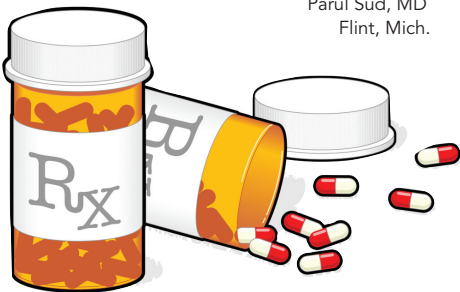


PRACTICE PEARLS

Uncover medication non-adherence with a simple question

When I ask my patients, “Do you take your medication?” I almost always get an affirmative response, so I decided to change my question. Now I ask, “How often do you miss taking your medication?” This has been an effective tool in uncovering non-adherence without shaming the patient. It also allows for a non-confrontational and non-judgmental conversation about patient compliance and barriers to adherence. Furthermore, it acknowledges human error. With these issues out in the open, my patients and I can then work together to generate personalized solutions.

Parul Sud, MD
Flint, Mich.



Protect against contamination during colposcopies

In our residency program we train our residents to do colposcopies. A little trick I like to teach the residents is to place sterile latex gloves over the handles of the scope. This way, the person completing the procedure knows that the

scope is protected from their contaminated hands.

Karen M. Bigby, MD
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Editor's note: The following Practice Pearls were mined from articles in our online article collections at <http://www.aafp.org/fpm/collections>.

Provide specific prescription directions

When you're writing prescriptions for your patients' medications, phrases such as “take as directed” or “take prn” can invite misunderstandings and errors. Instead of using these general phrases, specify exactly how the medication should be taken. Never use prn without including a symptom and a specific dose pattern such as “take q 3 hours prn pain.” In addition, most medications have narrow dosing regimens, so accurately transfer them to prescriptions. Specifying your directions will reinforce your care plan and help the pharmacist counsel your patients.

Source: Teichman PG, Caffee AE. Prescription writing to maximize patient safety. *Fam Pract Manag.* July/August 2002;27-30. <http://www.aafp.org/fpm/2002/0700/p27.html>.

Call about unpaid claims

To get claims paid, some office managers take the approach of flooding insurance companies with copies of the same claim. Their rationale is that, eventually, one

claim has to make it through the system. That may seem logical, but what if the claim has an error or the patient's insurance has changed? Eventually all these claims will be denied as duplicates and will have wasted a lot of time.

A better approach is to talk to someone in the insurer's customer service department. When you do this, your call gets logged by the insurance company, which shows you are making an effort to get your claims paid. Sometimes one phone call is all it takes to get these claims released and paid. If your claim has truly never reached its destination, a customer service representative may even have you fax your claim directly to him or her for processing.

Source: Ciletti MV. 11 tips for more productive billing. *Fam Pract Manag.* March 2002;16-17. <http://www.aafp.org/fpm/2002/0300/p16.html>.

Learn to say no

Interruptions, whether big or small, are essentially challenges to your current set of priorities. While some of these challenges may be worth your time, others may not. To avoid letting interruptions control you, you need to learn to say no.

For example, perhaps you're feeling a little burned out and have promised yourself that you're going to work one day less per month. That day just happens to be the same day the hospital strategic planning committee meets, and you've just been asked to serve on it. Only you can decide the priorities that are most important. If time off is your current priority, just say to the planning committee, “No, I'm sorry, but I can't be on the committee this year.” It's all you need to say.

Source: Vaccaro PJ. Protecting the time you've got. *Fam Pract Manag.* July/August 2001;60. <http://www.aafp.org/fpm/2001/0700/p60.html>.

HELP US HELP YOU

Practice Pearls presents the best advice on effective, efficient practice operations and patient care drawn from the medical and business literature, along with tips developed from your experience. Send us your best pearl (250 words or less), and if we publish it, you'll earn \$25. We also welcome questions for our Q&A section. Send your pearls and your questions to us at fpmedit@aafp.org.

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