

Bridging Website Communication and Language: Translation Quality Assessment of Chinese Medical Texts on Malaysian Medical Tourism Websites

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Abstract—Language is considered a crucial factor in the effective website communication for businesses. This study aims to conduct translation quality assessment (TQA) of Chinese translations on websites of Malaysian hospitals targeting medical tourism. Twelve websites were selected using the partner membership list from the Malaysia Healthcare Travel Council, following specific inclusion and exclusion criteria. A total of 12 text groups comprising 38,085 words were manually collected as textual data for translation quality assessment. The texts were first analyzed for their situational factors and communicative functions, as this study is grounded in functional translation theories. Translation quality was assessed across four dimensions through descriptive analysis and textual analysis, employing a functional theory-guided TQA tool. The findings reveal a generally low translation quality of Chinese medical texts on the examined websites, with poor performance noted in target language proficiency and terminology translation. Common issues were observed, such as awkward expressions, spelling and punctuation errors, inadequate lexical choices, and inaccurate terminology translations. This study advocates that hospitals improve the quality of their website translations to ensure effective communication with target audiences, thereby facilitating consumption.

Index Terms—website communication, translation quality assessment, medical texts, medical tourism websites, Malaysia

I. INTRODUCTION

In an era where digital platforms are key gateways for businesses to market themselves (De la Cova, 2021), providing multilingual website content contributes to the online success of corporates (Qian et al., 2016). This phenomenon also extends to the medical tourism industry, where patients seek medical treatment abroad (Connell, 2013). Research indicates that hospital websites are critical tools for medical tourism marketing (Vogus & McClelland, 2016; Cham et al., 2020; Gedik et al., 2022; Truong et al., 2022), influencing potential patients' destination choices (De La Hoz-Correa & Muñoz-Leiva, 2019; Kopmaz et al., 2019; Jasem et al., 2022). These platforms help potential patients better understand treatment options (Hanefeld et al., 2015; Rayess et al., 2020) and mitigate their concerns about hospital credibility, physician expertise, and the quality of medical service in a foreign country (Mason & Wright, 2011; Khan et al., 2016; Sánchez-Cañizares et al., 2021).

The significance of website communication underscores the need for hospital websites to provide high-quality multilingual content for international patients, who often prefer their native language when seeking health information online (Jasem et al., 2022). Translation is thus one of the “first factors” that enables hospitals to attract patients from different countries (Gedik et al., 2022).

Among the numerous nations competing for medical tourism market share, Malaysia recognizes medical tourism as an important sub-sector of its national economy (World Travel & Tourism Council, 2019). The country emphasizes attracting Chinese medical tourists, who strongly favor Southeast Asian destinations (Statista, 2022) and represent Malaysia's second-largest inbound market (Malaysia Healthcare Travel Council, 2021). This necessitates high-quality Chinese translations on Malaysian hospital websites to enhance communication with this target demographic, particularly since even bilingual Chinese internet users favor Chinese over English when they need quick information-seeking (Wang & Komlodi, 2018).

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Yet, the quality of Chinese translations, particularly of medical texts—the most critical content type on medical tourism websites (Qolipour et al., 2018; Shaygani et al., 2023)—remains underexplored for Malaysian hospital websites. This suggests a gap between the acknowledged importance of website communication and the unassessed quality of language services. To address this gap, this study evaluates the quality of Chinese medical texts on Malaysian hospital websites, aiming to provide hospitals with evidence-based strategies to enhance website communication through optimized Chinese translations.

II. LITERATURE REVIEW

A. Medical Translation

Medical translation has been widely studied. Typically, it is considered a challenging task (Montalt & Gonzalez-Davies, 2014; Bell & Torres, 2024) with various difficulties. Many scholars argue that the substantial specialized terminologies in medical texts make it difficult for translators to choose appropriate terms and deliver accurate translations (Azimbayevna & Vohidovna, 2021; Alasbahy & Shamsi, 2023). In addition, Pan (2021) identified that capturing contextual nuances is another difficulty, which impacts the user-friendliness of target languages. Moreover, Badziński (2019) found that collocation is considered the most problematic and difficult issue by both medical translators and medical professionals, a challenge observed even at advanced language levels.

Furthermore, scholars have identified the important factors for medical translation. “Fluency” and “accuracy” are recognized as the two major factors affecting medical translation quality (Koby et al., 2014; Maučec & Donaj, 2019). Similarly, Karwacka (2014) also highlighted the importance of accuracy in medical translation. Moreover, it is contended that translating medical texts should take into account situational factors such as client satisfaction, text functions, and expectations of target readers (Karwacka, 2014; Montalt & Gonzalez-Davies, 2014; Pan, 2021). Likewise, Askehave and Zethsen (2000) emphasize offering user-friendly medical texts on websites, contending that this is essential for non-specialist target audiences.

