i-sweet now  the-sugar  much (att) Mohamed
59                  you can take with you, because the diabetics is high Mohamed

60        19.P.   → ˚Khlas tyb˚ ya doctor
61                  okay good (att) doctor
62                  Its okay doctor
```

The patient uses mid-TCU when introducing a polite excuse to the doctor regarding refusing the type of medication, as shown in example 15 above (line 54) "ansulyn↓ ana   safri   katyr ya   doctor bamshi alshimaleya", which mean "I am traveling a lot to the north, doctor". Also patients are less likely use mid-TCU to extend their speech, when they are complaining about more symptoms and also when they are seeking for more attention and care of doctors. In example 15 (line 13) the patient complains about her stomach then uses mid-address term " doctor" to extend her talk in (line 19) to give more details about her illness.

4.8.2 Acknowledgement

In the example 5 line (1-16) the doctor is asking the patient about the reason that made the diabetes's level increased. The patient (in line 2) felt too shy to respond to the doctor's question, because he did not listen to the doctor's advice to take care of himself. Therefore, the patient hesitates when he answers the doctor's question by using mid-TCU address term "fi alhagyga↓ ya dicotor aldictūr   galai   matakul a'ash- bas

mrat bs{raf ākl'' which means "the reality the doctor ask me to give up eating bread, but sometimes I do it".

4.9 SUMMARIES OF FINDINGS

The above analysis has shown that address terms are used by both doctors and patients to do multiple interactional tasks within the medical interview, (see table 3 and). Doctors use address terms as a mechanism for managing the organizational aspects of the medical interview. For example, they use address terms in the opening sequence to achieve the joint task of greeting the patients. In the interviews under consideration in this research, patients either address doctors by their institutional role (doctor) or by title plus last name (Dr. Athman). In addition, patients generally address doctors by institutional role in the beginning and close of the interview (Examples doctor).

Generally, address terms in these environments used in post-TCU address terms in keeping with the way in which the doctors use post-TCU address terms to manage the organizational structure of the interview as a whole. Patients used pre-TCU address terms to notice their doctors that they are about to request or move to a different complaint. Such use of address terms within the medical interview contrasts with the way in which doctors use address terms, where doctors usually use post-address terms to request patients.

Although patients usually do use address terms in the post-TCU position (Example ˚Khlas tyb˚ ya doctor) to indicate their stance towards the doctor, as discussed above, patients overwhelmingly address the doctors by their title after they commence their TCU. Doctors, on the other hand, position terms of address before the TCU, within

a TCU, or post-TCU. This is because they are using address terms to manage the interactional aspects of the interview: to take the turn when the patients are still talking, Examples 10 and 11 are cases in point. In the example 10 (line 35) "lyk kam yūm ma akhtha ya haJ" to resolve overlap when both of them are talking, Examples (8) (line 16), [`andik daqit ya haja?]), also shows the same.

However, address terms, may show the relative status of the speaker and the person being addressed (Lerner, 2003; Schegloff, 2004; 64). Therefore, the level of address terms used by doctors towards patients is indicative of the relationship between the two parties. Doctors always use first names to address patients (e.g. Fatima), whereas patients never use first names to address doctors.

One could say that patients are simply orienting to the institutionality of the medical interview and that doctors are simply being friendly and attempting to minimize the social distance between doctors and patients.   Although patients use more formal address terms (e.g. title plus last name) at the beginning of a turn when asking question or indicating a shift of a new complain, doctors tend to use informal address terms (first names) when trying to take the turn and when resolving overlap.

Doctors are not limited in where they place such terms of address-they can be positioned at any point within the TCU or within the sequence as a whole, depending upon the requirements of the interaction. For example, in Example (11) (line 4) the patient uses "doctor" in post- TCU address to reveal information, ".hhh alhagyga shrbta shai ya doctor".

Table 4.3: Doctor TCU-Address Terms

TCU	TYPE	Frequency	
Pre-TCU	1- solidarity	15	
Mid-TCU	1-acknowledgement	10	
	1-overlap	4	
Post-TCU	2- request	85	
	3- solidarity	80	

Table 4.4: Patient TCU-Address Terms

TCU	TYPE	Frequency
Pre-TCU	1- request	40
Mid-TCU	1- disagreement	10
	2- acknowledgement	30
Post-TCU	1- request	10