HSR (LONDON),
HOUGHTON STREET REVIEW JOURNAL
ISSN: 2058-5519|Impact factor-15.9
http://houghtonstreetreview.com/index.php/hsr

PEDAGOGICAL FOUNDATIONS FOR DEVELOPING THE PROFESSIONAL COMPETENCE OF FUTURE PHYSICIANS

Dadadjanova Feruza Maxamadyusupovna

Doctoral Researcher, Fergana Public Health Medical Institute

Email: feruzadadadjanova30@mail.ru

Abstract: This article examines the pedagogical foundations for developing the professional competence of future physicians. In medical education, English-language teaching is viewed not merely as the acquisition of linguistic knowledge but as an integrated pedagogical process aimed at developing students' cognitive, communicative, and discursive competencies. The article considers the nature of discursive competence, its role in medical education, and methodological approaches to working with scientific and professional texts in English. It also discusses a system of exercises designed to develop medical students' grammatical and discursive competencies, together with the educational value of clinical cases, professional texts, and independent learning. The analysis suggests that developing discursive competence can improve students' ability to comprehend scientific texts, engage in professional communication, and use English as a tool for professional practice and research.

Keywords: future physicians; professional competence; discursive competence; grammatical competence; medical education; English language teaching methodology; medical discourse; professional communication; pedagogical approaches; independent learning.

Introduction

Today, English-language teaching in medical education is understood not simply as the application of particular strategies and methods, but as an integrated process of developing foreign-language competence that encompasses students' cognitive, communicative, and discursive growth.

Discursive competence is particularly important. It can be understood as a future physician's ability to comprehend, analyse, and produce coherent spoken and written texts appropriate to professional contexts (Canale & Swain, 1980). For students at medical higher education institutions, including those studying paediatrics, discursive competence in English involves the following abilities:

- to understand the structure and logic of scientific and medical texts;
- to identify key information in English-language articles;
- to relate the content of a text to a specific clinical situation;
- to interpret, discuss, and construct spoken and written messages on professional topics.

Developing discursive competence is especially important for medical students who need to read scientific articles, protocols, and clinical guidelines in English. Scientific texts are often complex, terminology-rich, and organised according to specialised conventions, such as the Introduction, Methods, Results, and Discussion structure. Therefore, learning to read such texts should go beyond understanding individual words or sentences and should include the ability to interpret the text as a coherent whole, taking account of its pragmatic and cognitive features.

HSR (LONDON),
HOUGHTON STREET REVIEW JOURNAL
ISSN: 2058-5519|Impact factor-15.9
http://houghtonstreetreview.com/index.php/hsr

Developing Discursive Competence through Professionally Oriented Tasks

Accordingly, English-language materials for medical students should include not only texts and exercises intended to expand vocabulary, but also tasks that require learners to analyse, reconstruct, and produce medical discourse. Examples include:

- reading clinical cases and discussing them in the form of a case presentation;
- writing summaries and abstracts of English-language articles;
- simulating doctor–patient and doctor–doctor dialogues based on realistic scenarios;
- identifying the logical structure of a text, for example, the problem, methods, and conclusions.

Thus, an emphasis on discursive competence in teaching English to medical students can improve their comprehension of scientific texts, develop their ability to communicate professionally and substantiate their views, support the integration of medical knowledge and language learning, and prepare future specialists to use English in professional practice and research.

Integrating Grammatical and Discursive Competence

To develop the two interrelated dimensions of communicative competence—grammatical and discursive competence—students should work with texts that are thematically connected to their medical specialisations. Systematic engagement with recurring professional genres and vocabulary, including medical histories, discharge summaries, clinical recommendations, and examination protocols, helps learners internalise grammatical patterns characteristic of medical discourse. These include tense forms used to describe symptoms and patient histories, passive constructions in protocols, and conditional structures in treatment plans.

At the same time, such work develops students' ability to produce coherent spoken and written texts. Learners practise maintaining a topic, creating cohesion through reference devices and logical connectors, organising information thematically, and preserving genre conventions and argumentation.

On this basis, teaching materials and exercises should combine grammar-focused and discourse-focused tasks within professional contexts. Grammar-focused tasks may include completing sentences with appropriate tense forms, practising the passive voice, transforming active constructions into passive ones in protocols, and forming conditional sentences used in clinical algorithms. Discourse-focused tasks may include reordering disorganised paragraphs of a discharge summary, adding cohesive devices to a report, arranging information in the sequence of history-taking, examination, diagnosis, and treatment, and writing short, coherent reviews of a topic.

For example, a common medical topic such as acute respiratory infections in children can be used as a thematic framework. Students first practise relevant grammatical patterns in short texts describing symptoms and examination findings. They then produce a coherent discourse product, such as an oral case report or a written medical history, following the genre conventions and logical-semantic structure of the relevant medical text.

The Role of Independent Learning and Professional Texts

HSR (LONDON),
HOUGHTON STREET REVIEW JOURNAL
ISSN: 2058-5519|Impact factor-15.9
http://houghtonstreetreview.com/index.php/hsr

Medical students should also be encouraged to work independently with texts directly related to their future professional fields. Such work not only expands vocabulary and supports the development of oral communication, but also contributes to grammatical competence. Regular engagement with authentic medical materials—patient histories, examination protocols, and clinical guidelines—helps students consolidate tense forms, the passive voice, conditional structures, and other grammatical constructions typical of professional discourse.