Notably, it is acknowledged that medical translation exists in a variety of communicative situations, including the online advertising of health products and services (Karwacka, 2014; Montalt & Gonzalez-Davies, 2014). This indicates that the intended communicative functions of translation may change, as highlighted in functional translation theories (Reiss & Vermeer, 2014). Studies of medical translation also stress that the characteristics of medical language vary from genre to genre, depending on the communicative situation and its participants (Karwacka, 2015), and that medical translations should be drafted subjecting to target genre conventions (Montalt & Gonzalez-Davies, 2014). This highlights the necessity of assessing the quality of translations on medical tourism websites while taking into account their specific situational factors and communicative functions, as functionalists contend that these factors may indicate varied notions of translation quality (Reiss & Vermeer, 2014; Munday, 2016), while these websites were established by specific institutions with distinctive purposes, specifically to inform patients while encouraging consumptions (Crooks et al., 2011; Aghbolagh et al., 2024). To the best of our knowledge, little attention has been given to exploring or assessing medical translation on medical tourism websites.

B. Functional Perspectives on Translation Quality Assessment (TQA)

TQA has been a controversial topic over the past decades (House, 2014) with no universally accepted solution (Martínez, 2014; Martínez Mateo et al., 2017; Han, 2020). Different theoretical stances imply varied conceptualizations of the nature and goals of translation. Among these, functionalists contend that situational factors and text functions determine the notions of quality, as they influence the choice of translation strategies.

Specifically, functionalists assert that a quality translation should be adequate for the situation (Reiss & Vermeer, 2014, p. 87), taking into account situational factors such as the expectations of text producers and text receivers (Hönig, 1997; Munday, 2016; Nord, 2018). Moreover, they advocate for translation to achieve its communicative functions (Reiss, 1981; Newmark, 1988; Trosborg, 1997), which are embodied in the texts’ linguistic elements such as syntax, semantics, and tones. Consequently, the functional TQA approaches consider both the linguistic and extralinguistic dimensions when assessing translation quality. This underscores the necessity for analyzing the situational factors and text functions before translating and assessing the texts.

However, prevailing arguments about text functions contend that one should retain only the “dominant one” (Reiss, 1981) among the three basic functions proposed by Reiss (1976)—*informative* (representing objects and facts), *expressive* (expressing sender’s attitude), and *appellative* (making an appeal to text receiver). Meanwhile, this study found that a singular function could not capture the features of medical texts on medical tourism websites, which aim not only to inform but also to appeal to audiences. Overlooking any of these functions could result in inadequate notions of quality and a biased assessment. This further emphasizes the need for a TQA tool that adapts to the specific functions of the medical texts examined in this study, and assessing the translation while taking into account all primary text functions.

In addition to the general guide on translation quality assessment, functional theories, particularly the Skopos theory (Reiss & Vermeer, 2014), have detailed implication for TQA criteria. For instance, the “Intratextual coherence rule” in Skopos theory requires a translation to be coherent within itself, reading similarly to texts originally written in the

target language for the same purpose, and delivering proficient target language use. The “Intertextual coherence rule” highlights the importance of coherence between source text (ST) and target text (TT), aiming for “a maximally faithful imitation” of the ST (Nord, 2018). It suggests that the TT should accurately reflect the content contained in the ST, avoiding unwarranted alterations, omissions or additions. All of these factors should be incorporated into a functional theory-guided TQA approach.

III. RESEARCH METHODOLOGY

A. Selection of Websites

Websites of Malaysian hospitals (public and private hospitals, clinics, etc.) targeting international patients were selected. Hospitals were identified using the partner membership list from the Malaysia Healthcare Travel Council (MHTC), an official agency dedicated to promoting the medical tourism industry in the country. Seventy-seven hospitals were MHTC-listed. Websites were included if they: 1) offer accessible Chinese language options, and 2) provide medical texts. Websites were excluded if: 1) the site links remained inaccessible after five attempts, or 2) they provided Chinese translation for partial webpages or limited paragraphs. As a result, 12 websites were selected, labeled as “W1, W2 ... W12”. All site links were accessible as of February 2024.

B. Data Collection

Chinese medical texts on the selected websites were manually collected for translation quality assessment. Medical texts in this study refer to those introducing the hospital’s medical services, facilities, and technologies. Specifically, they were identified from the website’s menu sections labeled as “Medical Services”, “Medical Procedures”, “Medical Specialties”, “Conditions and Treatments”, “Centres & Services”, “Medical Technology & Facilities”, “Featured Clinical Services”, “Our Technologies”, “Innovation and Technology”, and so on.

