



LEARNER-CENTERED APPROACH TO TEACHING ENGLISH PHRASEOLOGICAL AND FORMULAIC EXPRESSIONS TO MEDICAL STUDENTS

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<https://doi.org/10.5281/zenodo.22643947>

Abstract. The development of effective professional communication is an essential component of English language education for medical students. In addition to medical terminology, future healthcare professionals need to acquire phraseological and formulaic expressions commonly used in clinical, academic, and interpersonal communication. The present paper examines the potential of a learner-centered approach to teaching such expressions to medical students. The study is based on the analysis of methodological literature and current principles of English for Specific Purposes (ESP) and learner-centered education. Particular attention is paid to contextual learning, clinical scenarios, role-playing, authentic materials, collaborative activities, and learner autonomy. The analysis suggests that integrating phraseological and formulaic expressions into professionally relevant communicative situations may facilitate their meaningful acquisition and help medical students develop greater fluency and confidence in English-language professional communication.

Keywords: learner-centered approach, Medical English, medical students, phraseological units, formulaic expressions, ESP, professional communication, communicative competence.

Introduction. English plays an increasingly important role in medical education, scientific communication, international collaboration, and professional development. Medical students are expected not only to understand specialized terminology but also to communicate effectively with patients, colleagues, and other healthcare professionals. Consequently, teaching Medical English should extend beyond isolated vocabulary and grammatical structures



and include recurrent multiword expressions that perform specific communicative functions.

Phraseological and formulaic expressions constitute an important component of natural language use. Formulaic language includes recurrent sequences that speakers may retrieve and use as relatively stable units. Such expressions can contribute to fluency and idiomaticity and are therefore relevant to second-language instruction. In a medical context, expressions such as *What brings you in today?*, *How long have you had these symptoms?*, *Are you allergic to any medications?*, *Let me examine you*, *We need to rule out...*, *The patient presented with...*, and *The findings are consistent with...* perform recognizable professional and communicative functions.

However, traditional vocabulary teaching may focus primarily on memorizing individual medical terms and their equivalents. Although knowledge of terminology is indispensable, it does not automatically enable students to conduct a medical interview, present a clinical case, explain a procedure, discuss diagnostic findings, or communicate appropriately with patients. Therefore, there is a need for teaching strategies that connect lexical knowledge with authentic professional communication.

A learner-centered approach is particularly relevant to Medical English because it focuses on learners' communicative needs, professional goals, previous experience, language proficiency, and active participation in the educational process.

Aim. The aim of this paper is to analyze the possibilities of applying a learner-centered approach to teaching English phraseological and formulaic expressions to medical students and to identify teaching strategies that may facilitate their use in academic and clinical communication.

Materials and Methods. This study is theoretical and methodological in design. It is based on the analysis and synthesis of literature concerning formulaic language, vocabulary acquisition, English for Specific Purposes, Medical English, and learner-centered language education. The principles of traditional vocabulary instruction were compared with learner-centered strategies. Particular consideration was given to authentic medical communication, clinical scenarios, role-playing, case-based activities, pair and group work, contextualized vocabulary learning, and autonomous learning strategies.

Results and Discussion. The analysis indicates that phraseological and formulaic expressions should be taught primarily in relation to their communicative functions rather than as isolated lexical items. In Medical English,



such functions may include history taking, physical examination, explanation of diagnostic procedures, case presentation, discussion of treatment options, communication with relatives, and interaction within the healthcare team.

A learner-centered model makes it possible to organize language material according to situations that students are likely to encounter in their future professional practice. For example, when learning how to take a medical history, students can work with functional groups of expressions such as *Could you describe the pain?*, *When did it start?*, *Does anything make it better or worse?*, and *Have you experienced this before?* Rather than simply translating and memorizing these expressions, learners can use them in simulated doctor–patient encounters.

Role-playing can be particularly useful in this context. One student may perform the role of a doctor and another the role of a patient, followed by a change of roles and peer feedback. Such activities encourage students to select appropriate expressions according to the clinical situation and provide repeated practice in meaningful contexts. Clinical cases may also be adapted to students' level of medical knowledge and English proficiency.

For medical students, the distinction between communication with healthcare professionals and communication with patients is especially important. Professional interaction may require expressions such as *The patient presented with...*, *On examination...*, *The differential diagnosis includes...*, or *The findings suggest...*. Patient-centered communication, by contrast, requires language that is comprehensible and appropriately sensitive, for example, *I am going to examine your abdomen*, *You may feel some pressure*, or *Please let me know if you feel any pain*. Thus, students should learn not only what an expression means but also when, where, and with whom it is appropriate to use it.

Authentic and professionally oriented materials can further support this process. Clinical dialogues, case histories, medical records, educational videos, case presentations, and adapted scientific texts allow learners to identify recurrent expressions in context. Students can create their own collections of useful formulaic sequences organized according to professional functions such as history taking, examination, diagnosis, treatment, patient education, and case presentation.

Another important characteristic of the learner-centered approach is learner autonomy. Medical students can be encouraged to identify expressions they personally find useful or difficult, search for examples in reliable English-language medical resources, create clinical dialogues, and evaluate their own



performance. Peer assessment and self-assessment can also be incorporated into communicative activities.

The teacher's role consequently changes from being primarily a transmitter of vocabulary to that of a facilitator and organizer of professionally meaningful language practice. The teacher selects appropriate materials, designs clinical communication tasks, provides feedback, and helps learners distinguish between formal professional language, academic language, and patient-friendly communication.

This approach is consistent with the broader principles of ESP, according to which language instruction should reflect learners' specific academic and professional needs. For medical students, the integration of language learning with realistic professional tasks may increase the relevance of English classes and create conditions for transferring linguistic knowledge to future clinical communication.

Conclusion. Teaching English phraseological and formulaic expressions to medical students should not be limited to memorization and translation. A learner-centered approach allows these expressions to be integrated into professionally meaningful communicative contexts. Clinical scenarios, doctor-patient role-playing, case presentations, authentic materials, collaborative activities, and autonomous learning can help students understand not only the meaning but also the communicative function and appropriate use of recurrent expressions.

The incorporation of phraseological and formulaic language into Medical English instruction may contribute to the development of students' lexical and communicative competence, professional fluency, and confidence in English-language clinical and academic interaction. Therefore, learner-centered instruction of formulaic language can be regarded as a relevant component of professionally oriented English education for future healthcare professionals.

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