

## **EXPLICATURAL STRATEGIES IN THE LANGUAGE OF MEDICAL CASE NOTES IN NIGERIA**

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### **Abstract**

This research analyses the language of medical case notes (MCNs) produced by medical personnel in Nigeria. The study examines the explicatural strategies that help in the appropriate interpretation of the discourse. Twenty case notes were purposively sampled from two privately owned hospitals in Ibadan, Oyo State, Nigeria. The data were subjected to a pragmatic analysis using Wilson and Sperber's Theoretical Concept of Explicature. The findings show the deployment of three explicatural strategies of enrichment in the discourse: gap filling, reference assignment and bridging by the medical personnel in the recovery of the propositional contents of case notes with linguistic peculiarities. The study reveals professional competence and concludes that the pragmatic implication of enrichment in the interpretation of such medical discourses enhances the appropriate diagnosis of diseases and treatment of patients which are the core tasks of the medical personnel.

**Keywords:** Explicature, medical personnel, medical language, case notes, gap filling, Nigeria.

### **Résumé**

#### **Stratégies explicatives dans le langage du cas des notes médicales au Nigeria**

Cette recherche analyse le langage du cas des notes médicales (CNM) produits par le personnel médical au Nigeria. L'étude examine les stratégies explicatives

qui aident à l'interprétation appropriée du discours. Vingt cas des notes ont été délibérément échantillonnées dans deux hôpitaux privés à Ibadan, dans l'État d'Oyo, au Nigéria. Les données ont été soumises à une analyse pragmatique en utilisant le concept théorique d'explicature selon Wilson et Sperber. Les résultats montrent le déploiement de trois stratégies explicatives d'enrichissement du discours : le comblement des lacunes, l'attribution de références et le pontage par le personnel médical dans la récupération du contenu propositionnel du cas des notes présentant des particularités linguistiques. L'étude révèle la compétence professionnelle et conclut que l'implication pragmatique de l'enrichissement dans l'interprétation de tels discours médicaux améliore le diagnostic approprié des maladies et le traitement des patients qui sont les tâches essentielles du personnel médical.

**Mots-clés** : Explicature, personnel médical, langage médical, cas des notes, comblement des lacunes, Nigéria.

### **Introduction**

The proliferation of disciplines and professional affiliations has created the distinctiveness in language use that defines the purpose of group communication. The differences in language use “in terms of social groups or professions, arise from designed and crystallised conversational patterns, regulated to communicate the shared experience and ideology of such groups” (Uwen & Ukam, 2019, p. 124). Put differently, “people use language in relational manner to negotiate and construct different identities for themselves and others” (Ellah, 2021, p. 79). The common orientation, shared experience and ideology shape the discourse patterns of groups to the extent that we could establish which is academic, political, security, religious, legal or medical language.

Medical language could be described as the language used by medical practitioners in their professional communicative contexts. This form of language is reflected in the scripting and interpretation of prescriptions, case notes, among others. This study focuses on medical case notes (medical case histories) as a genre of medical discourse. Medical case notes (henceforth, MCNs) are written texts or reports about patients' medical complaints, the medical personnel's investigation or diagnosis and treatment plan. In other words, they are formal and reference narratives “in which physicians at every level of training communicate to each other their understanding of particular patients and their medical problems, what has been done about the problems, and what is being done about them” (Donnelly, 1997, p. 1045). Implicated in Donnelly's view is the fact that MCNs provide relevant information about a patient to other medical personnel

that would have something to do with the patient's diagnosis and treatment. Such information facilitates the follow up routine by medical personnel.

