

# Difficult Doctor-Patient Interactions

## BREAKING BAD NEWS

### PREPARING THE SETTING

- Ensure privacy, uninterrupted time
- Involve significant others
- Sit down – look attentive & calm

### INITIATING THE SESSION

- Summarize where things are
- Discover what has happened since pt last seen
- Assess what the pt knows & is fearful of... *Before we start, I want to ask you what you know about this problem and what you've been thinking about it...*
- Warn the pt that difficult info is coming... *I've found a problem and I want to spend some time talking with you about it... I'm afraid it looks more serious than we had hoped...*
- Gauge how much the pt wants to know... *Some people like detailed information, others just want the big picture. What is your preference?*

### SHARING INFORMATION

- Give basic info simply & honestly. Repeat important points
- Align or match pt's terminology by using words they use. Avoid technical terms
- Give info in small chunks
- Check repeatedly for understanding & feelings
- Acknowledge pt's feelings & respond to them
- Avoid giving too much info too early. Do not overwhelm

## BEING SENSITIVE & EMPATHETIC TO THE PATIENT

- Learn what gives the pt hope & support those resources... *What's really important to you now and how can we help you do that?...*
- Pause often to give pt opportunity to ask questions
- Gauge pt's need for further information as you go. Give more information as requested
- Empathize by acknowledging pt's emotions
- Validate pt's feelings by reassuring the pt that their feelings are normal
- Check understanding of information... *Would you like to run through what you are going to tell your wife?*

## PLANNING & EMOTIONAL SUPPORT

- Identify a plan & time frame for what is to happen next
- Discuss treatment options & opinions, tempering hope with realism
- If the pt wants to discuss the future, give a prognosis. Avoid giving too definite a time frame
- Emphasize partnership & ally yourself with the pt... *We can work on this together...*

## FOLLOW-UP & CLOSING

- Summarize & check for additional questions
- Identify support systems, involve relatives, friends
- Offer to see/tell partner or others
- Make written materials available, if applicable
- Document what you told the pt & relatives to facilitate coordination of care

**TIPS** Rehearse the beginning of the interview - go over some of the words you will use, identify the outcomes you desire and anticipate the patient's questions and reactions.

### References:

Buckman, R. (2005). *Breaking Bad News: The S-P-I-K-E-S Strategy*. Community Oncology 2, (2), 138-142.

Platt, F., & Gordon, G. (2004). *Field guide to the difficult patient interview (2<sup>nd</sup> ed.)*. New York: Lippincott Williams & Wilkins

Silverman, J., Kurtz, S., & Draper, J. (2005). *Skills for communicating with patients (2<sup>nd</sup> ed.)*. Oxford: Radcliffe Publishing