Tips on Building Doctor/Patient Relations

page 1 of 2

Most of the information used for diagnosis and management is gleaned from the H&P. It is important that you are able to effectively communicate with patients to best help them. Essential to communication is being able to quickly establish rapport with your patients.

- Demonstrate to your patients that you understand their situations and feelings by showing empathy during patient interviews.
 Empathetic communication is one of your most valued modalities and helps to ensure a trusting relationship between you and your patients.
 The following steps will strengthen your patient communication skills:
 - 1. Seek to minimize distractions and interruptions when visiting with your patients. Put your beeper on silent mode during your visit. Close a door if outside noise is a distraction. (However, ask your patient's permission first.) Remember, too, that patients can offer great insight into their conditions from what they tell you. So limit the number of times you ask questions or otherwise interrupt when your patients are presenting their chief complaints.
 - Engage in active listening. Concentrate on what the patient is communicating verbally and nonverbally. Take into account both facts and emotions.
 - 3. Be deliberate about the nonverbal cues you send. Lean forward, maintain eye contact, nod appropriately, and don't cross your arms.
 - 4. Offer concrete feedback. When you summarize what you've heard, frame your responses by saying "Let me see if I have this right..." Seek to identify or clarify the patient's feelings by saying "Tell me how you're feeling about this" or "I have the sense that..."

- 5. Allow the patient to correct or add to your responses until he or she confirms your understanding "Did I miss anything?" According to several sources, the effective use of empathy promotes diagnostic accuracy, therapeutic adherence and patient satisfaction.
- Enhance your counseling and listening skills by using a simple five-step process. Gather information about the context of the patient's visit by asking: 1) What is going on in your life? 2) How do you feel about that (or how does it affect you)? 3) What about the situation troubles you most? And 4) How are you handling that? Then show understanding by observing: 5) "That must be very difficult for you." This technique is identified by the acronym BATHE (which stands for background, affect, trouble, handling and empathy).
- Be prepared to provide culturally responsive care. Be aware of how your own cultural values, beliefs and assumptions may influence your delivery of care. Understand the impact of culture on your patient's recognition of symptoms and behaviors related to illness. Be ready to address language barriers through the use of family members, translators/interpreters and other community resources, if necessary.
- Gain a new perspective on your patients by assessing your own biases. You will encounter patients who, for one reason or another, cause you frustration, grief or even anxiety. If this is the case, take time to examine why you feel this way. The reason a particular patient gives you trouble might be found in your own past. For example, if your uncle was noncompliant with his diabetes management, perhaps you now have less tolerance of patients who exhibit similar behavior. Or, if your mother died of a heart attack, you may do a lot of second-guessing when dealing with cardiac patients. Acknowledging your biases and



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- feelings toward certain behaviors or conditions will help you reduce those feelings of frustration or anxiety and allow you to focus on each patient as unique and in need of your medical counsel.
- Ask about any alternative treatments that the patient may be using. More patients are turning to complementary and alternative medicine (CAM) providers for help with their symptoms. Knowing this information will help you to make an accurate assessment and develop a treatment plan for the patient. Some schools include information about CAM in their curriculum, but many do not. The National Center for Complementary and Alternative Medicine, part of the National Institute of Health, has a Web site at http://nccam.nih,gov that includes fact sheets, consensus reports, complementary and alternative medicine databases and more.
- Talk with your patients about lifestyle issues.
 Many students and physicians alike are hesitant to bring up unhealthy behaviors with their patients.
 Remember these tips to guide you in this process:
 - 1. **Expect resistance to change.** Understand and appreciate the fact that many people derive pleasure from unhealthy habits, such as smoking.
 - Avoid merely listing the negative effects of your patients' actions; instead, highlight the positive effects a new lifestyle could bring.
 - Allow your patients to express their concerns about changing their behaviors.
 - 4. Ask your patients how confident they are that they can change and what will be the most difficult aspect of changing for them. Open communication is key to being the best advocate for your patients. For more guidance on this process, consult the book, Communicating With Your Patients Skills for Building Rapport, published by the American Medical Association.

- When taking an H&P, practice writing your notes while interviewing the patient. Many students jot down responses, then transfer them a couple of times before writing the actual SOAP or Progress Note. While some practice may be necessary before you are comfortable writing and talking to the patient at the same time, eventually it will save you considerable time.
- Don't just write an order be sure to tell either the nurse or clerk what the instructions are. By verbalizing the order, it will be implemented more quickly, which is ultimately better for the patient.
- If possible, look at your patients' X-rays instead of relying on reports. Although this may seem time-consuming at first, in the long run, it will save you time. You'll gain valuable experience in reading and interpreting X-rays, a skill you will rely on throughout your career.
- Pay special attention to how your attending or preceptor approaches patient encounters with difficult people. Observe the ways these physicians react to verbal and nonverbal cues, such as body language. What types of questions do they ask? How do they tailor their questions and behavior in response to the patient? There are specific coping mechanisms that physicians can utilize during "problem-patient" encounters, such as allowing patients to vent, trying not to judge, remaining calm, finding out underlying psychosocial factors, and modifying the patient interview. If you don't understand why your preceptor or attending did or said something, ask. Thought processes are just as important as words and actions.
- Keep a patient diary. Use this private journal to document your personal educational journey. This exercise will allow you to reflect upon what you've learned and the progress you have made in building doctor/patient relationships.

