

Addressing Your Patients' False Perceptions

Douglas R. Briggs, DC, Dipl. Ac. (IAMA), DAAPM, EMT

The media is a wonderful invention. It is a great resource for a lot of good information, and a fantastic resource for misleading information. Many magazines now have articles on this-or-that health topic, and then a [list of questions](#) every person should be asking their doctor. The barrage of health information is never-ending; anyone with an opinion or viewpoint can publish it out there for the world to see and reference.

Patients are more informed today than ever before; they often present for care with a list of questions based on what they have read somewhere and they have formed a set of expectations, realistic or not, based on what they have read. Whether good or bad, the information is out there and people read it. We have to be able to tackle some of these issues head-on and reset the incorrect perceptions of the general public.

Perhaps the first thing people think of when they hear the word chiropractic is the idea of "crunching the neck." For me, this always brings up aggressive images of Chuck Norris twisting someone's head off - not a good picture of what chiropractic is. Let the patient share any questions or concerns they have with you and then address them, head-on! If they are afraid of "crunchy" noises, explain that chiropractic is about restoring normal joint function, not making crunchy noises. Explain [why the joints make that noise](#). Be open and tell the truth. If you are up-front and direct, the patient is a lot more likely to relax and have confidence in your care.

The next perception patients often have is that they have to come back - forever. It is OK to tell them that is not necessary. Now, many chiropractors will argue that [some degree of maintenance care](#) is appropriate. I certainly do. But that is a big issue for some people coming in on their first consult. Explain the phases of care. At that time they are in pain, of course you are going to work to help them feel better. At a point, they will feel better and you can recommend supportive care to help them continue to function.

Some people will choose to do that, some will not. That is OK. Arguing with patients to make them come in when they don't see the value or don't want to will only create a bad perception, and it will drain your energy in the process.

Finally, always tell patients what you are going to do. I recall a story from one of my orthopedics classes about a young doc who was going to do a Soto-Hall test on a woman. As he leaned forward, she screamed, jumped up and ran out. No explanation, just gone. A week later the staff found out that she had previously been raped. As the doctor leaned over, all she saw was his hands coming for her throat, and she reacted. Maybe this is an extreme example, but it shows how a situation could have been avoided if the doctor had just told her what he was going to do instead of just reaching out to do the test. Remember, we know what we are doing; most patients do not. Take the time to explain what you are doing and why.

Certainly there is a lot more we could cover on this topic, even if only further discussion of the above. The message, though, is that we must [take the time to talk to our patients](#): explain what we do, why, and what we expect to happen. Patients are going to have questions; take the time to give

them honest answers. As always, make sure you document what you have discussed with the patient. Sure, it takes a few extra moments, but patient-satisfaction is well-worth the effort.

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