



Becoming the doctor-patient

Tips for a successful relationship with your GP

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So, was your new year's resolution to focus on your health? A trusted GP is crucial for your professional longevity and a healthy workforce. But let's face it – being a patient can be uncomfortable, stressful and disorienting for some doctors. The good news? DHASWA is here to help with some practical advice on establishing a successful partnership with your GP-to-be.

Only 40-50% of us have a regular GP, compared to 78% of the Australian population.^{1,2} Multiple barriers impair doctors seeing GPs: stigma, perceived vulnerability, confidentiality concerns, logistical difficulties, self-reliance or self-denial.^{3,4} Medical professionals frequently adopt a hybrid health approach or 'blended care' where the doctor manages minor ailments autonomously, while navigating more complex issues with another practitioner. While this approach and its close cousin, 'the corridor consult', may appear pragmatic and convenient,⁵ an objective, comprehensive assessment prevents personal and professional ramifications, as self-treatment engenders ethical and medico-legal complexities, and can lead to suboptimal health outcomes.^{6,7}

The scope of individualised GP care should extend beyond episodic treatment to encompass health prevention, advocacy, care continuity, appropriate follow-up, a comprehensive medical record, and access to independent referral pathways.

Selecting an appropriate GP necessitates deliberate attention. Choosing a social contact or colleague adds additional complexities around role definition, confidentiality concerns, and ramifications on existing relationships. Instead, consider finding a practitioner outside your immediate network. In doctor-poor areas, such as rural and remote settings, ensure treatment relationships have firm boundaries. You could use resources like the DHASWA 'Drs for Drs' list, peer recommendations, digital platforms, and review online clinician profiles. Advanced scheduling and exploring practices offering extended hours can mitigate access issues.

Preparation is integral. For initial or complex consultations, booking a longer consultation of at least 30-45 minutes ensures a comprehensive evaluation. We suggest an

annual preventative visit for doctors of all ages and medical students. Illness or need for urgent medical assistance can present acutely, and an annual assessment allows a baseline health profile to be developed and maintained.

Importantly, if a practitioner does not align with you, seek out another. If you are using a GP from our 'Drs for Drs' list, clearly identifying yourself as having found them through DHASWA ensures prioritised access. If access remains an issue, contact DHASWA and we can help.

Address how you will work together as a team. We advise disclosing your professional status to support tailored care according to your clinical and health literacy background.⁸ A common, underappreciated assumption is a doctor-patient having pre-existing medical knowledge in the area being assessed. Proactively discussing your communication and information preferences to always include patient-level education, and working upwards with 'pitch low and aim high' in mind, can convey this from the outset.

One critical aspect of effective GP interactions is delineating healthcare from peer interactions; there is a valuable opportunity for peer support and debriefing on collegiate issues. But it's much easier to 'talk shop' than adopt a personal focus. Consider intentional boundary practices on collegial interactions: pre and post sitting down, or a time-limited bracket at the start and end of a formal consultation.

Writing a concise medical history, current concerns and specific queries prior to the consult, and sharing these notes with your doctor, can keep consults on track. Also establish clear therapeutic doctor-patient boundaries, self-management/referral, follow-up, communication pathways and contingency plans for urgent care. To avoid confusion, enquire about the future billing practices of your GP.

Finally, don't assume that all GPs dread the colleague patient! For many GPs, caring for their peers is a privilege and a service to the profession. Establishing a trusted relationship with an independent GP is not merely an adjunct, but essential to the holistic wellbeing and sustainable practice for medical practitioners. This commitment to your health ultimately benefits the medical community and our own patients. ■

References available on request.