Patient Attitudes Toward a Physician Led Radiology Review: Improved Understanding of Medical Conditions and a Potential New Quality Metric

Jessica A. Latona, MD  
*Thomas Jefferson University, jessica.latona@jefferson.edu*

Sami S. Tannouri, MD  
*Department of Surgery, Thomas Jefferson University, sami.tannouri@jefferson.edu*

Theresa P. Yeo, PhD  
*Thomas Jefferson University, theresa.yeo@jefferson.edu*

Shawnna Cannaday, CRNP  
*Thomas Jefferson University, Shawnna.Cannaday@jefferson.edu*

Harish Lavu, MD  
*Thomas Jefferson University, harish.lavu@jefferson.edu*

Follow this and additional works at: [http://jdc.jefferson.edu/patientsafetyposters](http://jdc.jefferson.edu/patientsafetyposters)

Part of the [Medicine and Health Sciences Commons](http://jdc.jefferson.edu/patientsafetyposters)

Let us know how access to this document benefits you
Results

• A total of 63 surveys were administered with a 90% completion rate.
• Surgeons spent on average 2.7 ± 1.9 minutes reviewing imaging studies with the patient and family during the consultation.

PRE-VISIT

78% of patients had never seen their images before, but only 55% agreed that it was important to them.

POST-VISIT

• 90% of patients strongly agreed or agreed that they understood their disease better having seen their imaging.
• 86% of patients strongly agreed or agreed that they understood the planned operation better having seen their imaging.
• 90% of patients strongly agreed or agreed that the review was worthwhile, including 100% of patients that were ultimately not deemed appropriate surgical candidates.
• 84% of patients found the review accessible.
• Only 8% of patients thought the review took too long and 12% of patients felt that the review of imaging was too complicated.

Lessons Learned

This study provides insight into surgical patient perspectives on the (1) value, (2) effectiveness, and (3) accessibility of reviewing diagnostic imaging with a physician.

1. We found a large discrepancy (40% difference) between patients’ perception of the importance of seeing their imaging before and after viewing their own imaging with a surgeon. This represents an opportunity to align physicians’ and patients’ views of high quality care.

2. We found a statistically significant improvement in the patients’ responses to the questions assessing their understanding of their medical condition and of their planned operation after reviewing their imaging during the consultation. We believe that imaging review during patient encounters because they are powerful educational tools and may promote patient involvement in medical decision making.

3. The current climate of healthcare expects physicians to see more patients in less time, but also evaluates based on quality of care. On average, the surgeons in this study spent less than 3 minutes reviewing the images with patients and 92% of patients did not think this amount of time was excessive. We encourage surgeons to incorporate a short imaging review into their practice because it allows for value-focused care with an improvement in the utilization of costly resources.

Future Directions

• Conduct patient surveys in other contexts (i.e. breast surgery, vascular surgery) to establish whether a similar effect on patient understanding exists.
• Provide resources needed for surgeons and surgical residents to implement this model into practice and establish an ongoing system for tracking patient experiences.
• Develop a curriculum to provide adequate training that would allow other providers to feel comfortable reviewing images with patients.
• Reviewing imaging studies with patients is an opportunity for better patient-physician communication and improved patient satisfaction. With the current focus on patient satisfaction as a quality metric, we propose that this practice be further analyzed as a potential quality metric.

What aspect of your entire office visit was the most important to you?

Based on comparison of their responses to pre- and post-visit questions, patients’ perceived understanding of their medical conditions and the planned operations improved significantly (p = 0.001 and <0.001, respectively) after the consultation.

90% of patients strongly agreed or agreed that they understood their disease better having seen their imaging. 86% of patients strongly agreed or agreed that they understood the planned operation better having seen their imaging.

13.2% of patients reported that seeing their images was the most important part of their visit.

References