The criteria for text inclusion were: 1) Texts were presented in paragraphs or embedded in the images; 2) Word count ranging from 1,500 to 5,000; and 3) Texts were presented on the first webpage of eligible section unless that word count was not met. The minimum count exists because some websites have a total text count of only this much for medical texts. Texts were excluded if 1) The Chinese text lacked a corresponding English source text for comparison, 2) They were duplicates of texts retrieved from the same webpage, or 3) They presented information deviating from the aforesaid information focus. A total of 12 text groups and 38,085 Chinese characters were collected for translation quality assessment. Table 1 shows the selected websites and the general characteristics of texts collected from them.

TABLE 1
SELECTED WEBSITES AND NUMBER OF TEXTS

Hosp. #	Hosp. Name	Number of texts	Website Addr.
W1	Alpha IVF & Women’s Specialists Centre	4,024	https://www.alphafertilitycentre.com/
W2	Cardiac Vascular Sentral Kuala Lumpur	1,814	https://www.cvskl.com/
W3	Gleneagles Hospital Kuala Lumpur	2,527	https://gleneagles.com.my/zh-chs/kuala-lumpur
W4	Gleneagles Hospital Penang	4,338	https://gleneagles.com.my/penang
W5	LohGuanLye Specialists Centre	754	https://www.lohguanlye.com/
W6	Penang Adventist Hospital	4,877	https://pah.com.my/
W7	Sunway Medical Centre	3,631	https://www.sunwaymedical.com/
W8	International Specialist Eye Centre	4,241	https://www.isec.my/
W9	Beacon Hospital	4,385	https://www.beaconhospital.com.my/
W10	Gleneagles Hospital Medini	3,177	https://gleneagles.com.my/medini-johor
W11	UCSI Hospital	1,094	https://www.ucsihospital.com/
W12	Gleneagles Hospital Kota Kinabalu	3,223	https://gleneagles.com.my/ms/kota-kinabalu
Total		38,085	

C. Data Analysis and TQA Instrument

The collected texts were first analyzed for their situational factors and communicative functions to inform the development of TQA criteria. Situational factors were analyzed through contextual analysis following a set of rubrics drawn from Munday’s (2016, p. 132) framework for five situational elements to be considered in a translational action. Specifically, the textual data from webpage texts were examined to identify clues about these situational factors. Communicative functions were explored via linguistic analysis, which involved examining the texts’ linguistic elements, such as vocabulary, sentence structures, and tones, through a manual text reading. The classification of these functions adopted the threefold rubrics proposed by Reiss (1971) in her Text Typology theory: informative, appellative, and expressive functions. Meanwhile, the analysis of translation quality was qualitative in nature, supplemented by descriptive analysis. Numerical ratings served to provide a directly observable result for quality assessment, while qualitative analysis focused on translation observations of exemplary translation practices and translation issues.

Colina’s (2009) functional-componential TQA tool was employed as the foundational instrument. It consists of four assessment dimensions (D.1-D.4), each comprising four descriptors labeled with letters from *a* to *d*. Descriptor letter

“a” denotes the least satisfactory performance under that dimension, while “d” denotes the most satisfactory performance. Tool users select the descriptor that best reflects the text’s performance to obtain a numerical rating of translation quality. We adapted the original tool for the examined medical texts based on their specific communicative functions. The adaptation primarily involved adjusting the weights of certain dimensions and the scores of their corresponding descriptors. We also refined a few expressions in the descriptors to better align them with the research subjects of this study. The adapted tool was checked for validity by two experts and four raters. Figure 1 outlines the analytical framework for translation quality assessment in this study, including the weights and “perfect state” of each dimension in the adapted tool.