Traditionally, the language of MCNs is brief, sketchy, cryptic, biomedical, representing a patient as a biological specimen, among others (Donnelly, 1997 & Ellah, 2016). The understanding of such linguistic configuration and professional communication requires both professional and pragmatic competence. The "language in this circumstance can be 'moulded' in terms of lexical deviation and choices to reflect the peculiar communication needs [of the medical profession]" (Uwen, 2019, p. 53). Such expressions are "characterised by technical or pseudo-technical vocabulary which often indicate the differences in professions, topics and linguistic roles" (Uwen, 2020, p. 265). This is the reason the professional competence is very important because of its direct implication on the health of the patient. Appropriate interpretation of the case notes will likely lead to the improvement of the patient's health, while wrong interpretation could worsen the patient's health condition, and possibly lead to death. This underscores the relevance of MCNs. This study, therefore, explores the pragmatics of explicature in medical case notes in Nigeria, particularly in Ibadan. The goal is to examine how an original inscription in a case note is enriched by other medical personnel who contribute to the diagnoses and treatment of patients.

### **Theoretical orientation: Explicature**

This study is based on the relevance theoretical notion of explicature. Proponents of relevance theory (e.g. Sperber & Wilson, 1986; 1995) complain that Gricean implicature is "probabilistic in nature" (Grundy, 2000, p. 101). They contend that the principle of relevance is enough to account for the meaning of utterances. As a result, proponents of relevance theory prefer a theory that "goes beyond the probabilistic and enables addresses to be sure that they have recovered the most relevant of a potentially infinite set of inferences" (Grundy, 2000, p. 101) which gave birth to explicature.

Explicature is described within the framework of relevance theory (henceforth RT) as the "result of fleshing out the semantic representations of an utterance" (Blakemore, 1992 as cited in Odebunmi (2007, p. 85), and it is recoverable by a combination of decoding and inference. Sperber & Wilson (1995, p. 186) assert that explicature is "a proposition communicated by an utterance which is a development of a logical form encoded by the utterance". Grundy (2000, p. 103) conceives it to be "the inference or series of inferences that enrich the under-determined form produced by the speaker to a full propositional form". It focuses on the cognitive process of "inferencing procedures, thought to underlie hearer's ability to interpret and coordinate linguistic and non-linguistic information in the comprehension process" (Luchjenbroers, 2001).

Central to the theorisation of explicature is enrichment of a logical form through gap filling, reference assignment, bridging, contextual assumptions and disambiguation. Grundy (2000, p. 103) remarks that enriching an utterance “requires an inferential process which provides an enriched interpretation consistent with the context of the utterance and the speaker’s encyclopaedic knowledge”. The foregoing raises a point in favour of context as an important factor in the process of enrichment. The implication is that, for a speaker to enrich an utterance to a point of clarity and relevance, the context of utterance is factored in and also, the beliefs and assumptions of the subject of the utterance must be considered. The role of context in the inferential process is to “provide the set of premises used in the interpretation process” (Luchjenbroers, 2001). The responsibility of providing the appropriate context that will enhance the hearer’s interpretation of an utterance falls on the shoulders of the speaker (Sperber & Wilson, 1986).

To fully understand and interpret the under-determined language of case notes in Nigeria, medical professionals enrich the original utterance of the write ups. Consequently, we consider the application of the theoretical concept of explicature most appropriate in accounting for the development of the logical form of case notes to a full propositional content for therapeutic purposes.

### **Previous studies on the language of medical reports**

The discourse of medical case notes has received some scholarly attention (e.g. Anspach, 1988; Ellah, 2016; Lysanets, Morokhovets & Bieliaieva, 2017). For example, Anspach (1988) examines formal presentation of case histories by interns, resident doctors and fellows. The analysis of the language of case presentation is based on data collected from two intensive care units: nurseries and obstetrics, and gynaecology science. The study indicates that the language used in this form of medical discourse has four identifiable features: the separation of biological processes from the patient (de-personalisation): omission of the agent (that is the use of passive voice), treating medical technology as the agent and the use of text markers, such as “states”, “reports”, and “denies” which heighten the subjectivity of patients’ accounts. It further explains that the language of case presentation has significant consequences. First, some features of case presentation eliminate the element of judgment from medical decisions and mitigate responsibility for medical decision making. Second, the use of rhetorical devices enhances the credibility of the findings that are presented. Third, the language minimises the input of the patient’s medical history and subjective experience. Lastly, from a cultural perspective, the study shows that

