Doctor-patient medical discourse has not received much attention in the study of health care service delivery in Pakistan. Despite sophisticated technologies for medical diagnosis and treatment, communication remains the primary means by which the doctor and the patient exchange health information. While proper communication determines the quality of medical care, poor communication often results in misunderstanding, causing lack of compliance, dissatisfaction, and negative health outcome of the patients as well as an increased risk of malpractices.

In view of this situation, this sociolinguistic study was designed to explore the status of doctor-patient medical discourse in government hospitals of district Rawalpindi. For conducting this study, both qualitative and quantitative approaches were used as well as extensive literature reviews, questionnaire surveys consisting of both openended and closed-ended questions for doctors, and structured interview with patients were also done. A survey from eight tehsils of district Rawalpindi was conducted. Following convenience sampling, 400 questionnaires were distributed among the doctors of eight tehsils of district Rawalpindi. Interviews of 24 patients were also conducted along with observation. The results showed how different factors such as language, patient's health literacy and health awareness, doctors' training in communication skills, listening comprehension, privacy, time of consultation affect the doctor-patient medical discourse. Therefore, it is strongly recommended that government should make communication skills mandatory for doctors. interpreters/translators can also be helpful to overcome the miscommunication issues. There is need to appoint more doctors in government hospitals so that they may able to give ample time to each patient. More waiting areas should be allocated in hospitals which will make corridors less noisy. As a result, the doctors and the patients would be able to discuss issues in a better way. Local doctors are to be preferred for transfer at home stations.