Make the most of the ‘15-minute med-check’

With today’s practice environment, most patient visits are limited to 15 minutes. Make the most of that time with the patient by following these guidelines organized by the mnemonic MEDCHECK. Try to cover all eight guidelines during each appointment, even if briefly.

Medication. Begin with an open-ended question to elicit the patient’s thoughts on his or her treatment, such as, “How’s the medication working for you?” Also ask what he or she expects to accomplish during the session. With the patient’s permission, get the family’s perspective on how the patient is doing.

Environmental changes. Learn about events in your patient’s life and how he or she is coping with them. Try to uncover information about stressors—such as a new job—or positive changes such as an old friend returning to the area. Finding a topic that the patient likes to talk about—a favorite activity or television show, for example—can help monitor improvement over time.

Diagnoses. Continually reassess the primary diagnosis and look for evidence of a medical illness, medication side effects, or secondary psychiatric conditions—especially alcohol or drug abuse.

Coordination of care. Update the patient’s file on dealings with therapists, case managers, and other physicians.

Handouts. Provide handouts and/or Web sites describing a medication’s therapeutic and side effects. Get handouts from numerous sources or develop information sheets and adapt them to your patient population. Include generic and brand names of medications to avoid confusion.

Empathy. Conveying empathy for the patient’s problems or pleasures is crucial to a strong therapeutic alliance and effective treatment.

Costs. Don’t ignore medication costs. Being up-to-date on formulary options helps patients get needed prescriptions.

Knowledge. End the session by asking the patient to summarize the medication plan to ensure that he or she knows what to do.

The MEDCHECK guidelines do not take into account necessary tasks outside of the session:

• Schedule time before your appointments to review charts and recall information from a patient’s last visit. If you cannot update the chart during the visit, reserve a few minutes later for documentation.

• Take periodic breaks to return phone calls or e-mails or take a short walk.

• Read up on relevant treatment guidelines to ensure you are providing evidence-based care.

• Finally, reserve time to be an advocate for your patient by addressing any administrative shortcomings or removing obstacles to therapeutic recommendations.

Of course, short visits are not appropriate for all patients. Give more time to patients in crisis or to complicated cases such as children, pregnant women, or those needing interpreters.