case histories “socialise those who present them to a culture or worldview which may contradict the explicit tenets of medical education” (Anspach, 1988, p. 357). Donnelly (1997) deals with the nature of the language of medical case histories. The study reveals that the language of medical case histories is fraught with maladies such as characterisation of patients on biological specimen (e.g ‘a 37-year-old, gravid II para I black female’), translation of a patient’s complaint into biological language, depersonalisation of texts, use of rhetorical devices (which could cast doubt on the reliability of the patient’s testimony), among others. The research suggests some ways of remedying such maladies, namely: introduction of the patient, recording of the patients’ complaints in their own words, avoidance of some rhetoric that cast doubt on the patient’s credibility, among others.

Ellah (2016) studies implicatures in medical case notes in Nigeria. The study reveals that medical case notes are structurally divided into three main sections, namely “the patient’s complaint (PC), the doctor’s observation and diagnosis (DOD), and the doctor’s treatment plan (DTP)” (p. 78). It further shows that the language of case notes manifests the observance and non-observance of the four conversational maxims: quantity, quality, manner and relation. This study is related to the present study in two main ways: first, it is pragmatic in nature, and second, it studies the language of MCNs in Nigeria. However, the present study differs from it because it examines the language of MCNs using explicatures. That is, it accounts for the explicatural strategies that are used in the interpretation of MCNs. Lysanets, Morokhovets & Bieliaieva (2017) undertake a stylistic analysis of medical case reports with particular attention to the lexical and grammatical peculiarities of the discourse. The study identifies a variety of stylistic features that distinguish the discourse of case reports from other forms of medical discourse. Specifically, the study reveals a preponderance of simple past tense, active voice, present perfect tense, and first person plural personal pronouns.

The above studies connect with the present study in the sense that they all study MCNs from a linguistic perspective. However, with the exception of Ellah (2016), none has studied MCNs in Nigeria from a pragmatic perspective. This present research however, closes the gap and extends research into the language of MCNs in Nigeria through the deployment of the relevance theoretical concept of explicature.

### **Methodology**

The data for this research derives from twenty medical case notes that were purposively selected from two privately owned hospitals in Ibadan, Oyo State,

Nigeria. The choice of private hospitals instead of the public ones is because of their relatively relaxed bureaucratic process in accessing such ‘classified’ information as case notes. The selected data were then subjected to pragmatic investigation to account for the explicatural strategies in the interpretation of the language of MCNs in Nigeria.

### **Analysis and findings**

The analysis reveals that the original writings on MCNs in Nigeria, particularly in Ibadan, are developed to fully elaborate propositional forms through three main explicatural strategies, namely reference assignment, bridging and gap filling. This implies that medical practitioners enrich the utterances of case notes in order to make them (utterances of case notes) relevant within the context of the investigated medical case. This analysis, as would be demonstrated, follows the notion of “processing cost” in relevance theory (follow the least cost principle), or the relevance-theoretic comprehension heuristic approach of “follow a path of least effort, and stop at the first overall interpretation that satisfies his expectation of relevance” (Sperber & Wilson, 2005). On this premise, the data are analysed under the following headings:

- i. Reference Assignment
- ii. Bridging
- iii. Gap filling

### **Reference Assignment**

Reference assignment is a pragmatic process that helps discourse participants to disambiguate an utterance by tracking a referent item. Instances of reference assignment are found in MCNs through definite (lexical items used to identify specific persons, places or things) and indefinite (lexical items used to refer to particular but not precise or specific persons, places, or things) tokens, and phoric references. Interestingly, these reference assignments by medical practitioners usually provide the readers with useful contextual clues to enable them identify specific referents or intended meaning of a referring expression within a particular context. The following examples indicate that MCNs usually exhibit close relationships between the title – the patient’s name and the main content.

#### **Example 1:**

Background: The patient underwent a successful caesarean operation.

