

How to Say 'I'm Sorry' for Unexpected Outcomes

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WASHINGTON — An empathetic disclosure that a medical error has occurred, accompanied by a genuine apology, may help avoid a malpractice lawsuit, according to Dr. Neil S. Prose, director of pediatric dermatology at Duke University Medical Center, Durham, N.C.

On an almost daily basis, doctors are called on to deal with patient disappointment. Some cases involve medical mistakes and others do not. In any case, "How we communicate with patients and their families is really half of the work we do as doctors, and the other half is diagnosis and treatment," Dr. Prose said at an annual meeting of the American Academy of Dermatology. "Unfortunately, we spend a lot of time on diagnosis and treatment and never talk about what we say to patients and how they respond, and so a whole half of our lives is neglected."

In a presentation designed by the Institute for HealthcareCommunication (for-



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merly the Bayer Institute), a nonprofit group dedicated to improving communication between physicians and patients, Dr. Prose discussed empathetic ways of speaking with patients when they have experienced disappointing outcomes, either with or without a medical mistake on the health care provider's behalf. He stressed, however, that his recommendations are generic skills and that, when appropriate, the counsel of a lawyer or risk management team should be heeded:

► **Create the right setting.** Close the door and make sure that the room is quiet. If possible, turn off any phones or pagers. Sit down. Offering the apology while seated, rather than standing, can aid in the patient's eventual acceptance of the apology.

► **Be as sincere and specific as possible.** In addition to telling the truth about what happened—whether the mistake is a botched biopsy or something more serious—Dr. Prose said that offering a sincere and simple apology can make a huge difference. Also, specificity is crucial. Saying, "I'm sorry that your family has been through so much pain this last week as a result of this procedure" is preferable to "I'm sorry this happened."

Dr. Prose added, "Saying 'I wish things were different' is a wonderful way to create an alliance with the patient and his or her family."

► **Have a plan.** A pledge to correct the mistake also is important. "People want to know how you're going to prevent this from happening again. You want to have a plan before you go in the room," he said.

► **Be aware of your own feelings.** Often,

the fear of confrontation and the desire to rectify the situation as quickly as possible can prevent physicians from taking into account their own feelings about the situation. "Wanting to run away is a natural response. You have to be aware of how you're feeling before you walk in the room [with a patient]. We have to be knowledgeable about ourselves and our own natural tendencies." Being either defensive or overly despondent, for instance, can alienate the patient and his or her family. "Seek

a balance by knowing who you are and what you tend to do," he advised, including knowing "what kinds of patients drive you crazy."

"For those of us who internalize [mistakes] and lose sleep over them, you have to be able to talk to yourself and say, 'I'm trying to be a good doctor, and now I'm going to try and do my best to make the situation right.' It's hard sometimes. It's a struggle," Dr. Prose said.

► **Be a good listener.** "Our biggest pitfall

[as physicians] is trying to talk people out of the way they're feeling," he said. "Listen before giving advice, and relisten to the story, as much as you don't want to hear it."

► **Get permission to proceed.** Finally, after telling the truth and listening patiently, "you reach a point where you actually ask permission before moving on. Say, 'Would this be an okay time for me to tell you what I think we should do next?' That process has a remarkable effect," Dr. Prose said. ■

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References: 1. Data on file, Sucampo Pharmaceuticals, Inc. 2. AMITIZA [package insert]. Bethesda, Md: Sucampo Pharmaceuticals, Inc.; 2006.

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