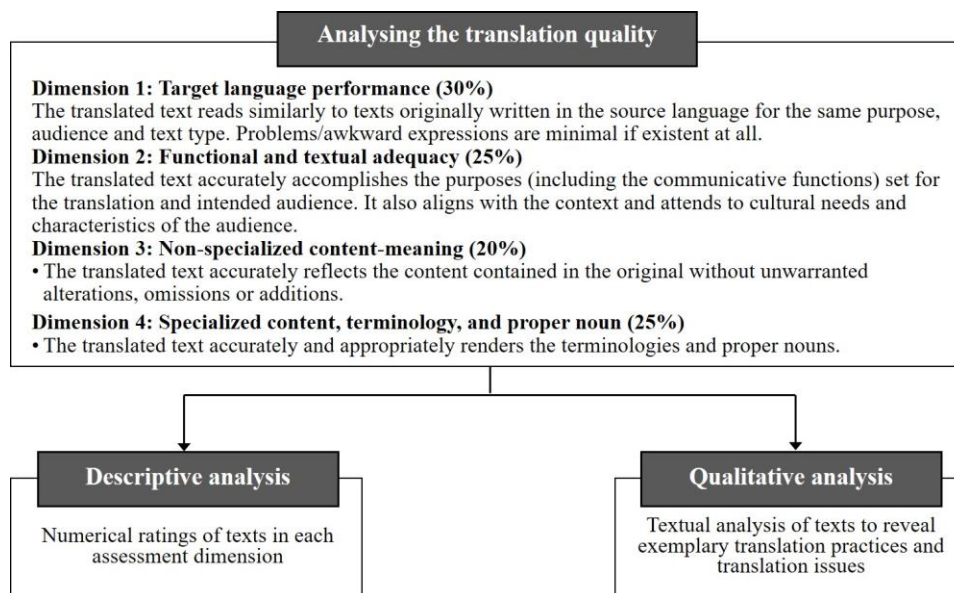


Figure 1. Analytical Framework for Translation Quality Assessment

IV. FINDINGS

A. Situational Factors and Communicative Functions of the Texts

The contextual analysis revealed that the examined translational actions took place on the medium of websites, with hospitals and potential patients acting as communicative partners. The texts were produced by hospitals or their departments associated with the information displayed in the text, collectively referred to as “text producer” in this study. The intended audiences were identified through analyzing the texts. For example, text excerpts “*You may be treated with...*” (W9) and “*...will evaluate, manage and treat your condition...*” (W3) addressed the reader as “you”, indicating that the text speaks directly to individuals who are considering or in need of medical treatment—specifically, the potential patients. Additionally, the primary purpose of these medical texts is to inform potential patients about technical information such as medical services, technologies and facilities. This is evidenced in phrases like “*ambulance services include...*”, “*We offer services from...to...*”, and “*Obstetrics and gynaecology are two surgical medical specialties dealing with ...*”. Moreover, the subsidiary purpose is to appeal to the patients by positioning the hospital as a competent care provider and encouraging patients to act. This was achieved by highlighting the hospital’s large number of surgical cases (“*The hospital does over 550 heart surgeries a year*”), the competence (“*...is open 24 hours a day and well-equipped to handle any...*”), the professional staff (“*Helmed by ...Trained Personnel*”), the additional expert support (“*With additional support from a dedicated team of experts...*”), and so on. Therefore, the examined medical texts serve a dual-purpose: 1) to inform audiences about technical information, and 2) to appeal to them by addressing their needs and concerns, thereby persuading them to choose the hospital and consume.

Linguistic analysis of the texts’ language elements revealed that these medical texts possess two communicative functions: primarily *informative* + complementarily *appellative*. For example, most of the texts employed descriptive sentences to present factual information, detailing the hospital’s medical services, facilities, and technologies. Moreover, the texts extensively used medical and technical terms, such as “cardiovascular disease”, “Polytraumas”, and “dialysis”, further highlighting the *informative* function by conveying detailed and specialized information about medical procedures and services. In addition to the informative elements, the texts also exhibited extensive appellative elements, such as the recurring use of reassuring and promotional vocabulary like “专业优质” (professional and premium), “最佳的” (world-class), “无忧” (hassle-free), and “舒适的” (comfortable). Moreover, it was observed that these medical texts frequently employed customer-centric language such as “以客户为中心” (customer-centered), “患者的需求” (patient needs), and “为您管理潜在的健康风险” (help you manage potential health risks). These linguistic elements

were selected to reassure potential patients about the high standards of care and to address their concerns, aligning with the *appellative* function.

These findings on the situational factors and communicative functions of the examined medical texts informed further adaptations to the original TQA tool. Specifically, we increased the weighting of Dimension 4 (Specialized content, terminology, and proper noun) by five points while decreasing Dimension 3 (Non-specialized content-meaning) by the same amount, reflecting the texts' primary role in conveying technical information to audiences. The weights of Dimension 1 (Target language) and Dimension 2 (Functional and textual adequacy) remained unchanged, as proficient target language use and functionally and textually adequate translations are critical for fulfilling the appellative function.

B. Findings From Descriptive Analysis of Translation Quality

The scores of each website across the four assessment dimensions are shown in Table 2.

