Supplementary Material 2. Reflective inquiry guide for clinical placement

Purpose of reflective inquiry

The purpose of this reflective inquiry is not to evaluate communication performance or identify "correct" responses. Rather, it is intended to support thoughtful reflection on how AI-mediated clinical communication may influence patient understanding, professional responsibility, and communication about uncertainty within contemporary healthcare environments.

During clinical placement, patients and families may enter healthcare encounters with understandings, expectations, or interpretations that have already been shaped by online sources, digital platforms, or AI-generated health information. As a result, communication may involve differing interpretations, uncertainty, negotiation of meaning, communication challenges, and the need to maintain trust within therapeutic relationships.

You are encouraged to reflect on communication encounters that appeared:

- uncertain;
- emotionally challenging;
- difficult to interpret;
- characterised by differing understandings; or
- communicatively complex.

There are no correct or preferred responses. Brief reflective accounts based on meaningful observations are sufficient.

You are not expected to independently manage complex communication situations or intervene in patient care. The purpose of reflective inquiry is to support careful observation and interpretation of AI-mediated clinical communication encountered during authentic clinical placement.

Reflective inquiry prompts

You may use the following prompts to guide your reflections during clinical placement where relevant.

1. Communication encounter

Describe a communication encounter that appeared uncertain, emotionally challenging, difficult to interpret, or communicatively complex.

Consider:

- What happened?
- Who was involved?
- What made the interaction memorable or challenging?

2. Patient understanding

How did the patient appear to develop their understanding of the condition, treatment, recovery process, or clinical situation?

You may consider:

- whether the patient appeared confident or uncertain;
- whether they entered the encounter with established expectations;
- whether they expressed concern, confusion, or differing interpretations.

3. Sources influencing patient understanding

Did the patient refer to:

- online health information;
- AI-generated explanations;
- chatbot responses;
- AI-assisted search results;

- digital health platforms;
- social media; or
- other externally sourced health information?

If so, how did these sources appear to influence communication during the interaction?

4. Differing interpretations and communication challenges

Did the encounter involve:

- differing interpretations;
- disagreement;
- uncertainty;
- misunderstanding;
- communication challenges; or
- emotional difficulty?

If so, consider:

- How did the interaction develop?
- What appeared to make communication challenging?
- How were differing understandings addressed?

5. Professional responses and responsibility

How did nurses, physicians, or other healthcare professionals respond during the interaction?

You may reflect on how they:

- clarified information;
- explained uncertainty;
- responded to differing interpretations;
- maintained trust;
- provided reassurance;
- offered emotional support; or
- balanced professional responsibility with patient concerns.

6. Uncertainty communication

How was uncertainty communicated during the interaction?

For example:

- variability in recovery;
- treatment outcomes;
- prognosis;
- clinical risk; or
- incomplete or evolving clinical information.

How did patients or families respond when uncertainty was discussed?

7. Personal reflective response

Did the interaction create feelings of:

- hesitation;
- uncertainty;
- discomfort;
- confusion;
- emotional difficulty; or
- communication challenges?

Which aspects of the encounter felt most difficult to interpret or understand?

8. Reflecting on professional responsibility and the nursing role

What did this communication encounter suggest about:

- how patient understanding is formed;
- professional responsibility;
- communication about uncertainty;
- trust within clinical relationships; or
- the communicative role of nurses in AI-mediated clinical communication?

Final reflection

Some communication encounters may remain unresolved or difficult to interpret. This is an inherent feature of contemporary clinical communication and an expected aspect of reflective inquiry.

The purpose of reflection is not to develop perfect communication strategies or produce definitive answers. Rather, it is to encourage thoughtful interpretation of communication encounters in which patient understanding, professional responsibility, and uncertainty communication intersect within everyday nursing practice.

These reflections are intended to support deeper understanding of how AI-mediated clinical communication increasingly involves:

- interpretation;
- negotiation of meaning;
- professional responsibility;
- communication about uncertainty;
- relational practice; and
- context-dependent communication.

Through careful observation and reflection, participants are encouraged to develop a richer understanding of AI-mediated clinical communication and the evolving communicative role of nurses within contemporary nursing practice.