PATIENT-PHYSICIAN COMMUNICATION

James Lechner, MD

Haleigh Werner, MD
COMMUNICATION TASKS

- Engagement
- Empathy
- Education
- Enlistment
ENGAGEMENT

• Connection between the physician and patient that continues throughout the visits

• Sets the stage for developing a partnership

• Barriers
  – Failure of introductions
  – Inquisition type questioning
  – Interruption of patient
ENGAGEMENT

• Showing interest in the patient as a person
• Asking patient’s expectations/agenda
• Prioritizing and negotiating the agenda
• Avoid medical jargon
ENGAGEMENT

• “You don’t get a second chance to make a first impression”
ENGAGEMENT

• Successful engagement
  – Quantity and quality of information improved
  – Groundwork for successful foundation laid
  – Patient gains sense of partnership
  – Adherence to treatment plan
EMPATHY

• Patient feels she/he has been seen, heard, and accepted as a person

• “Comfortable” medical language creates a barrier to empathy

• Myth: empathizing with a patient will require more time than physician has to give

• Mindful of physical barriers – COMPUTERS!!!!!!
EMPATHY

• Acknowledge patient’s thoughts/feelings without judgement

• Allows for self-disclosure

• Open “windows of opportunity” with open ended questions
EDUCATION

• Cognitive, behavioral and effective needs addressed

• Approximately 1 minute is spent on education (physicians overestimate this by 9 times)

• Poor education = poor communication
EDUCATION

• Assess what patient knows

• Ask questions to determine what patient is wondering

• Probe empathically if necessary

• “What do you think is going on?”
EDUCATION

- What has happened to me?
- Why has this happened to me?
- What will be done to me?
- Why will they do this and not that?
- Will it hurt? What are the side effects?
- When will you have the test results?
- When will I have the test results?
EDUCATION

• Education has not taken place until patient gains/learns something

• Make sure patient understands information given

• Success leads to less anxiety, both share in the responsibility of treatment, mutual satisfaction
ENLISTMENT

• Invitation to the patient by the physician to collaborate in the decision making/treatment plan

• Goal is to adhere to treatment plan

• Factors in adherence
  – Perception of illness
  – Efficacy and duration of therapy
  – Relationship between physician and patient
ENLISTMENT

• Flexibility
• Ask for feedback
• Summarize agreed upon plan
• Discuss follow up steps
• You are the priority
• Need a physician you can communicate with
• If not, change