TABLE 2
TQA SCORES

Website	TOA Score								Total
	D.1 ^a		D.2		D.3		D.4		
	# ^b	<i>n</i>	#	<i>n</i>	#	<i>n</i>	#	<i>n</i>	
W1	1.c	25	2.c	20	3.c	15	4.d	25	87.5
W2	1.c	25	2.c	20	3.d	20	4.c	20	90
W3	1.c	25	2.c	20	3.c	15	4.b	15	80
W4	1.c	25	2.c	20	3.c	15	4.b	15	85
W5	1.d	30	2.d	25	3.d	20	4.c	20	97.5
W6	1.c	25	2.d	25	3.d	20	4.d	25	95
W7	1.c	25	2.d	25	3.d	20	4.d	25	92.5
W8	1.c	25	2.d	25	3.c	15	4.c	20	92.5
W9	1.c	25	2.d	25	3.d	20	4.c	20	92.5
W10	1.c	25	2.c	20	3.d	20	4.c	20	87.5
W11	1.c	30	2.d	25	3.d	20	4.c	20	97.5
W12	1.c	25	2.d	25	3.d	20	4.c	20	90

Note: ^aD.1-D.4 refer to Dimensions 1 to 4; ^bSerial number in column “#” indicates the number of selected descriptor, such as “1.c” for “Descriptor c in Dimension 1” and “4.d” for “Descriptor d in Dimension 4”.

TQA scores varied across websites. The highest score was 97.5 points, achieved by two websites (W5 and W11). The lowest score was 80 points, observed from W3. The overall average score across all websites was 90.6 points. Websites of hospitals under the same group network showed variation in scores, with W3 (80 points), W4 (85 points), W10 (87.5 points) and W12 (90 points) all belonging to the Gleneagles hospital group. Furthermore, websites demonstrated distinct performance in translation quality across different assessment dimensions, as summarized in Table 3.

TABLE 3
NUMBER OF WEBSITES RECEIVING FULL SCORES, BY ASSESSMENT DIMENSIONS

Websites	Dimension 1	Dimension 2	Dimension 3	Dimension 4
(<i>n</i>)	(<i>n</i>)	(<i>n</i>)	(<i>n</i>)	(<i>n</i>)
12	1	7	8	3

The websites performed well in *Dimension 3* (Non-specialized content-meaning) and *Dimension 2* (Functional and textual adequacy), with 66.7% (*n*=8) and 58.3% (*n*=7) achieving full scores in these dimensions, respectively. Translation quality regarding *Dimension 1* (Target Language) was the least satisfactory, with only one website receiving full score. Moreover, the websites also underperformed in *Dimension 4* (Specialized content, terminology, and proper noun), with just three websites achieving full scores.

C. Findings From Qualitative Analysis of Translation Quality

(a). Target Language Performance

While the previous descriptive analysis revealed that the examined texts had the fewest text groups receiving full scores in this dimension, the qualitative analysis identified text excerpts showcasing exemplary practices with proficient language use.

For example, “We provide 24-hour ambulance services with an emergency response team that is ready to handle any medical emergency” was translated as “我们提供 24 小时救护车服务，并设有应急小组，随时待命处理任何医疗紧急情况” (W11). This text excerpt demonstrates proficiency in Chinese language use. It breaks the original long and complex sentence into shorter and more digestible segments, reflecting an understanding of Chinese syntactic and stylistic norms, which often favors simplicity and clarity in sentence constructions. Moreover, the phrase “随时待命处理任何医疗紧急情况” for “ready to handle any medical emergency” is not only syntactically well-formed but also semantically adequate, adhering to a hallmark feature of Chinese —using four-character idioms to convey language sophistication. This approach further enhances the idiomaticity and readability of the translation.

However, this study identified a significant number of translation issues related to target language performance in these texts. Among them, awkward expressions were the most common cause of unsatisfactory target language performance, mainly resulting from unnecessary transfers of sentence structures and elements, as exemplified in Table 4.

TABLE 4
EXAMPLES OF AWKWARD EXPRESSIONS

ST	TT	RT	Main causes of awkward expression	Source
When conservative approaches fail to alleviate symptoms and provide sufficient relief to your chronic joint pain...	当保守的方法不能减轻症状和提供足够的缓解你的慢性关节疼痛	当保守的方法无法减轻症状或为您的慢性关节疼痛提供足够的缓解	In fluent Chinese, the English verb phrase structure “provide A to/for B” is typically restructured as “provide B A” (为 B 提供 A), with the preposition “to/for” repositioned at the beginning.	W10
Interventional cardiology is a non-surgical option which uses... to repair...	介入心脏病学是一种非手术选择, 它使用...来修复...	介入心脏病学是一种非手术选择, 使用...来修复...	Relative pronoun “which” is necessary in English grammar to link sentence elements, while Chinese favors parataxis structure, relying more on the meaning rather than grammatical markers. Subject and object can sometimes be omitted if context allows. Therefore, “which” should not be transferred from ST.	W10
At the Accident & Emergency, the dedicated team of doctors and nurses...	在意外与急诊科, 我们的专业医生护士团队...	我们意外与急诊科的专业医生护士团队...	In English, prepositions like “at” are necessary to indicate location. However, in Chinese, the institution or place itself already conveys the location, so adding “在” would be redundant unless emphasizing the physical location.	W12

Note: “RT” refers to revised translation; curved line indicates where translation issues occur; straight line highlights revisions. Same below.

