

# The Compassionate Refusal of Opioids

## **STEPS**

1. *Elicit The Patient's Perspective*
2. *Present Your Perspective*
3. *Arrive At Common Goals*
4. *Set Limits*

### ***Negotiation Step #1: Elicit the Patient's Perspective***

Help the patient describe:

- \* The nature of the problem
- \* How the problem has affected him/her
- \* Exactly what help the patient wants

DON'T ASSUME YOU KNOW!

### ***Negotiation Step #2: Present Your Perspective***

- Create an Empathic Bridge
- Present Your Perspective
- Patient Education

### ***Negotiation Step #3: Agree on Common Goals***

- Concentrate on Areas of Agreement
- If unable to identify common goals, revisit patient perspective (step #1)

### ***Negotiation Step #4: Set Limits***

- Frame limits professionally, not personally
- Concentrate on what you are willing to do, rather than on what you refuse to do

## **NEGOTIATION PROCESS**

- *Deal With Emotions*
- *Don't Be Defensive*
- *Share Control*
- *Focus On Function, Not Pain*

## **NEGOTIATION PROCESS**

### **1. Deal With Emotions**

- *Reflection*
- *Validation*
- *Support*

#### **REFLECTION**

- \* *Informs Patient You're Aware Of Emotion*
- \* *Brings Emotion Into The Open*
- \* *Makes Emotions A Legitimate Topic For Discussion*

"You seem upset by what I've said."

"You seem pretty angry."

#### **VALIDATION**

- \* *Shows that you understand the reason for the emotion*
- \* *Normalizes the patient's experience*

"I can understand that you might be angry with me for not prescribing narcotics when that's the main reason you came in today."

**YOU DON'T HAVE TO AGREE TO EXPRESS UNDERSTANDING!**

#### **SUPPORT**

- \* *Demonstrates that you'll be with the patient in her emotion*
- \* *Shows that you can help the patient's distress*

"I'm sure it's been difficult to keep going to the doctor and to repeatedly have these tugs of war about a prescription."

Or, for example, instead of speaking, hand a crying patient a tissue.

## **2. Don't Be Defensive**

- Defensiveness escalates emotion
- Instead, make a statement about the patient's experience

## **3. Share Control**

- Models Collaboration
- Empowers the Patient to Make Changes

## **4. Focus on Function, not Pain**

- Permits progress despite ongoing pain
- What can the patient do?
- What do the symptoms prevent

## When Doctor and Patient Can't Agree

- Identify the impasse
- Clarify boundaries
- Manage your reactions

### 1. Identify the Impasse

“It seems like we have reached an impasse.”

“You and I have very different views on how best to manage your pain.”

### 2. Clarify Boundaries

- What you will do:

“I’d like to be your doctor and continue to help you with your help, despite our disagreement.”

- What you will not do:

“Prescribing more of this medicine is something that is not in your best long-term interest. It is something that I feel uncomfortable with and cannot do.”

### 3. Manage Your Reactions

- When you say, “No,”
  - What do you feel?
  - What thoughts do you have?

### 4. Learn to Soothe Yourself

- *Breathe!*
- Self-talk:
  - I’m being a helpful doctor.
  - I can get through this.