#### **Patient A**

**Doctor:** The patient was placed in dorsal position, cleaned and draped ... (Case note 1)

Example 1 above indicates that the noun, ‘the patient’ refers to the definite proper noun ‘Patient A’. This ensures a cohesive relationship between the two nominal entities. Consequently, to gain access to the referential content of the referring token engaged in the utterance, the following enrichments become inevitable:

- i. Patient A is unwell
- ii. Patient A was placed in a dorsal position...

Let us examine another example:

**Example 2:**

Background: A lady visited hospital Y to complain of her feverish condition that started three days ago.

**Patient B**

**Doctor:** % Sore throat  
Headache  
Fever

Apparently well until  $\frac{3}{7}$  days ago when she reported at the sick bay with the above complaints. (Case note 2)

Again, in Example 2 above, we can, given our knowledge of the contextual usage, process that the referring token in, “apparently well” is Patient B. The temporal clause introduced by the adverb “apparently” presupposes that the patient was healthy three days ago. The referential content of the referring token engaged in the report when fully developed will yield the following enrichment:

- i. Patient B was apparently well until three days ago when she reported at the sick bay with sore throat, headache and fever.

**Example 3:**

Background: A man who has been impotent for over one year came to hospital X.

**Patient C**

**Doctor :**

c\o . Dysmenorhoer  
wish for preg [pregnancy] x 1year  
... seminalysis  
Semen  
Vol – 1ml  
App.[appearance] – creamy white  
...  
Motility

Cell count...  
Watery semen  
Waist pain... (Case note 3)

The contextual clues in Example 3 above show that the referring token is **Patient C**, and following the path of the least effort to stop at the first overall interpretation that satisfies our expectation of relevance, we can arrive at the following enrichments:

- i. Patient C is impotent due to his watery semen
- ii. Patient C longs for a child
- iii. Patient C's semen is creamy white
- iv. Patient C suffers from waist pain

Let us now turn attention to phoric reference as a means of reference assignment in MCNs. Phoric references in case notes manifest as anaphors; i.e., nominal elements usually represented by a pro-form or some kind of deictic which is used to refer back to an earlier mentioned noun or pronoun. These phoric references that are informed by context help to create cohesive effects by keeping an earlier expression on track. They also aid in indexing events, avoid the over repetition of nouns, and achieve economy of expression in medical case notes. Consider the following example:

**Example 4:**

Background: A man who was working with plank cutting machine at Oke-Ado saw mill was brought to hospital Y with the left index finger partially amputated. The doctor on duty wrote the following:

**Doctor:** It was explained that the finger is best amputated but the patient said he wanted it sustained. It was explained that the finger may not take (heal) and if it heal[s] it may not flex at that joint. (Case note 4)

In Example 4 above, "it" in "It was explained that..." in the first and second sentences is a dummy pronoun, but "it" in "...it sustained...if it heal[s] it may not..." all have anaphoric reference to 'the finger' (which is the affected part of the patient that needs medical attention) thereby striking a cohesive tie. Also, the pronoun, "he" in the first sentence has a backward reference to 'the patient' which serves as the subject of the second clause. Consequently, the inferential enrichments of a fully propositional form that would be needed to yield the truth-conditional content of our pragmatic expectations are:

- i. The patient cut his finger with a sawing machine
- ii. The doctor advised that the finger should be amputated



- iii. The doctor said that the finger might not heal
- iv. The doctor expressed fear that even though the finger heals it may not flex at that joint again
- v. The patient insisted that he wanted the finger to be sustained
- vi. The patient did not want his finger to be amputated.

A further illustration of phoric references in MCNs is demonstrated in Examples 5 - 7 below:

**Example 5:**

Background: A woman was referred from Lagelu Medical Centre to [University College Hospital] UCH on account of acute abdominal pain, but rather than go UCH, she went to hospital X

**Doctor:** Patient walked into hospital in company of her relatives.

Referred [sic] from Lagelu Medical Centre

<sup>c</sup>/<sub>o</sub> - Pt [patient] referred [sic] to UCH on account of acute abdomen....

