

Trends in Publications in Radiology Journals Designated as Relating to Patient-Centered Care

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Abstract

Purpose: To assess trends in publications in radiology journals designated as dealing with patient-centered care.

Methods: PubMed was searched for articles in radiology journals for which the article's record referenced patient-centered/patient-centric care. Among these, original research articles were identified and assigned major themes. Trends were assessed descriptively.

Results: A total of 115 articles in radiology journals designated as dealing with patient-centered care were identified, including 40 original research articles. The number of articles annually ranged from 0 to 4 in 2000–2008, 5 to 9 in 2010–2012, 14 to 15 in 2013–2014, and 25 in 2015. Only four radiology journals had published more than one of the original research articles. Original research articles' most common themes were: optimization of patients' access to reports and images (n=7); patients' examination experience (5); image evaluation (n=4); radiologists meeting with patients (n=4); improving patients' knowledge of imaging (n=3); examination wait times/efficiency (n=3); examination utilization/appropriateness (n=3); and IT enhancements (n=3). A total of 13 of 40 original research articles solicited opinions from patients. One study involved patients in educating trainees regarding patient-centered care. No study involved patients in system-level decisions regarding health care design and delivery.

Conclusion: Articles dealing with patient-centered care in radiology are increasing, though they remain concentrated in a limited number of journals. Though major themes included image/report access, patient experiences, and radiologists meeting with patients, many studies dealt with less clearly patient-centric topics such as examination interpretation, while inclusion of patients in systems design was lacking. Further research in radiology is encouraged to target a broader range of ideals of patient-centered care, such as diversity, autonomy, and compassion, and to incorporate greater patient engagement.

Key Words: Patient-centered care, patients, radiology, biomedical research

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INTRODUCTION

Patient-centered care places patients' own values at the center of clinical decision making [1]. It recognizes patients' emotional and social concerns, actively engaging patients and their families in the health care process [2,3]. Underlying principles of patient-centered care include respect; choice and empowerment; patient

involvement in health policy; access and support; and information [4]. Patient-centered care espouses a view that well-intentioned physicians are inclined to view their rendered care from their own perspective [5], such that patients, who fundamentally best understand their own needs and desires, deserve to participate in their own care delivery to achieve the positive outcomes that matter most from their own perspective [5,6]. The Affordable Care Act incorporates extensive measures to promote patient-centered care [7], and the recently passed Medicare Access and CHIP Reauthorization Act calls for the measurement of patient engagement in developing physician payment incentives [8]. Paralleling the integration of patient-centered care into clinical practice has been its increasing application as a topic of scientific investigation and scholarship. Indeed, the peer-reviewed literature has served as a valuable forum for

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reporting and disseminating local experiences in pursuing patient-centered care. Recent reviews and commentaries have explored patient-centered care in radiology [3,9-11], providing practical approaches for successful implementation.

The expansion of patient-centered care in clinical and scholarly arenas is encouraging. Nonetheless, concern has been raised regarding confusion about the true meaning of the term “patient-centered” and misapplication of the term to refer to a wide range of initiatives that, though potentially improving quality or the patient experience, do not truly constitute patient-centered care by impacting the previously noted underlying principles [12]. For example, just providing timelier examination results, by itself, may not promote patient-centered care [13]; rather, such earlier access should be applied to empower patients to exercise greater involvement in their own care [12]. The appropriate application of patient-centered care in diagnostic radiology can be particularly challenging given many diagnostic radiologists’ infrequent patient access [14]. Radiologists’ emphasis on interpreting images and generating reports for referring physicians may lead to difficulty in the design and implementation of activities focused on respecting patients’ individual values, needs, and preferences [11,14]. For example, improvements in image quality and diagnostic performance, both traditional targets for diagnostic radiologists’ quality assurance efforts, may not translate to actual improvements in downstream patient-relevant outcomes [13]. Thus, radiologists, even if committed to improving the value of patient care, may be vulnerable to losing sight of the underlying aims of the patient-centered care initiative in health care [11]. At the same time, diagnostic radiologists’ infrequent patient access places greater weight on those events, as each such encounter becomes potentially even more impactful in improving the patient experience and patient-centeredness. To further explore this topic, this study assesses trends in publications within radiology journals that are designated as relating to patient-centered care.

METHODS

A list of journals assigned a category of “Radiology, Nuclear Medicine, & Medical Imaging” by Thomson Reuters’ InCites Journal Citation Reports [15] was identified. PubMed was searched for all publications in these journals using the search phrase “patient-cent* [tw].” This phrase identified articles for which “patient-centered,” “patient centered,” “patient centric,” or

“patient-centric” was indexed in PubMed as a “text word” (ie, appearing in the article’s title, abstract, MeSH headings/subheadings, or other subject terms, including author-supplied keywords [16]). This process returned 154 articles, of which 27 were excluded owing to being published in a journal relating to radiation oncology or preclinical radiation physics and biology [17]. An additional 12 articles relating to patient centering within the bore of a scanner were excluded. This process resulted in 115 articles designated as dealing with patient-centered care in radiology. The following article characteristics were recorded: year of publication, journal, and presence of an abstract. Among included articles, those representing original research were identified (defined as either the abstract or main manuscript text structured in four-part investigational format [ie, Introduction, Methods, Results, and Discussion, or similar structure]). The search was conducted in June 2016. Articles were not excluded based on a subjective effort to determine actual relevance to patient-centered care separate from their classification as such by the article’s authors or journal.

The full texts of original research articles were reviewed to record the following characteristics: relevant area of radiology (if any); whether the investigation included soliciting opinions (either through surveys or focus groups) from patients, referring physicians, radiologists, or trainees; whether the investigation included obtaining patient satisfaction scores (relating to either routine clinical care or a specific intervention under investigation); whether the investigation entailed actual implementation of an initiative in a clinical setting; whether the investigation included patients in system-level decisions regarding health care design and delivery or in providing education regarding patient-centered care; and whether the investigation was based on a theoretical model (eg, a Markov model or decision analytic model). Finally, original research articles were assigned to one of the following topics: image evaluation (including image quality and diagnostic performance); optimization of patients’ access to reports and images; radiologists meeting with patients; patients’ experience in undergoing imaging examinations (including assessments of patient comfort and staff interactions, as well as of information obtained through review of patient complaint logs); radiation dose reduction and management; educating radiology trainees in patient communication; examination utilization and appropriateness (whether for a diagnostic or interventional procedure); enhancing patients’ knowledge and understanding of imaging examinations; improving wait

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