Clinical Pearl
Ten rules for keeping the art of medicine alive in daily practice
by Edward C. Rosenow III, MD, MS

1. Be on time. If you aren’t, apologize. If you know you’ll be late, notify the patient. Doing so tells the patient that you respect his or her time.

2. Find a way to touch your patient; the simplest way to do this is to shake hands when you enter the exam room. Look the patient in the eye when you shake hands. Maintaining eye contact throughout the visit conveys sincerity and honesty.

3. Be interested in what your patient is saying—she can tell if you are faking it. Cultivate curiosity about how this patient is different from other patients.

4. Communicate. Lack of communication is the most common complaint patients have about their physicians. This does not just mean talking—it also means listening. Being an active listener and responding to patients and their families is a vital skill. Effective communication includes explaining tests and diagnoses with patients in plain English.

5. Learn to appear relaxed and not in a hurry. In situations of illness or crisis an aura of calmness goes a long way. It shows patients that, at the moment, their care is more important to you than the next patient.

6. Never refer to a patient by a diagnosis. Patients are individuals, not loci or hosts for disease. Do not tolerate others’ use of such terms; such usage reinforces a service-oriented culture and makes the patient-physician relationship less personal.

7. Convey a sense of warmth. This can’t be done without smiling. Endeavoring sincerely to establish rapport with patients helps put them at ease.

8. Be mindful of how often you interrupt. Studies have shown that the physician usually interrupts the patient less than 20 seconds into the patient’s side of the dialogue.

9. The needs of the patient must come first. This means you have to put aside your own prejudices and biases to help the patient. This clinical encounter is for the benefit of the patient—not the physician.

10. The “platinum rule” of medicine is: treat every patient the way you would want a member of your family treated. A twist on the “golden rule,” it is one of the best ways to be aware of the needs and fears of our patients.
Note

Edward C. Rosenow III, MD, MS, spent his professional career at the Mayo Clinic in Rochester, Minn., retiring after 31 years on the staff. Prior to his retirement he was the Arthur M. and Gladys D. Gray Professor of Medicine.

The viewpoints expressed on this site are those of the authors and do not necessarily reflect the views and policies of the AMA.

Copyright 2006 American Medical Association. All rights reserved.