

## Pearls on enhancing the physician-patient relationship

**O**b/Gyns are seeing more patients than ever before. According to a recent ACOG survey, the typical Ob/Gyn averages 95 office visits per week. Physicians also are devoting more time to administrative duties and less time to hospital rounds and clinic visits compared with recent years. Clearly, these changes make it harder for doctors to spend quality time with each of their patients.

But enhancing the patient-doctor relationship need not be difficult. In most cases, subtle gestures can have an enormous impact on patient satisfaction and continuity of care. Here, we depart from our usual Pearls focus, the recommendations of a single physician, to offer pointers from a number of Ob/Gyns located throughout the United States. They share pearls on topics ranging from the first-time Pap experience to making patients feel more comfortable during an office visit.

**New patients.** Take a picture of every patient and staple it to the inside of her chart. This will help you remember each woman, especially when you are communicating via phone or e-mail. It also will help you notice new hairstyles or other changes, so that you can comment on them. The familiarity often comforts patients.

—*Sunita Giyanani, MD, Vineland, NJ*

**First-timers.** When I encounter a young woman who is nervous about having her first Pap smear, I begin the procedure by asking: “Do you know that muscle you’d squeeze together if you wanted to stop urinating?”

When she responds affirmatively, I tell her to squeeze that muscle. Then I tell her to relax. While showing her the speculum, I then say: “I’m going to place this little speculum on the back of that muscle. All I want you to do is think ‘loose’ with regard to that muscle, and everything will be okay.” It works like magic.

—*John Hannig, MD, Escondido, Calif*

**The loud gravida.** From time to time, I encounter an inconsolable “screamer” in early labor, a patient who is creating noise so piercing and persistent that staff members find it virtually impossible to do their jobs. To stop the screaming or lessen its intensity, I tell the patient: “Don’t scream. You’ll wake up the babies in the nursery!” I don’t know whether this appeals to the patient’s maternal instincts or not, but it works every time.

—*David Schneider, MD, Bedford, Ind*

**Comforting the patient.** Never speak to your patient with your hand on the door. She will not only feel rushed but that what she is saying is unimportant. Instead, sit down in the office or examining room. This will convey that you are truly listening and put her at ease.

—*Angelica Zaid, MD, Encinitas, Calif* ■

