

DESIGNING AN ESP COURSE FOR FIRST-YEAR MEDICAL STUDENTS (A Needs-Based Case Study and Content-Oriented Approach)

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Abstract

English for Occupational Purposes (EOP) courses play a crucial role in preparing medical students for effective professional communication in global healthcare contexts. This paper presents a research-based analysis of an ESP course designed for first-year medical students at Tashkent Medical Academy. The study describes the learner profile, conducts a comprehensive needs analysis using quantitative and qualitative methods, and proposes an ESP course design integrating the Case Study Approach and Content-Based Instruction (Adjunct Model). The course aims, assessment framework, and pedagogical rationale are grounded in established ESP literature. The findings highlight the importance of selective skills emphasis, authentic tasks, and formative assessment in addressing the linguistic needs of future medical professionals within limited instructional time.

Keywords: ESP, EOP, Medical English, Needs Analysis, Case Study Approach, Content-Based Instruction.

Introduction

This ESP course was implemented during an internship at Tashkent Medical Academy, where first-year students study English for Occupational Purposes for only one semester. The learners are predominantly 18 years old, with a group size of fifteen students. Classes are held once a week for 160 minutes, on Mondays from 8:00 a.m. to 10:50 a.m. The group consists of four female and ten male students. The learners display mixed English proficiency levels. One female student, Navbahor, holds an IELTS certificate with a band score of 7 and actively participates in all classroom activities. Another student, Farangiz, demonstrates strong motivation and willingness to engage, while the remaining female students tend to be reserved. The male students generally demonstrate an intermediate level of English but rely heavily on simple sentence structures. As noted by Viana et al. (2020), while some ESP learners possess intermediate or advanced proficiency, this is not always the case, particularly in specialized academic contexts. Students primarily focus on biology and chemistry for university examinations, and English is not their main academic priority. Although they can communicate using basic language, they require scaffolding such as sentence starters and guided speaking support. In reading tasks, learners are allowed to translate unfamiliar words individually rather than translating entire texts. Listening activities include multiple repetitions to facilitate both



general and detailed comprehension. Writing tasks are limited to practical genres such as patient reports; academic essay writing is not required. Consistent with Viana et al. (2020), who argue that ESP texts should reflect learners' daily professional tasks, the course prioritizes medical vocabulary over explicit grammar instruction. The primary coursebook used is Oxford English for Careers: Nursing (Grice, 2017), targeting A2–B1 levels.

2. Needs Analysis

Needs analysis forms the foundation of ESP course design. Woodrow (2018) emphasizes that needs analysis is the “backbone of ESP course design” (p. 21), while Flowerdew (2013) identifies it as the first stage of course development. To ensure relevance and effectiveness, a multi-faceted needs analysis approach was adopted.

2.1 Stakeholders

The main stakeholders include:

- Students, as primary learners with diverse proficiency levels and learning preferences;
- The ESP teacher, who has direct insight into learners' linguistic strengths and weaknesses;
- The Uzbek and Foreign Languages Department, which determines curricular requirements and professional language expectations within medical education.

2.2 Methods.

Both quantitative and qualitative methods were employed (Woodrow, 2018).

Questionnaires and Surveys (Quantitative): Students completed questionnaires to identify their learning goals, perceived needs, and preferred activities, addressing their “wants” (Woodrow, 2018). In addition, medical faculty members were surveyed to determine the importance of specific English skills in professional practice, thereby identifying “necessities.”

Interviews (Qualitative): Semi-structured interviews were conducted with selected students to gain deeper insights into their challenges and target communicative situations. Interviews with medical professionals provided information on common English interactions and frequent communication difficulties (Wozniak, 2010).

Observations (Qualitative): Classroom observations focused on students' performance during tasks, revealing their present language abilities. Where possible, observations of simulated medical interactions were considered to identify authentic communicative events, aligning with Woodrow's (2018) emphasis on authentic tasks.

3. Approach to ESP Course Design. The ESP course design integrates the Case Study Approach and Content-Based Instruction (CBI) using the Adjunct Model.

3.1 Case Study Approach. The Case Study Approach closely mirrors real-world medical contexts and supports the development of communication, decision-making, and critical thinking skills. According to Woodrow (2018), case studies replicate target situations and promote student-led learning. Medical case narratives are used to engage students in analyzing symptoms, interpreting test results, and proposing diagnoses and treatment plans. Students work collaboratively, present findings, and produce short medical reports. This approach



reflects the complexity of real medical decision-making and aligns with students' preference for problem-based learning.

3.2 Content-Based Instruction (Adjunct Model). CBI operates on the premise that teaching content enhances learner motivation (Woodrow, 2018). The Adjunct Model, described by Crandall (2012), supports content courses through parallel language instruction. By aligning ESP lessons with concurrent medical subjects (e.g., cardiology), language instruction becomes immediately relevant. Tasks include summarizing medical texts, presenting patient cases, and writing progress notes. This balanced focus on language and content enhances learner engagement and professional readiness.

