



PROVIDE PATIENT LETTERS DESCRIBING THE DIAGNOSIS RATHER THAN THE NEED FOR ACCOMMODATION

It's not unusual for patients to request that I write letters stating that they need things like emotional support animals, time off school, or some sort of workplace accommodation, such as an ergonomic chair. Some of these requests are more appropriate than others.

To avoid grappling with somewhat subjective questions (e.g., whether having a miniature horse around is truly necessary for a patient's emotional health), I have a stock reply for particularly questionable requests:

"I will write a letter addressed to you describing your medical history, and then you can provide that letter to anyone you want."

This helps me avoid having to state that any specific accommodation is a medical necessity.

Patients are usually satisfied with this, and I feel better about attesting only to an objective fact — that the patient has a specific diagnosis.

Corey Lyon, DO, FAAFP
Denver

REDUCE PAIN OF DELTOID INJECTION

Getting patients to overcome injection-related fears is one of the most common challenges of

medicine. One painful experience as a child can lead to a lifetime of anxiety about trips to the doctor's office. But we've found an easy distraction technique that seems to work.

Most vaccines are administered through intramuscular injection of the deltoid muscle, usually by inserting a 1- to 1.5-inch needle at a 90-degree angle, 2.5 to 5 centimeters below the acromion process bone.

If you pinch the skin between the thumb and index finger while concurrently applying downward traction inferior to the injection site, the patient rarely feels the pain of the needle. Rather, the patient concentrates on the annoyance created by pinching the sensory division of the axillary nerve.

David Scheiner, DO, Gloria Scheiner, MSN,
ARNP-BC, and Marci Scheiner
Orange Park, Fla.

TEST YOUR STAFF'S PHONE ETIQUETTE BY CALLING YOUR OWN OFFICE

The way someone answers the phone is often a new patient's first introduction to a medical practice.

To keep my office staff on their toes, I sometimes call them on the same line patients would call. The staff members don't know it's me calling at first, so I get a taste of how they answer the phone.

If I find the greeting unpleasant, chances are my patients would too.

Richard J. Sagall, MD
Gloucester, Mass.

PREVENT STAFF BURNOUT DUE TO COVID-19

With a second wave of COVID-19 (or is it still the first wave?) engulfing large swaths of the country, the potential for stress and burnout remains for frontline health workers who are worried about exposing themselves and their families to the virus.

Here are five ways physician leaders can help others weather the storm:

1. Listen to staff and respond to their concerns. Encourage staff to speak up about what they're feeling. Consider sharing your own feelings to make them more comfortable sharing theirs.

2. Provide transparent communication. Your staff won't expect you to have all the answers about the risk of contracting COVID-19, but will appreciate an honest account of what you know and don't know.

3. Promote mental health and well-being. Provide time and space for breaks and exercise if possible.

4. Offer support where, how, and when staff need it. Talking about COVID-19 all the time could itself become a source of burnout. If staff members request it, create a "NOvid" space where talking about the pandemic is prohibited.

5. Organize ways to ease burdens on staff. Look for community groups that want to "care for the caregivers" and might be willing to help staff with meals, child care, or pet sitting.

Source: McKenzie L. Tips for improving staff well-being during COVID-19. Institute for Healthcare Improvement. May 12, 2020. Accessed Aug. 21, 2020. <http://www.ihl.org/communities/blogs/tips-for-improving-staff-wellbeing-during-covid-19>

GOT A PEARL?

Practice Pearls presents advice on practice operations and patient care submitted by readers or drawn from the literature. Send your best pearl (up to 250 words) to fpm@aaafp.org and receive \$50 if it's published. Send comments to fpm@aaafp.org, or add your comments to the article online.