

Tips for Talking to Patients about Viral Respiratory Infection

Improving Patient Satisfaction when Antibiotics Are Not Indicated

1. Validate the patient's symptoms and illness while providing reassurance.

Example:

"You have viral bronchitis, which is an inflammation in your lungs caused by a virus. That is what's causing your cough and fatigue. This virus can make you feel pretty awful, but it isn't dangerous."

2. Provide specific recommendations to treat the symptoms.

Example:

"With a virus, the goal is to treat your symptoms and make sure your immune system can fight the virus."

3. Provide a written "prescription" for symptomatic relief so patients feel satisfied and are better able to follow treatment instructions.

Example:

1. Oxymetolazine nasal spray (e.g., Afrin) 12 hour (to decongest swollen nasal passages). Use twice a day for 3 days. After 3 days, switch to saline nasal spray (for moisture).
2. Ibuprofen 400 mg (e.g., Advil, Motrin). Take 3 times a day for fever and aches. Alternate with acetaminophen (Tylenol) if needed.

4. Explain what the patient can expect over the next few days and what to do if symptoms worsen.

Example:

"Your cough may last from several more days to several weeks, and it may take a while for you to feel better. I want you to call me if you're still coughing after three weeks, or if you begin coughing blood."

Provide written information about when the patient should call the doctor.

5. If patients push for antibiotics, provide facts about viral infections and antibiotics, including adverse effects.

Example:

"Your illness is caused by a virus, and antibiotics do not cure viruses. Our goal is to help your immune system fight the virus. Taking antibiotics can actually be harmful by destroying the good bacteria that protect your body. And when you use antibiotics when you don't need them, the next infection you get is more likely to be resistant to the medicine, so it won't work when you do need it."

This campaign is based on the guiding principles of an expert panel organized by the Centers for Disease Control and Prevention with representatives from the American Academy of Family Physicians, the American College of Physicians, and the Infectious Disease Society of America (Annals of Internal Medicine 2001;134:479-529). This information is not a substitute for a credentialed provider's experience and education. When treating any patient, please use your own independent medical judgment.