Patient started to

experience pain <sup>3</sup>/<sub>7</sub> and later .... She presented at the referring [sic] hospital <sup>2</sup>/<sub>7</sub> ago. She

was placed on ...(case note 5)

**Example 6**

Background: A lady who was assaulted sexually reported at hospital X.

**Doctor:** Somebody had sexual intercourse with her about 9hrs ago against her consent. She is currently menstruating. Decided not to report to police ...

DIS: Sexual assault

Plan: (1) RVS (1000)

(2) HVS ... (1000)

.... (case note 6)

**Example 7:**

Background: A young unmarried woman had an unprotected sex in an unsafe period, and in an attempt to abort the suspected pregnancy, she had abdominal pains with bleeding.

**Patient Y**

**Doctor:** She took menstrogen after sex in unsafe time. Missed her menstrual period 22/3/2010. She took another 2 menstrogen tabs on 23<sup>rd</sup> March 2010. She started having abd [abdominal] pain on the 23<sup>rd</sup> followed by bleeding (minimal), not reddish and coming up till today. (Case Note 7)

A close consideration of Example 5 above reveals that the pronoun, “her” in the first sentence makes an anaphoric reference to the noun, “patient”. Also, the pronouns, “she” in “she presented...” and “she was placed on...” have a backward reference to the antecedent, “patient”. This phoric reference again has the pragmatic effect of ensuring cohesive union. In Example 6, the referent token of “her” can be located anaphorically at the title of the case note that contains the patient’s name which we here refer to as X. “She” in the second sentence also refers to the same Patient X.

In Example 7 above, the pronoun, “she” which is the subject of the first clause refers anaphorically to the referring token, “Patient Y” (Noun phrase). Similarly, “her”, “she” and “she” in the second, third and fourth clauses altogether make anaphoric reference to Patient Y. The use of the above phoric references enhance the indexing of events, achievement of economy, and avoidance of over repetition of the patient’s name. Therefore, the appropriate pragmatic interpretation of the contextual information that will meet our expectation of relevance that is based on enrichment will in this context yield the following conclusions:

- i. Patient Y had unprotected sex in an unsafe period
- ii. Patient Y took menstrogen
- iii. The menstrogen tablets that Patient Y took were meant to commit abortion
- iv. The abortion had complications

## **5.2 Bridging**

Bridging involves an indirect relationship between an expression and its inferred meaning. This implies that the speaker or writer does not state the inferred meaning explicitly. It occurs when assumptions signaled by referring expressions “are constructed by series of inferences on the basis of what the hearer knows or believes” (Blakemore, 1992 as cited in Osunbade, 2009, p. 142) rather than being stated directly in preceding utterances. Put simply, bridging in relevance theoretical context refers to an implicit propositional content that is yielded based on the social and situational context. The data reveal that certain propositional contents in the language of case notes are recovered through bridging. Let us examine the following instances:

### **Example 8:**

Background: A patient was brought to a hospital by her parents in an unconscious state.

**Patient C**

**Doctor:** Mother said she ate *amala* yester night and was not having any hx [history] of unwellness before. She noticed in the midnight that her breathing changes [sic] and when she examined her she was convulsing.

In Example 8, bridging occurs between “ate *Amala*” in the first sentence and “her breathing changes...” in the second sentence. Although, the doctor did not state clearly that the patient’s ill health was caused by the *amala* she ate, our contextual and explicatural interpretation suggest that the patient’s ailment was caused by the *amala*. Consequently, the following propositions can be recovered:

- i. The cause of Patient C’s ailment is the *amala* that she ate the previous night.
- ii. The *amala* was poisoned.

**Example 9:**

Background: A lady who has visited hospital Y a week ago because of feverish condition now comes to hospital X with a similar complaint.

**Doctor** o/c. Dizziness

Internal heat

Cold

Abd. Pain...

