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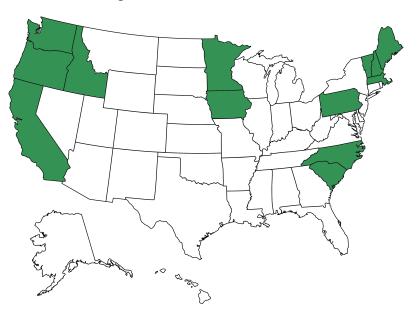
# Local Examples: Innovations in Medical Discussion Guides





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When there is more than one reasonable option regarding course of treatment, patients often experience confusion or conflict in making a decision.



However, innovative leaders across the United States are using medical discussion guides to increase patients' satisfaction by helping them make the health care decisions that are best for them.

## Dartmouth Medical Center, New Hampshire:

Women with breast cancer can be flooded with anxiety and fear upon receiving their diagnosis. Even in this delicate state, a doctor may ask them to make critical decisions about their course of care. When patients receive the bad news about their breast cancer diagnosis at the <a href="Dartmouth Hitchcock">Dartmouth Hitchcock</a>
<a href="Medical Center">Medical Center</a>, something different happens. The doctor gives them a <a href=""Ipre-visit" medical discussion guide">"Ipre-visit" medical discussion guide</a> to review before they meet with a surgeon about treatments. The guide includes a DVD that shows how other women with breast cancer have faced the disease and determined the best treatment option for them. It also includes a questionnaire that asks how they feel about the benefits and drawbacks to each course of treatment so they can discuss with the surgeon which treatment is best for them.

For example, patients with early stage breast cancer often face the tough decision of choosing a mastectomy or a lumpectomy. The guide, which draws on scientific evidence to avoid any biases, explains that both surgeries have similar outcomes. Given the opportunity to make a fully informed decision, women generally choose the more conservative lumpectomy, which is also less expensive. They also feel the care they receive is better than patients who do not use the discussion guides. If doctors and patients widely used medical discussion guides for a variety of health problems including breast cancer, then patients would be happier with their care and Medicare would save \$9 billion over ten years.

## Carolinas Healthcare System, North and South Carolina:

People with asthma get frustrated and overwhelmed trying to manage and control their asthma. The treatment plan can overwhelm patients for many different reasons. Their inhaler may not work for them because they aren't holding their breath long enough for the medication to work, or they may worry that the side effects could be worse than the asthma. When they can't follow their treatment plans, their asthma

worsens causing them to go the ER and often end up in the hospital. The Carolinas Healthcare System in North and South Carolina realized they could help patients follow medication instructions through the use of medical discussion guides. These guides give patients ideas about how to have productive conversations with their providers by explaining their treatment options in simple terms and identifying the treatments that are easiest to implement in their daily lives. The guides also clearly outline the benefits and risks of the treatment plans so patients can understand the importance of their treatments. Since using the guides with patients who have asthma, the Carolinas Healthcare System has seen their emergency department visits fall by 36% and inpatient hospitalizations decreased by 58%.

## Other states throughout the country are also using discussion guides to help patients:

#### California

 The <u>University of California San Francisco</u> uses medical discussion guides and decision support with breast cancer patients prior to consultations with surgeons.

#### Idaho

• <u>GroupHealth Cooperative introduced discussion guides</u> for patients with hip and knee arthritis. The number of hip replacement procedures for patients suffering from arthritis fell more than 25%, and the knee replacement rate went down 38%.

#### lowa

 Mercy Clinics has multiple pilot sites using discussion guides to support shared decision making.

#### Massachusetts

 Boston-area providers are crafting discussion guides to inform potential patients about the different kinds of prostate cancer and the available treatments. Included on the web site is a survey that helps further narrow down treatment options.

#### Maine

 <u>MaineHealth launched Learning Resource Centers</u> staffed with health educators to help patients make informed health care decisions.

#### Minnesota

Stillwater Medical Group providers currently have access
to and use over 16 discussion guides on topics including
breast cancer, women's health issues, chronic pain,
mental health, low back pain and prostate cancer.

#### **North Carolina**

 Researchers at the University of North Carolina realized that Latinos are <u>far less likely to get colorectal cancer</u> <u>screenings</u>, so they developed a discussion guide to encourage making this decision.

### Oregon

• The <u>Oregon Rural Practice-based Research Network has</u> been using <u>discussion guides</u> at their clinics and studying the impact of these guides on patient decisions. These sites are focused on using discussion guides for diabetes, end-of-life, chronic pain, prostate and colorectal cancer screening and menopause.

### Pennsylvania

Temple Health Connection and the National Nursing
 Centers Consortium are testing the use of medical discussion guides to aid with shared decision making.

### Vermont

The <u>Vetaran Affairs (VA) hospital in White River Junction</u>,
 <u>Vermont has pioneered the use of discussion guides when treating patients with post-traumatic stress</u>. The hospital has found that patients who use the decision aid are much more likely to get a treatment that matches up with how they want to be treated. The VA has also developed a similar <u>national program</u>.

## Washington

- Washington legislature changed the state's informed consent laws to encourage shared decision making in 2007. In 2012, the state passed legislation allowing the Washington Chief Medical Officer to certify discussion guides.
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