Academic Emergency Medicine

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## Academic Emergency Medicine
## Editor-in-Chief Pick of the Month

# Patient Empowerment

I picked this paper as the Pick of the Month because it could (and I think should) change care for a common and potentially important problem. Not many papers in any journal can do that. In **Self-obtained vaginal swabs are not inferior to provider performed endocervical sampling for emergency department diagnosis of Neisseria gonorrhoeae and Chlamydia trachomatis,** Chinnock et al., the authors executed a clever and sensible study design that allows a strong inference of the value of self-swabbing. This paper shows that in the emergency department setting, women can swab their own cervix with 95% sensitivity, compared with provider-performed swabs. The potentially bothersome 5% miss rate is mitigated by the fact that provider-performed swabbing missed five out of 81 positives (6%), which were detected by self-swabbing. This research should be seen as patient-centered, and patient empowering. To wit: self-swabbing was preferred by a 2:1 majority of the patients in this study. This raises the question as to whether this paper is the proverbial "nose of the camel" for patient-performed procedures in emergency care. After all, a few decades ago, only bank tellers could cash your check, and clerks keyed the prices of your groceries. With the help of automated technology, many businesses have discovered that customers will work for free. It is doubtful that Chinnock et al. will lead to self-nasogastric tube placement, but this research serves as a vanguard for emergency providers to expand their role in teaching patients and family members to perform basic medical procedures.

Best wishes,
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