4. Course Aims

The course aims to enable students to:

1. Comprehend spoken English in common medical interactions.
2. Communicate effectively with patients using simple explanations.
3. Engage in basic professional communication with colleagues.
4. Interpret patient reports and simplified medical texts.
5. Produce clear written patient documentation.
6. Acquire foundational medical vocabulary.
7. Develop strategies for independent language learning beyond the course.

5. Assessment Framework. Assessment in this ESP course is designed to support learning, monitor progress, and evaluate students' ability to use English effectively in authentic medical contexts. Given the occupational nature of the course and its limited duration, assessment focuses primarily on informal, performance-based, and communicative evaluation, rather than traditional exam-oriented testing. As Woodrow (2018) emphasizes, assessment in ESP should reflect the real communicative demands of the target profession rather than abstract linguistic knowledge.

5.1 Diagnostic Assessment. Before the course begins, a diagnostic assessment is conducted to identify students' existing English proficiency, strengths, and areas requiring support. Diagnostic assessment plays a crucial role in ESP contexts, as it informs course design and instructional priorities (Woodrow, 2018). Cumming (2001) highlights that initial assessment serves not only for placement purposes but also for diagnosing learner needs to guide teaching decisions.

In this course, diagnostic assessment includes:

- A short oral interview, where students introduce themselves and respond to simple medical-related questions;
- A listening task involving a short doctor–patient dialogue, followed by comprehension questions;
- A basic medical vocabulary check, focusing on common technical and semi-technical terms.

These tasks allow the instructor to assess learners' speaking confidence, listening comprehension, and lexical knowledge. The results are used to adjust task difficulty, determine



the level of scaffolding required, and prioritize speaking and listening activities over extensive grammar instruction.

5.2 Formative Assessment. Formative assessment constitutes the core of evaluation throughout the course. Its primary purpose is to support learning, provide ongoing feedback, and encourage learner development rather than assign grades. According to Woodrow (2018), formative assessment is particularly valuable in ESP contexts because it promotes learner autonomy and professional skill development.

Role-Plays and Problem-Based Scenarios: Students regularly participate in doctor-patient or nurse-patient role-plays, often inspired by problem-based scenarios similar to those depicted in medical dramas such as Doctor House. These simulations require students to elicit patient information, explain procedures, and discuss possible diagnoses. During these activities, the instructor observes students' communicative effectiveness, use of medical vocabulary, interactional strategies, and listening comprehension. Immediate oral feedback is provided to highlight strengths and suggest improvements.

Observation and Feedback: The instructor systematically observes students during group discussions and case analyses, keeping brief notes on recurring difficulties such as limited vocabulary range, pronunciation issues, or reliance on first-language translation. Feedback focuses on clarity, comprehensibility, and appropriateness, rather than grammatical perfection, aligning assessment with real-life medical communication needs.

Reflective and Peer Feedback Activities: After role-plays and group tasks, students are encouraged to reflect on their performance and provide constructive feedback to peers. This process fosters learner ownership and critical awareness, which Woodrow (2018) identifies as essential elements of effective formative assessment.

Informal Writing Tasks: Students produce short written texts such as patient reports, symptom summaries, or progress notes. Feedback is given on organization, clarity, and correct use of medical terminology. This approach reflects the process-oriented view of writing, where revision and feedback are integral to skill development (Paltridge et al., 2009).

5.3 Summative Assessment. Although ESP and EOP courses often rely less on formal examinations, a summative assessment is included at the end of the semester to evaluate overall achievement and ensure alignment with course objectives. As Cumming (2001) notes, specific-purpose courses define achievement standards based on needs analysis and professional requirements.

Medical Role-Play: The primary summative task is a graded, extended role-play simulating a realistic medical interaction. Students must demonstrate integrated skills, including listening comprehension, spoken fluency, appropriate medical vocabulary usage, and effective communication strategies. This task represents a direct assessment of target language use (Woodrow, 2018), closely reflecting real professional situations.

Patient Report Portfolio: In addition, students submit a portfolio of revised patient reports completed throughout the semester. This portfolio approach allows assessment of progress over time and emphasizes accuracy, clarity, and adherence to medical reporting conventions. Analytical rubrics are used to evaluate:



- Accuracy and appropriateness of medical terminology;
- Clarity and organization of information;
- Effectiveness of written communication for professional purposes.

6. Conclusion

This study demonstrates that a needs-based ESP course integrating case studies and content-based instruction can effectively address the linguistic demands of first-year medical students. Given limited instructional time, selective skills emphasis, authentic tasks, and formative assessment are essential. Aligning course design, teaching methods, and assessment with learners' future professional contexts ensures meaningful and sustainable language development.

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