

From Modern HealthCare Online:

A retail solution to patient communication

After diagnostic tests, give patient results or a refund



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What can the seemingly trivial purchase of a \$1.99 bottle of water teach us about a way to effectively improve both patient care and doctor-to-patient communications, while helping to prevent medical malpractice lawsuits?

Well, a lot, actually. But first, an introduction.

I've been both a doctor and a patient myself, so I have experienced first-hand the need to find a way to make sure information doesn't fall through the cracks. Last year, my wife went to her physician and had routine lab work drawn. Six weeks went by, and she heard nothing. She called the office and asked for the results. She was told, "Honey, no news means good news." My wife received a follow-up call later that day and learned that one of the laboratory results was actually not normal. The story had a happy ending, but it illustrates the problem of information transfer.

Another story involves a friend who suddenly was unable to abduct his shoulder. He saw a spine surgeon who ordered an MRI. Four weeks passed. When I bumped into my friend next, I asked how he was doing. He said he never heard from the surgeon and assumed that the scan must have been normal. I encouraged him to schedule a return visit to make sure. He did and he learned that he had a large herniated disc compressing the C5 nerve root. Fortunately, shoulder function began to return on its own. But the message is that even a highly intelligent person, such as my friend, who has a Ph.D. in chemistry, can make false assumptions in the absence of clear transmission of information. Hardly a week goes by without a major newspaper writing about how unsafe healthcare is. This was first highlighted in the Institute of Medicine report "To Err is Human."

While fixing the entire healthcare system is a long-term challenge that may take decades to achieve, there are small steps that any provider can take to make the system more patient friendly and efficient.

And that brings me back to the bottled water.

Recently, I was at a fast-food joint at Hartsfield-Jackson Atlanta International Airport. As I paid, I saw a sign on the register stating that if I did not receive a receipt, my meal was free. Apparently, the owner of the kiosk wanted to co-opt

my support as a customer to guard the register. The sign was the method chosen to prevent the sales clerk from pocketing the cash. This technique was a much less expensive alternative to video surveillance.

So how does this relate to my observations about physicians' offices? Most doctors agree that it is a good idea to make sure that information is transferred back to the patient in a timely fashion. This intuition, it turns out, is backed up by research.

In a review of 307 medical malpractice cases, 181 involved diagnostic errors that harmed patients, according to the *Annals of Internal Medicine*. Almost half involved failure to create a proper follow-up plan, which includes failure to properly transfer information.

Clearly, a new approach is needed. If we could co-opt the patient's support for making this process more efficient, we could align all stakeholders' interests. The patient wants information and optimal health. The doctor wants to provide optimal service, make patients healthy and avoid being sued. The doctor's staff wants to be well-paid for providing great service.

The solution: Adopt a visible policy that laboratory or imaging results will be conveyed to the patient within a set time frame. Obviously, each result might require a different time frame. And how the information gets conveyed to any patient might vary depending upon the test. Nonetheless, if the physician's office did not follow up in the time allotted, the patient would receive a refund for the prior visit.

In structuring such a process, some attention would have to be paid to subrogation rights of third-party payers and to Stark anti-kickback laws. That said, these issues are not likely to pose practical roadblocks to implementation. Once it is implemented, the patient would be more likely to make sure there is proper transfer of information.

One might argue that patients should already be motivated to call back on their own in a reasonable time frame. After all, it is their health. Many patients, of course, will follow up without any prodding. But, relying on that alone makes it easy for too much to slip through the cracks.

Physicians depend upon their staffs to assist with information transfer. To align their interests with the doctor, bonuses at the end of the year might be distributed based on how well the staff met the goal of 100% efficiency for getting the proper information to patients. The more frequently the office has to dole out a refund, the less money available for year-end bonuses. The staff would solve the problem immediately.

Finally, if a patient participates in this system, there will be a paper trail documenting that he or she has an obligation to follow up. And failure to make

efforts to receive the information would be explicitly construed as noncompliance. Noncompliance by the patient is a very viable defense for a physician should a malpractice suit be filed down the road. In any event, by guaranteeing information is transferred to patients in a timely fashion, everyone should benefit. And by the way, I did receive my receipt for the bottled water.