

What's lurking in your waiting room?

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When planning your outpatient, office-based practice, you might have overlooked the design of your waiting room while you negotiated a lease, ensured Health Insurance Portability and Accountability Act (HIPAA) compliance, and procured adequate liability insurance. The waiting room is important, however, because it provides a patient's first impression of you. Aim to make your waiting room as comfortable as possible while avoiding unintended negative meanings.

Privacy

Maintaining privacy and confidentiality is many patients' primary concern when they see a psychiatrist, given the sensitive nature of their presenting problems and the lingering stigma surrounding mental illness.

Some outpatient psychiatrists provide separate entrances and exits to ensure that successive patients will not see one another. Although this setup depends on the office's layout, it may be an important factor to consider, especially when choosing new space.

Design

Whether you are a minimalist or favor a more eclectic style, give thought to the waiting room décor. Many physicians decorate their waiting rooms—as they do their offices—with personal works of art. Avoid overly personal pieces, however, such as family pictures, or provocative works of art, such as those with explicit sexual or aggressive content.

Providing magazines on an array of topics is a simple but thoughtful way to make your patient feel at ease. Choose

comfortable furniture arranged to ensure adequate personal space and avoid crowding. Some physicians allow pharmaceutical representatives to leave literature in the waiting room, whereas others believe such advertisements are inappropriate.

Etiquette

A busy or shared waiting room can exacerbate the anxiety a patient may feel when meeting you for the first session. One way to maintain confidentiality when you meet a patient is to identify yourself and ask who in the room is waiting to meet with you.

Although some doctors wonder whether to use a patient's first or last name, we initially refer to patients as Mr., Ms., or Mrs. Inside the office, we ask the patient how he or she would like to be addressed to establish openness and avoid awkwardness.

Body language

Establish eye contact when meeting the patient. A smile and maintaining 1 to 2 arm-lengths of personal space indicates appropriate intimacy without appearing threatening.

Even extending your hand may seem too forward or uncomfortable to some patients. Because some may refuse to shake hands out of religious or cultural observance, wait a moment when in doubt to see if the patient offers his or her hand first.

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