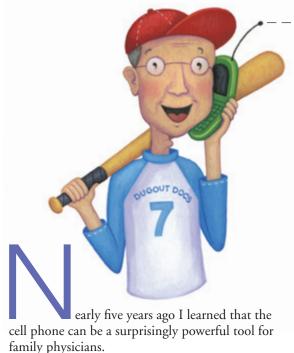
## Why I Give My Cell Phone



I had just assumed the role of medical director at a student health center when I saw a medical student with a sexually transmitted infection (STI) that I thought warranted a second opinion. The chairman of the Department of Pediatric and Adolescent Medicine, whom I had not met, was the local expert on STIs. I called him, and he offered to work the patient in right away. An hour later he called me back and said, "I gave your patient an antibiotic and an appointment for next week. I also gave him my cell phone number and told him to call me tomorrow if he is not better, or if he is worried." That physician's availability and accessibility to both me and my patient so impressed and inspired me that I began giving my cell phone number to anxious patients.

## Taking a chance

I gave out my number tentatively at first, but over time I have become comfortable doing it. I simply write it on a prescription pad or a business card and hand it to the patient as part of the planning at the conclusion of the visit. I make it clear that they have my permission to call anytime after hours if they are worried about their symptoms.

# You may gain more rapport without losing sleep.

Intuitively, physicians do not want to give out their personal phone numbers to patients. We expect that too many patients would be intrusive and inappropriate. I find the opposite; only once or twice a month do I get after-hours phone calls on my cell phone. Only one patient, one time, blatantly abused this privilege. Otherwise, these calls have always been appropriate. My experience has been so positive that I now give out my cell phone number three or four times per day.

### Reassuring the worried patient

I've found that giving out my cell phone number offers patients as much healing and comfort as any other part of the treatment plan. Most patients come to their office visit worried. Patients need, want and deserve reassurance. Giving my patients direct access to me by phone sends at least two important messages. It tells them that I am truly a partner in their care. It also demonstrates that I am confident in our treatment plan, as if to say, "I am sure you will be OK, but if you need me, you may call me, even in the middle of the night."

### **Empowering the physician**

Sharing a personal phone number with our patients is empowering for us. We want and enjoy rapport with our patients. Enabling them to contact us directly increases our bond and promotes understanding and trust, which is professionally gratifying.

We instinctively protect professional boundaries to manage our stress and maintain a healthy work-life balance. While some would think that giving out your cell phone number crosses these boundaries, I have found that it decreases my stress to know that my sick and worried patients can easily reach me if needed. Furthermore,

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## **Number to My Patients**

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it helps to reduce liability risk. This is why I note in the chart the date and time I give out my cell phone number. I also keep at hand a formatted note pad and use it to jot down conversations that happen after hours. I file these notes in patients' records.

## Skipping the answering service

Relying on my cell phone rather than an answering service has been a positive change. Answering services tend to be impersonal and inconsistent because the calls are triaged and the on-call physician may not know the patient's problems and concerns. I do understand that the answering service is a useful buffer for the tired, overworked physician, but the system is not completely reassuring to either the physician or the patient.

#### Will it work for you?

Each physician's patient population, practice style and personal life is unique, and the decision to give out your cell

STUDYING HOW PATIENTS RESPOND

A study conducted at the Hospital of the University of Pennsylvania<sup>1</sup> reinforces two findings of my own: First, giving out your cell phone number fosters the patient's perception that the physician is more caring. Second, patients generally demonstrate restraint and respect for its appropriate use. In a conversation with one of the authors of the study, Kingsley Chin, MD, a surgeon who is now in private practice, I asked if he still gives out his number to patients and if he would recommend this to other physicians. His response was an enthusiastic "yes" to both questions. He, too, emphasized that his patients felt less anxiety knowing that they could call him. He has never had an unnecessary call and says the majority of patients apologize when they call him and express gratitude for the privilege.

phone number must be balanced with a number of considerations. There isn't a standard policy for cell phone use for physicians to follow. It will likely work for most physicians and their patients,

but for others it won't. For example, I am in the process of changing job assignments and soon will be giving family medicine care to a population of patients with mental illness. A psychiatrist colleague has advised me against giving out my cell phone number to these patients because of boundary and transference problems, a point of view I will strongly consider.

For physicians who would like to try this approach but aren't certain that their patients will respond appropriately, I would suggest trying it with one or two patients, then gradually adding more. You can always abandon it if it turns out not to work.

My STI consultant and I agree that it is physicians

who have the most to gain from sharing their cell phone numbers with their patients. The reduction in liability risk, improved quality of care and increased rapport with our patients has enhanced our satisfaction with practice.

I hope more physicians will try it, and I invite those who do to send a letter to the editor of FPM to inform others about how it worked for them. FPM

Send comments to fpmedit@aafp.org.

1. Chin KR, Adams SB Jr., Khoury L, Zurakowski D. Patient behavior if given their surgeon's cellular telephone number. Clin Orthop Relat Res. 2005; 439:260-268.



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