That awkward moment
Pop quiz
The Last Time?
What’s wrong?
How can we fix it?
The biggest problem?
Round and round

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It’s too easy to think of them as calls or illnesses, not people
It takes work to develop good bedside manners
• We’re not......
Make the patient feel like there is no one in the world more important than they are at that very minute - They are your #1 priority
Formal names, talk like people, not EMS robots
If you use the word “distal” in a conversation with the patient, you should be forced to turn in your badge.
Behave as if your mother is watching
Voice, tone, posture, position
Sympathy
Is having pity or sorrow in reaction to the distress of another person

Empathy
Is the understanding for what they’re going through

Compassion
Is being conscious of their distress and doing something about it
• E - eye contact
• M - muscles of facial expression
• P - posture - conveys connection
• A - affect - expressed emotions
• T - tone of voice
• H - hearing the whole person
• Y - your response

• Dr. Helen Riess
• Where do we go wrong?

• We try to relate: “When I cut my hand....Or when my father died...”

• Instead: “I understand this is uncomfortable and we’re working to help.”
Avoid sharing your personal feelings or thoughts about the situation
Don’t judge!
DISTRACTION
Colors
Cartoons
Animals
Toys
Humor where appropriate and the appropriate humor

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Avoid non-patient related conversations.
“How am I doin’?”
– Ed Koch, former NYC Mayor
Concern about Your Needs

- Excellent: 87%
- Good: 13%
- Fair: 0%
- Poor: 0%
- NA: 0%
We plan for everything, put a plan together to boost bedside manners
Commitment

• Commit to change
• Accept that bedside manners are important
• Use a team approach
• Highlight good work
• Discuss how to make the experience better

• Bring in help if needed – Colleges, Senior Centers, Kids
• Create a survey and ask people how you’re doing
• Look the part
• Show respect – 5 minutes
Make having good bedside manners just as important as taking blood pressures
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