

Counseling Highlights from PPS I November 2003

- ❖ What are the components of good patient-centered counseling? Think back to an effective physician or effective teacher. What did they do to help you use the information you were provided with. [It's really everything below]

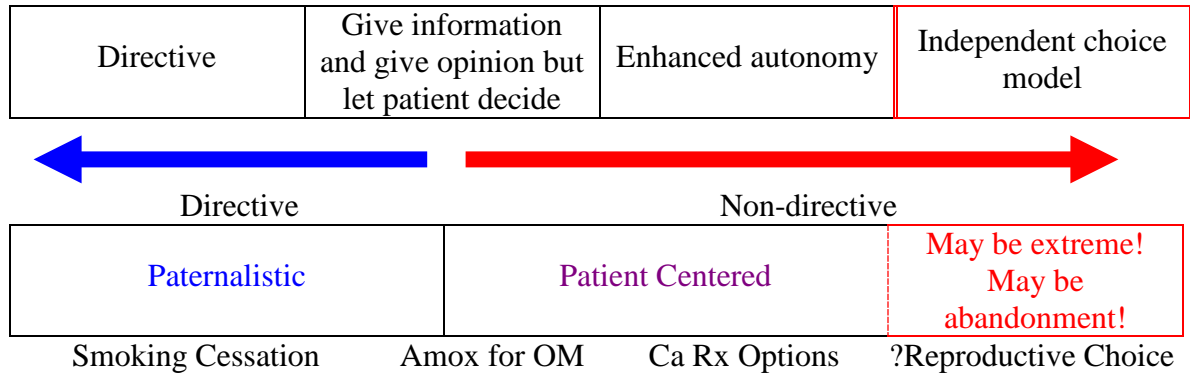
- ❖ What is necessary for effective counseling? How do you counsel successfully?
 - Ask/Assess: Elicit patient's "story", meaning of behavior to the patient, goals, values.
 - What does patient know about the health effects of this behavior?
 - What does patient get out of smoking?
 - What is their motivation? Remember, it's up to the patient. It's their choice.
 - Where on the spectrum of "stages of change" is the patient?
 - Identify triggers.
 - Identify barriers.
 - What would work for you?
 - Smoking PMH: - What information do you need to elicit?
 - How long? How many?
 - Have they tried to quit before? What were the details?
 - Why do they smoke? What do they get out of it?
 - Nicotine dependency:
 - How soon after waking do they have their first cigarette?
 - Did you experience symptoms of withdrawal when you stopped before (craving nicotine, irritability, anxiety, difficulty concentrating, restfulness, increased appetite).

 - Advise: Give data – How do you do this?
 - Does the age of the patient matter?

 - Assist: How do you institute a plan with the patient?
 - Don't box patient into a corner. Give them control.
 - Collaborate on a plan.
 - Find a hook. What would be important to this patient? Try to use their words; their metaphors; their experiences.
 - Help patient recognize their own strengths and weaknesses. Find past experiences that show that they are strong and capable of making changes.
 - Explicitly express the ambivalence. "On one hand you.. On the other hand you..."
 - Establish good relationship –How? Trust, empathy, respect.

- ❖ Arrange follow up. **ARRANGE FOLLOW UP!**

❖ Directive vs. non-directive counseling.



Enhanced Autonomy:

*It is the patient's view of his/her best interest that prevails.

Bottom Line:

- Counseling should *always* be **patient-centered**.
- Counseling should *always* be **goal-directed**.
- **The goal of counseling** should be a well informed choice that is consistent with a competent patient's values and beliefs.