## Best Practices I've Observed in My Physicians

by Brenda Denzler

It's no secret to those who know me—and especially to my doctors—that I have a deep and abiding mistrust of them and their entire profession. This is a consequence of a couple of gnarly back-to-back medical encounters when I was very young. Lasting repercussions and all that....

You'd think, given that doctors saved my life not too long ago, everything would be all better now. Sadly, PTSD doesn't work like that. Those of you who have it for whatever reason know what I'm talking about.

The upshot is that when I'm around physicians and those of similar ilk, I tend to operate with my guard up and a predisposition to hold them at arm's length in whatever ways I can and still get the job done.

Some doctors, though, know how to disarm me pretty quickly because they're just so darned good! I don't mean "good" at knowing a lot in the field of medicine. I expect that as a bare minimum of any of my health care providers. I mean "good" at knowing how to do medicine.

Lots of people can become qualified to dispense medical advice; only some of them actually become healers. What's the difference? The quality of the doctor-patient relationship that they build.

The best doctors I have ever found know how to hear meaning...not just listen to words. This is a surprisingly sophisticated skill and can be especially challenging—and thus especially important—in the medical setting.

They answer patient questions at a level the patient can understand in terms of the complexity of the ideas they're discussing and the vocabulary they're using. They will answer these questions as often as necessary from encounter to encounter. If the same question(s) come up a lot, either the patient isn't

understanding what they're saying and they need to speak in simpler terms, or the patient isn't comfortable with what they're saying and is trying to ask for something different but is reluctant to be so bold as to flat-out do so because it feels dangerously confrontational.

When a patient asks for—or needs to hear—info, the best doctors will provide it frankly, without evasion or dodging. For example, when the patient says, "If I get mets (meaning "metastatic cancer"), it's fatal, isn't it?" they don't say in response "We have a lot of things we can use to treat this kind of cancer." That's a big ol' dodge. Instead, they say, "Eventually, yes. Mets are almost always fatal. But for most people that doesn't happen right away, because we have a lot of things we can use to treat you and keep the disease at bay for a while so that you can still enjoy your life."

The best doctors never play word games. They don't let patients walk away thinking that "We can treat this" is the same thing as "We can cure this." Or thinking that "survival" means "without disease." When doctors talk about survival, it may only mean "alive," not "alive and disease-free"—something patients may not realize. There are a lot of occasions when letting the patient assume the doctor means one thing when they really mean something just a bit different is the easiest thing for the doctor to do. It is not, however, the right thing.

The best doctors take patient requests for unusual actions seriously, without the patient having to stomp their feet and get progressively louder and uglier in order to be heard and have their request honored—even when those actions are not standard operating procedure. They ask for and give weight to the rationale the patient offers for their request, accommodating it if medically reasonable and strategically possible.

They live up to their word. If they say they can do X or Y, then barring something unexpected they do X or Y. If they feel it is unwise or impossible to do

those things, they refuse politely but firmly at the outset and explain why they have to refuse.

The best doctors don't take the patient's questioning of their course of action as a slur on their professional or personal integrity. They don't mind explaining themselves—why they want to do this or that. And they respond with something more meaningful than "It's the standard of care," which is not very satisfying to a lot people. Again, it can sound like another big ol' dodge.

They are mindful that patients do not walk into their clinic *tabula rasa*, and some of what patients bring with them may have a direct or indirect impact on the doctor's ability to deliver care in their usual and customary way. Instead of walking away shaking their heads and saying, "What's wrong with that patient?" they ask "What happened to that patient?"

The best doctors take whatever time a patient needs. If the visit threatens to run too long, they reassure the patient that the conversation is important, but ask if they can schedule another time to continue it, because of a backed-up clinic at the moment. Then they follow through!

If the patient has an idea of the nature of their health complaint, doctors take the idea seriously. After all, patients are living with it every day; the doctors aren't.

They are willing to step at least a little ways outside the "box" in order to be maximally responsive to patient needs.

They are willing to be an interface between the patient and other providers to try to improve overall patient experience.

The best doctors are able to act like anthropologists sometimes, creatively entering into the realities of their patients in order to understand the patients better, rather than expecting that of course, the patient must adapt to or enter into the doctor's own medical reality because that's the only "reality" that matters—or even exists.

Believe it or not, there really are doctors out there like this. I've had the good fortune to find a few of them. I'm still trying to figure out where they learned how to be healers. Which medical school did they go to? What coursework did they take?

Then again, maybe it happened before that. I'm guessing it might have started in kindergarten.

Brenda Denzler was diagnosed with inflammatory breast cancer in 2009. She became a cancer survivor on the very day she was diagnosed.