I Treat Patients and Their Families in the Way I Would Like to be Treated!

1. **By Using Communication Techniques That Show Respect and Care**
   - I introduce myself and address the patient by her name
   - I smile!
   - I look into the patient’s eyes when speaking
   - I use understandable language
   - I use a calm, respectful tone of voice
   - I keep body height at same level when talking together (if patient is lying down, I sit in chair beside the bed)
   - I pay attention when the patient talks
   - I include the patient and family in discussions about the patient’s situation when doing bedside rounds—a good way to educate and show respect at same time!

2. **By Assuring Privacy/Confidentiality**
   a. I do not discuss personal details about the patient in public
   b. During examinations:
      - I draw curtains between beds if possible
      - I do appropriate exposure during examinations:
      - Carefully expose part of body to be examined
      - Cover parts of body not being examined
      - Ask family to help provide privacy by holding up cloth during examination

3. **By Supporting Patient’s Emotional Needs**
   - I look for signs of fear, anger, stress, fatigue, and pain
   - I allow the patient to express her feelings
   - I show empathy to the patient by being kind
   - I PRAISE and REASSURE patient’s efforts!

4. **By Respecting a Patient’s Dignity**
   - I always explain what I am doing before touching, such as for a vaginal or breast exam, injection, or abdominal exam (I avoid touching sensitive areas, e.g., clitoris)
   - I tell the patient my findings during an examination

5. **By Providing Guidance**
   - I explain what to expect during labor and birth, etc.
   - I explain what the patient and family can do to help the patient and her labor (positions for labor and birth, drink lots of fluids, empty bladder often, exercises for labor, how to stay cool during labor)