No vomiting

Was admitted in one hospital @ Ijebu-Ode for similar complaints about 1 wk [week] ago where she was given drip. Preg test (urine and blood) was done and was negative

She was treated for... (Case note 9)

In Example 9 above, bridging occurs between “similar complaints” (that is dizziness, internal heat, cold and abdominal pain) and “preg test (urine and blood) was done” in the doctor’s report considering the indirect relationship that exists between them. Obviously, the hearer (reader) would be able to access the assumption that “dizziness, internal heat, cold, and abdominal pains” are some of the symptoms of pregnancy on the basis that the utterance is consistent with the principle of relevance. It would therefore, be taken that the logical form of the writer’s (doctor’s) utterance is to be enriched pragmatically. The explicatural interpretation that will yield the expected pragmatic conclusion based on enrichment can therefore be recovered as follows:

- i. A lady’s urine and blood are used to run pregnancy test.

**Gap filling**

Gap filling relates to the completion of an incomplete utterance or propositional form. Osunbade (2013, p, 49) describes gap filling as “a fully inferential

grammatically-induced contextual completion of incomplete logical form of an utterance". This implies that the meaning of an utterance that is explicitly missing in a linguistically encoded utterance is recovered and completed contextually. Our analysis shows that the patients' health complaints; and the doctors' diagnoses and treatment plan are presented predominantly in incomplete grammatical structures (usually written in single words and phrases). This offers the reason for such utterances to be recovered through gap filling as seen in Examples 10 and 11 below.

**Example 10:**

Background: Patient A suddenly developed a swollen leg, and decided to consult the doctor

**Doctor:** <sup>c/o</sup>. [complaint] left leg swelling x <sup>5</sup>/<sub>12</sub> [5 months]

Hpx – patient noticed the leg suddenly swelling about 5 months ago.

No hx of fracture. It is not painful... (Case note 10)

**Example 11:**

**Doctor:** <sup>c/o</sup>: Body ache x <sup>2</sup>/<sub>7</sub>

Rigor x <sup>2</sup>/<sub>7</sub>

Frequent ... x 1/12

Dysonia 1/2

Pain at the (R) trunk x 2/7

LMP – 22/9/10

Not pale,...

Bx. Tab CQ [chloroquine] 4 – 4 – 2 x <sup>3</sup>/<sub>7</sub>...

Tab pcm [paracetamol]

Cap Amox [amoxil] 500mg 6hrly... (Case note 14)

Examples 10 and 11 above reveal that the patients' complaints, and the doctor's diagnoses and treatment plans are often written down by the doctors in single words or phrases. To recover the propositions of these complaints, therefore, verbal anchors that are strictly dependent on the contextual knowledge (Odebunmi, 2007) of the case notes will have to be supplied. Unless these propositions are recovered fully through gap filling based on the context, we will continue to ask questions such as, what has left leg swelling x <sup>5</sup>/<sub>12</sub> [5 months] got to do with the patient? Why? When? and how? in Example 10. To effectively handle the questions 'what and when?', we need to fetch out the following propositions:

- i. The patient complained that his/her left leg was swollen.
- ii. The patient complained that his/her left leg has been swollen for five months.

Similarly, in Example 11 above, verbal anchors would have to be provided to fill the gaps. Consequently, through contextual variables, the following proposition can be recovered:

- i. The patient complained that he has been having fever, chest pain, nausea and waist pain for three days.

The same procedure of propositional recovery through gap filling as illustrated above will be employed for Example 11, and indeed many other patients' complaints written by medical practitioners. Therefore, a reader of the case note in Example 11 will have to supply the following additional "conceptual-representational material" (Stanley, 2005, p. 2) to fill the gap and develop the logical form of the utterance:

- i. The patient complained about...
- ii. The doctor examined her and prescribed that...

From the immediate foregoing, we can, through gap filling develop our propositional contents as follows:

- i. The patient complained about body ache, rigor, frequent..., dysonia and pain at the right trunk.
- ii. The doctor examined her and prescribed that CQ [chloroquine], pcm [paracetamol], Amox [amoxil] capsules... should be administered on her.

