HANDLING THE ANGRY PATIENT

Not all patients are happy to see their doctor. How do you stop angry patients from going over the edge?

BY ALLEN CHIANG, MD

In the midst of a hectic retina clinic, an uncomfortable patient encounter may quickly become unpleasant, negatively affecting everyone in the office. However, with some forethought and mental preparation, such outcomes can often be avoided. The following points may help you manage a patient who has reached—or is reaching—the boiling point.

BE PROACTIVE

Being a retina patient is generally an unhappy and unexpected life circumstance. The experience can be particularly stressful when the patient has already experienced significant vision loss or is at imminent risk of losing his or her vision. In this emotionally charged context, some patients lose control of their compensatory mechanisms for handling stress and thrust their anger and frustration upon retina doctors and staff.

Fortunately, there are almost always signs to indicate a patient’s deteriorating emotional status. A tense posture, a clenched jaw, or a curt response to a staff member’s greeting can indicate that a patient is near his or her breaking point. It is important to be on the lookout for these signs and to train staff to recognize signs that call for early intervention.

Generally speaking, a nasty patient encounter does not just happen all of a sudden. Proactivity can often avert an angry patient encounter by defusing the situation before it explodes. Doctors or staff should try to acknowledge and address a patient’s distress before he or she stews on it for 30 to 40 minutes in the waiting room. Such early action is best for the patient, the physician, the staff, and other patients in the waiting room.

KEEP COOL WITH A GAME PLAN

Although we recognize that our patients’ conditions lead to stress, we need to acknowledge that retina practice itself comes with its own stresses. Retina specialists are compulsive high-achievers capable of operating at an intense level, but pressures exist on a daily basis from many sources, such as increased reporting requirements, rising patient volumes, and declining reimbursement. During a busy clinic day, one angry patient can be like a match that sets off a ruinous explosion.

Like our patients, we may have a tendency to become defensive when attacked, but it is imperative that we keep our cool in order to defuse an angry patient. I have found that

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the best way to achieve this is by formulating a game plan. See *Game Plan For Dealing With an Angry Patient* for an X's and O's approach on how to behave with frustrated patients.

**SHOW EMPATHY**

Remember that an important part of our role as physicians is to demonstrate empathy, whether or not the patient is deserving of it. This is not to say that we must tolerate bad behavior, but each patient should be given an opportunity to respond to a retina doctor’s attempt to address his or her concerns. Reassuring a patient that you take his or her concerns seriously can be very powerful. Saying something like, ”I understand your frustration and can appreciate that you are upset,” can go a long way toward de-escalating tension in most of these situations.

**DOCUMENT UNPLEASANT ENCOUNTERS**

Depending on the severity of the situation, it may be prudent to document complaints, attempts to resolve them, and results of such actions in an incident report. If you feel that the trust necessary for an ongoing doctor-patient relationship cannot be recovered or maintained, arrangements should be made to terminate the relationship and refer the patient to another provider. Moreover, immediate dismissal may be warranted if the patient acts in a way that is violent, abusive, or threatening to you or your staff. If you decide to terminate your relationship with a patient, be sure to take the steps recommended in a publication by the American Medical Association’s Specialty Society Medical Liability Project, which details what should be conveyed to the patient and how to convey such information.

**AN UGLY PART OF THE JOB**

Approaching an angry patient will always be a highly unpleasant challenge. Try to resist the human impulse to respond to the patient in kind; remember your role is that of the physician, and focus on trying to do what is right for the patient’s vision and health. Take some of the points in this article and use the Ophthalmic Mutual Insurance Company (OMIC) as an additional resource to develop your own strategy to finesse your way through these encounters by defusing and managing the patient’s emotions. By responding strategically instead of reflexively, you will be best prepared to handle unexpected scenarios.

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