Other observed target language issues included: 1) ungrammatical language use, such as missing verbs and subjects; 2) spelling and punctuation errors, such as “普片用于...” (widely used to...) on W8, which should be “普遍用于”; 3) Inadequate lexical choices, which often arise from selecting terms that are semantically or contextually inappropriate, such as translating “non-surgical option” as “非手术选择” rather than “非手术治疗方案” (W3); and 4) redundant expressions and lengthy sentences, which typically result from direct transfer of elements from the ST or the overuse of modifiers without considering the more concise nature of Chinese syntax in certain contexts.

(b). Functional and Textual Adequacy

Results showed that the texts demonstrated a certain level of functional and textual adequacy, with translations attending to the norms of the target language or target audience, using context-specific lexical choices, and maintaining a professional and formal tone in general. Additionally, some translations showed consistency with the intended communicative functions of texts, such as by employing descriptive sentences, concise syntax, bullet points, and tables to achieve the informative function, and using call-to-action phrases, customer-centric language, and supportive and empathetic tones to address the appellative purpose.

However, this study observed multiple instances where these texts failed to fulfill their intended functions or align with their situational factors. Notably, many translations neglected Chinese readers as the target audience, exhibiting language use not attending to their cultural norms or expectations. For example, “Counselling Rooms” (W1) was translated as “辅导咨询室”, while “咨询室” is the more common term in Chinese to refer to a counselling room in a hospital or clinical setting. The translation “辅导咨询室” could mislead or confuse readers, as it suggests a room for educational or informal counseling rather than a formal, clinical consultation space. Additionally, “with the newest Revolution Apex” was translated as “借助最新的 Revolution Apex”. English typically refers to a specific product or brand name without explicitly indicating its nature, while Chinese speakers often add a noun after the proper noun to define the nature of the object more explicitly. Therefore, “仪” (device) should be added to provide explanatory information that is implicit in the ST. Additionally, some texts were not adapted for the professional and medical context, often due to expressions that were overly colloquial or insufficiently specific to the medical field. For instance, the expression “母亲与孩子” (Mother & Child; W10) is commonly used in personal or familial contexts and may not be suitable for formal or professional contexts. A more contextually adequate translation should be “妇女与儿童”.

(c). Non-Specialized Content-Meaning

The previous descriptive analysis revealed that the texts performed best in this dimension, with 66.7% (8 out of 12) of text groups receiving full scores. Their translations exhibited high comprehensibility and content accuracy, with no unwarranted changes from the original. Nevertheless, instances of unsatisfactory performances exist, including inaccurate renditions, important omissions or additions, and incomprehensible meanings where translations, though faithful to the source text, remained difficult to understand.

For example, in “We believe our...Laboratories are one of the best in Southeast Asia” (W1), “one of the best” was translated as “名列榜首” (rank first). This translation altered the original meaning, as the source phrase suggests excellence within a group but does not claim superiority over all others. Important omissions were also observed, where the original meaning was significantly distorted due to the loss of critical information. To name an example, “offers one-stop cardiac services to all ages” (W5) was translated as “为所有年龄层人士提供心脏方面的医疗服务”, where “one-stop” was omitted, resulting in a failure to accurately convey the convenience of service as intended in the ST. Incomprehensible meaning was observed in text excerpts like “也有相对反差效果的” (W8), where the TT is

challenging for Chinese readers to comprehend.

(d). *Specialized Content, Terminology, and Proper Nouns*

It is commendable that some text groups demonstrate the use of standard or widely accepted terminologies in China, acknowledging the differences between English and Chinese in referring to the same medical terms. For example, the term “新生儿加护病房” was employed to translate “Neonatal Intensive Care” (W5), a choice that reflects familiarity with terms widely accepted in Chinese, as opposed to a more literal translation like “新生儿集中护理”.

Nonetheless, the qualitative analysis identified several translation issues concerning terminology and proper nouns. Common issues included not using standard or widely accepted terminology (see examples in Table 5) and terminology errors. No issues were observed in the translation of proper nouns.