Written assignments, in turn, do more than reinforce memorisation: they help students learn to use grammatical patterns in written communication and thereby strengthen the professional language literacy of future physicians.

In contemporary medical education, the development of students' independent learning skills is increasingly important. The ability to learn autonomously helps future physicians adapt to professional practice in a rapidly changing environment. From this perspective, discursive competence is essential because it is reflected in students' ability to construct coherent spoken and written statements, organise medical texts around history-taking, examination, diagnosis, and treatment, and maintain cohesion and logical progression in professional communication.

Independent learning therefore becomes not only a means of consolidating knowledge and skills but also a way of developing analytical and critical thinking. It can help students engage more effectively with contemporary medical knowledge while strengthening professionally oriented communication skills.

Implications for Teaching Practice

When teaching reading and writing in English, educators should clearly identify the types of exercises to be used both in classroom practice and in independent study. These exercises should support the integrated development of grammatical competence—the accurate use of linguistic structures—and discursive competence—the coherence and logic of professional communication.

The language demands of future physicians vary according to their professional activities. General practitioners often communicate their observations and conclusions orally when interacting with patients, whereas professionals in other medical and pharmaceutical fields may document research findings in written reports, articles, and protocols. Both forms of activity depend on regular engagement with texts, reading professional literature, and interpreting information analytically.

It would be a mistake to reduce the teaching of grammatical and discursive competence to traditional approaches based on mechanically memorising terminology. Effective professional language use requires students not only to recognise and understand medical terms when listening or reading, but also to use grammatically accurate constructions and produce logically coherent spoken and written texts. Practical classes should move beyond repetitive, reproductive exercises and give students opportunities to create their own oral and written texts in accordance with the conventions of professional discourse.

The aim of teaching a foreign language for professional purposes is to develop core competencies among medical students. Grammatical competence, understood as the accurate and appropriate use of

HSR (LONDON),
HOUGHTON STREET REVIEW JOURNAL
ISSN: 2058-5519|Impact factor-15.9
http://houghtonstreetreview.com/index.php/hsr

linguistic structures, and discursive competence, understood as textual coherence and compositional integrity, are particularly important. Reading and writing in English are closely linked to future medical practice: reading supports the recognition and acquisition of grammatical patterns, while writing consolidates these patterns and develops the ability to produce complete, coherent texts.

Accordingly, the objectives of the teaching methodology include developing students' competencies in three areas:

- general professional competence: the ability to work with scientific sources and communicate information precisely;
- professionally oriented competence: the ability to use grammatical and discursive resources in typical professional situations;
- specialised medical competence: the ability to prepare a patient history, write a discharge summary, and deliver an oral report during clinical rounds.

At the methodological level, instruction should draw on integrated approaches, including text-based analysis, competency-based learning, and context-oriented teaching. Key principles include communication and interdisciplinary coordination. Together, these approaches can help students develop stable grammatical and discursive skills for professional communication in medicine.

Conclusion

The development of the professional competence of future physicians requires an integrated approach to English-language teaching in which linguistic knowledge is connected with cognitive activity, professional communication, and the conventions of medical discourse. Systematic work with scientific and clinical texts, realistic case-based tasks, and structured independent learning can support the parallel development of grammatical accuracy and discursive coherence. Teaching should therefore move beyond the memorisation of terminology and provide learners with opportunities to interpret, analyse, and produce professional texts for authentic or realistic medical contexts. Such an approach can better prepare medical students to use English for continuing professional development, communication, and research.

References

1. Canale, M., & Swain, M. (1980). Theoretical bases of communicative approaches to second language teaching and testing. Applied Linguistics, 1(1), 1–47.
2. Hymes, D. (1972). On communicative competence. In J. B. Pride & J. Holmes (Eds.), Sociolinguistics (pp. 269–293). Harmondsworth: Penguin Books.
3. Bachman, L. F. (1990). Fundamental Considerations in Language Testing. Oxford: Oxford University Press.
4. Brown, H. D. (2007). Principles of Language Learning and Teaching. New York: Pearson Education.
5. Hutchinson, T., & Waters, A. (1987). English for Specific Purposes: A Learning-Centred Approach. Cambridge: Cambridge University Press.

HSR (LONDON),
HOUGHTON STREET REVIEW JOURNAL
ISSN: 2058-5519|Impact factor-15.9
http://houghtonstreetreview.com/index.php/hsr

6. Dudley-Evans, T., & St John, M. J. (1998). Developments in English for Specific Purposes: A Multi-Disciplinary Approach. Cambridge: Cambridge University Press.
7. Richards, J. C., & Rodgers, T. S. (2001). Approaches and Methods in Language Teaching (2nd ed.). Cambridge: Cambridge University Press.
8. Celce-Murcia, M. (2007). Rethinking the role of communicative competence in language teaching. In E. A. Soler & M. P. S. Jordà (Eds.), Intercultural Language Use and Language Learning (pp. 41–57). Springer.
9. Hyland, K. (2006). English for Academic Purposes: An Advanced Resource Book. London: Routledge.
10. Nation, I. S. P. (2001). Learning Vocabulary in Another Language. Cambridge: Cambridge University Press.
11. Harmer, J. (2007). How to Teach English. Harlow: Longman.
12. Flowerdew, J. (Ed.). (2013). Discourse in English Language Education. London: Routledge.