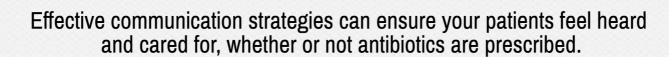


GET SMART

HOW TO TALK TO YOUR PATIENTS ABOUT ANTIBIOTICS



GAIN TRUST



Trust is one of the cornerstones of effective patient-doctor relationships and is critically important in the management of infections. Trust can be demonstrated verbally and non-verbally. As one expert said, "Be careful, cautious and complete." Wash your hands. Listen intently. Make eye contact. Give clear instructions and explanations. Remind patients that their well-being is your priority.

EMPATHIZI



Consciously demonstrating empathy validates your patient's concerns and builds rapport. This can also be done verbally and non-verbally. Indicate that you understand their concerns.

TAKE TIME



Take time to elicit expectations. Directly ask what your patient expects from their clinic visit. You may be surprised by the answer. Data indicates that clinicians often over-estimate their patients' desire for antibiotics and that most patients instead want reassurance and strategies for symptomatic relief. If your patient does want antibiotics and their use is not appropriate, it's important to have that out in the open so that you can manage their expectations over the course of the visit.

SHARE FINDINGS



Share reassuring components of the history and physical exam during the encounter. This demonstrates that you are paying attention to your patients's concerns and builds the case for your diagnosis.

MAKE A SPECIFIC DIAGNOSIS



Examples of this include viral pharyngitis or viral bronchitis. Avoid dismissive statements such as "just a virus." Giving patients a specific, medical diagnosis validates that you "believe" they are ill and you know why they are sick. The use of rapid diagnostics may also allow you to tell patients that they do not have certain illnesses, like strep throat.

ARTICULATE WHAT'S NEXT



Describe what your patients can expect in a normal course of illness for the specific diagnosis you made and when he or she will start to feel better. Provide a contingency plan in case your patient's symptoms worsen. This could be a phone call from your clinic staff to check in, a plan for urgent follow-up if needed, or, if antibiotics might be necessary later in the illness like in some cases of otitis media, a delayed antibiotic prescription.

RESIST UNNECESSARY USF



Patients may have received antibiotics from you or other providers for similar symptoms in the past. Instead of "giving in" when they are not indicated, educate your patients about their condition, provide reassurance that their condition will get better without antibiotics and unnecessary antibiotics would only expose them to harm. Explain our improved understanding of antibiotics. Highlight the public health implications, including the emergence of multi-drug resistant organisms, which have received more public attention recently. Emphasize that avoiding antibiotics when they are unnecessary is the best care you can provide as their clinician.

TREAT



Give specific instructions for symptomatic relief. Write them down on paper so your patient doesn't leave the office empty handed. In the cases in which antibiotics are needed, use them. Fortunately, we have national guidelines for common infections that help clinicians make decisions about when to use antibiotics in common infections and which antibiotics to use.

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