TABLE 5
EXAMPLES OF NOT USING STANDARD OR WIDELY ACCEPTED TERMINOLOGY

ST	TT	Standard/widely accepted term in China	Source
Vascular & Endovascular Surgery	血管和血管腔外科	血管与腔内血管外科	W2
Heart rhythm abnormalities	心律不整	心律不齐	W2
Hybrid operating theatre	混合手术室	复合手术室	W2
Upper Gastro Intestinal (GI) Surgery	上消化肠道外科	胃肠外科	W3
Paediatric surgery	儿科外科	儿外科	W4
Bariatric Surgery	减肥手术	减重手术	W12

In addition, the examined texts were observed to have incorrect terminology use, impacting the accuracy of specialized content. For example, “Upper Gastro Intestinal (GI) Surgery” (W3) was translated as “上消化肠道手术”, which, according to the given context, refers to the medical department rather than the surgical act. Additionally, “acute team” in W7 was translated as “急性团队”, rather than “急救团队”. This error resulted from a literal translation of “acute” without considering the context, leading to an inadequate lexical choice.

V. DISCUSSION

A. *Target Language as a Key Factor Influencing High-Quality Translation*

This study identifies target language proficiency as the most significant factor influencing the quality of medical translations on Malaysian hospital websites. The examined texts had the poorest performance in target language proficiency, with just one of the 12 text groups receiving full scores in this dimension. Correspondingly, the qualitative analysis revealed that these texts contained more instances of inadequate target language use, such as awkward expressions and inadequate lexical choices. This finding aligns with prior studies, which recognize fluency as one of the two key factors in achieving high-quality translations (Koby et al., 2014; Maučec & Donaj, 2019).

From the perspective of Skopos theory (Reiss & Vermeer, 2014), inadequate target language use undermines the “intratextual coherence” of translations, as the translated texts are not coherent within themselves and fail to read like texts originally written in the target language. Such deficiencies can negatively affect the texts’ readability and comprehensibility, ultimately compromising the quality of translation.

Among the issues leading to unsatisfactory target language performance, awkward expressions were the most prevalent, primarily arising from unnecessary transfers of sentence structure and elements. This may stem from a key linguistic feature of medical texts: medical sentences are often complex and long, bringing more challenges in addressing the syntactic differences between English and Chinese. English tends to favor hypotaxis (Matthiessen, 1995; Halliday & Matthiessen, 2013) while Chinese prefers parataxis (Wang, 1944; Li & Yu, 2021), resulting in the distinct “tree-like” structures of English and “bamboo-like” constructions of Chinese (Lian, 1993). This syntactic difference indicates that rigidly transferring the source language’s sentence structure can result in awkward expression in the target language. Additionally, certain linguistic elements in the source language, such as specific relative words, conjunctions, and prepositions, should not be transferred to the target language to ensure idiomaticity and fluency. Given the prevalence of long and complex sentences in medical texts, translators need to address the syntactic differences between the two languages while also adhering to other linguistic norms of Chinese to produce fluent translations. On one hand, fluency is one of the two major factors affecting the quality of translation; on the other hand, translations with fluent and idiomatic expressions could enhance the appeal of texts to target audiences, thus facilitating the achievement of the intended communicative function of texts.

Inadequate lexical choices, often resulting in improper collocations, further hinder the quality of translated texts. As Baker (2018) stated, “successful translations must consider...and collocational appropriateness to achieve naturalness and coherence in the target language”. Meanwhile, some studies have found that collocation is considered the most problematic and difficult issue by both medical translators and medical professionals (Badziński, 2019), highlighting the challenges faced by medical translators in making appropriate lexical choices.

Overall, to avoid target language issues and ensure proficient language use, MT website translation should move beyond literal renderings and accuracy, and emphasize fluency and appropriateness, especially by adhering to Chinese

linguistic norms.

B. Challenges in Terminology Translation

This study identified terminology issues as the second most prevalent problem in the medical translations on the examined websites. Results show that only three of the 12 text groups (25%) received full scores in this assessment dimension. Notably, a substantial number of medical terms was either inaccurately translated or failed to employ standard or widely accepted Chinese terminology. Most of these issues arose from insufficient knowledge of Chinese linguistic norms, while others appeared to result from erroneous lexical choice, likely caused by low-quality machine translation technologies.

Terminology is pivotal in ensuring high-quality medical translations on hospital websites, where precision and clarity are crucial. Accurate terminology guarantees that medical information, such as descriptions of a hospital's services, is conveyed without ambiguity, preserving the credibility of the hospital and ensuring that the target audience receives accurate information. Given the extensive use of medical terminology in hospital website texts, inadequate terminology translation not only substantially undermines overall accuracy—one of the two key factors in achieving high-quality translations (Koby et al., 2014; Maučec & Donaj, 2019), but also compromises the text's informative function. Furthermore, the use of non-standard terms can confuse audiences or lead them to perceive the hospital as less reliable or knowledgeable.