### **Conclusion**

This study, aside from the exposition of the peculiar linguistic configuration devised by, and comprehensible by the medical personnel, has also demonstrated that pragmatic inferences enhance the interpretation of MCNs in Nigeria. The research has further shown that the explicatural strategies of reference assignment, bridging and gap filling account for the fleshing out of contextual meaning in MCNs. Reference assignment manifests as definite and indefinite tokens, and phoric references which provide medical personnel the necessary contextual clues to appropriately interpret MCNs. Overall, the study has revealed that explicatural strategies in the language of MCNs facilitate communication in medical context and ultimately contribute to the therapeutic procedures adopted by medical personnel in Nigeria. Finally, the study recommends that further research should be conducted on other forms of medical reports such as published medical reports.

## References

- Anspach R.R. (1988). Notes on the sociology of medical discourse: the language of case presentation. *J Health Soc Behav*, 29, 357-75
- Blakemore, D. (1992). *Understanding utterances: an introduction to pragmatics*. Oxford: Blackwell.
- Donnelly, W. J. (1997). The language of medical case histories. *Annals of Internal Medicine*, 127(11), 1045 – 1048.
- Ellah, S. M. (2016). Co-operation in the language of medical reports in Nigeria. *CALEL, Currents in African literature and the English Language*, 7, 73-87.
- Ellah, S. M. (2021). Locher and Watts' relational work theory. In S. A. Akinwotu et al (Eds.). *Politeness concepts, models and theories: Theory and practice of pragmatic series, 2*. Lagos: Pragmatic Association of Nigeria. 65 – 82.
- Grundy, P. (2000). *Doing pragmatics*. London: Arnold.
- Luchjenbroers, J. (2001). *Relevance theory and context selection: a discussion of Sperber & Wilson's comprehension model*. Retrieved December 20, 2009 from [www.latrobe.edu.au/linguistics/Latrobepapers in linguistics/vol2/10Luchjenbroerspdf](http://www.latrobe.edu.au/linguistics/Latrobepapers/linguistics/vol2/10Luchjenbroerspdf).
- Lysanets, Y., Morokhovets, H. & Bieliaieva, O. (2017). Stylistic features of case reports as a genre of medical discourse. *Journal of Medical Case Reports*. 11(83), 1-5.
- Odebunmi, A. (2007). Explicatures and implicatures in magazine editorials: the case of the Nigerian TELL. In Taiwo, R., Odebunmi, A, and Adetunji, A. (eds.), *Perspectives on Media Discourse* (Eds.). Muenchen: LIMCOM GmbH. pp. 84–99.
- Osunbade, N. (2009). Explicatures in conversational discourse in Adichie's purple hibiscus. *Nordic Journal of African Studies*, 18(2), 138–153
- Osunbade, N. (2013). Gap filling and meaning recovery in conversations in Adichie's *Half of a yellow sun*. *Marang: Journal of language and literature*, 23, 43-58.
- Sperber, D. & Wilson, D. (1986). *Relevance: communication and cognition*. Oxford: Blackwell.

- Sperber, D. & Wilson, D. (1995). Postface to the second edition of *Relevance: Communication and cognition*. Oxford: Blackwell.
- Stanley, J. (2005). Review of R. Carston's Thoughts and Utterances. *Mind & Language*, 20(3), 364-368.
- Uwen, G. O. (2019). Morphological features in the language of selected Nigerian Paramilitary formations in Akwa Ibom State. *English Linguistic Research*, 8(1), 48-54.
- Uwen, G. O. (2020). Politeness strategies in lawyer-client interactions in English in selected law firms in Calabar, Cross River State. *University of Uyo Journal of English and Literature*, 12(1), 255-68.
- Uwen, G. O. & Ukam, E. I. (2019). A competence and content analysis of the English language of select Nigerian paramilitary operatives. *Currents in African Literature and the English Language*, 10(1), 123-132.