To ensure high-quality terminology translations, translators could consult standardized terminology resources provided by reputable Chinese institutions, such as the *Common Clinical Medical Terms (2023 Edition)* issued by the National Health Commission of China. Alternatively, they may explore the websites of leading hospitals in China to identify widely accepted or standardized terminology use.

C. Consideration of Situational Factors and Text Functions

Although the texts obtained relatively satisfactory scores for functional and textual adequacy, this study identified several issues that are important to highlight. Specifically, since medical texts on these websites aim to not only inform but also appeal to Chinese audiences, translations should attend to their cultural norms and needs by using culturally appropriate expressions. Previous studies (Karwacka, 2014; Pan, 2021) also highlighted that a high-quality medical translation should meet the target reader's expectations. Moreover, lexical choices, apart from considering the linguistic norms of source language, should take into account the professional and medical context of hospital websites. In other words, word use should align with the professional tone and formal writing style to reinforce the hospital's image as a professional entity, as well as employ words and terms that are conventionally used in the medical context. Additionally, since medical texts on hospital websites serve an appellative function with potential patients as the target audience, translations should use user-friendly language with a warm and polite tone, such as addressing "you" as "您", and, on the condition of ensuring accuracy and idiomaticity, should minimize the strangeness that specialized medical language might bring to audiences.

It's important to highlight that although functionalists argue that there is a hierarchy of text functions and the dominant one shall prevail (Reiss, 1981, p. 181), this study asserts that this concept does not apply to medical texts on the examined websites. While medical texts are traditionally seen as an informative text type (Pan, 2021; Yuan & Guo, 2022), a Chinese translation that is accurate in content, aligning with the informative function, but awkward in expression, could undermine the hospital's image as a capable, professional, and dedicated institution. This may damage the hospital's appeal to potential customers. Therefore, it is essential for medical texts on the examined websites to effectively fulfill both the informative and appellative functions.

D. Implementing Quality Assurance Particularly for Machine Translation

The identified issues highlight the necessity for hospital managers to implement quality assurance for translations on their websites, which are often caused by low-skilled human translators or "imperfect" machine translations. Extensive studies have emphasized the vital role of human check in ensuring translation quality (Torres-Hostench et al., 2015; Mellinger, 2018; Maučec & Donaj, 2019; Rivera-Trigueros, 2022).

It's worth noting that while neural machine translations, including AI-driven options, are increasingly used in various contexts (Dabre et al., 2020; Briva-Iglesias et al., 2023) and can help hospitals save time and resources, they still fall short in areas such as fluency (Stasimioti et al., 2020) and accuracy (Shouaib, 2022). Specifically, studies show that machine translation exhibits lower accuracy when processing long and complex sentences (Koehn & Knowles, 2017), suggesting the challenge it may face when translating medical texts, which often contain many such sentences. This issue is further complicated when the target language is Chinese, a low-resource language where machine translations frequently struggle (Kocmi et al., 2023). Additionally, machine translation still has room for improvement in addressing cross-cultural differences (Sulaiman, 2021), which is particularly important for hospital website content as culturally-appropriate texts could enhance their appeal to audiences, thereby attracting consumption.

VI. CONCLUSION

This study aimed to assess the Chinese translation quality of medical texts on Malaysian hospital websites. Overall,

the low quality of medical texts on the examined websites aligns with the argument that medical translation is a challenging task (Montalt & Gonzalez-Davies, 2014; Bell & Torres, 2024). In addition to previous findings that the challenge is mainly brought by factors such as specialized terminologies (Azimbayevna & Vohidovna, 2021; Alasbahy & Shamsi, 2023) and contextual nuances (Askehave & Zethsen, 2000; Pan, 2021), this study found that the syntactic differences between English and Chinese, compounded by the extensive presence of long and complex sentences in medical texts, further aggravated the difficulty. Additionally, the dual purpose of these texts—to inform and appeal to audiences—adds another layer of difficulty. This requires translators to not only deliver accurate translations to convey information that hospitals intend to provide, but also use customer-centric language and a warm tone, while maintaining the professionalism of text producers. Failure to address the aforementioned factors can impede hospitals' ability to provide high-quality translations on their websites, potentially compromising the effectiveness of website communication. Malaysian hospitals should make efforts to improve the quality of Chinese translations on their websites. They should also emphasize implementing quality assurance, perhaps by appointing a separate individual with expertise in both Chinese and English languages, as well as knowledge of healthcare, to check and revise the translated Chinese texts.

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