

# Physicians frequently fail to inform patients about abnormal test results

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New research shows that physicians failed to report clinically significant abnormal test results to patients -- or to document that they had informed them -- in one out of every 14 cases of abnormal results. In some medical groups, the failure rate is close to zero; in others it is as high as one in four abnormal results.

The analysis of 5,434 patient records from 23 physician practices across the country was led by Dr. Lawrence P. Casalino, chief of the Division of Outcomes and Effectiveness Research in the Department of [Public Health](#) of Weill Cornell Medical College, and published today in the [Archives of Internal Medicine](#).

Dr. Casalino and his co-investigators revealed that groups using simple processes to manage test results had lower failures rates. Groups that did not consistently use these processes had both higher failure rates and physicians who were dissatisfied with their group's processes for managing test results. The study also found that having an electronic medical record did not reduce failure-to-inform rates -- and even increased them -- if the practice did not have good processes in place for managing test results.

"Failure to report abnormal test results can lead to serious, even lethal consequences for the patient," says Dr. Casalino. "The good news is that physicians who use a simple set of systematic processes to deal with test results can greatly lessen their error rates."

The study suggests that five simple, common-sense processes are useful for dealing with test results: (1) all test results are routed to the responsible physician; (2) the physician signs off on all results; (3) the practice informs patients of all results, normal and abnormal, at least in general terms; (4) the practice documents that the patient has been informed; and (5) patients are told to call after a certain time interval if they have not been notified.

"We found that very few physician practices had explicit rules for managing test results," says Dr. Casalino, who is also associate professor of public health at Weill Cornell Medical College. "In many practices, each [physician](#) devised his or her own method. And in many cases, physicians and their staff told patients that 'no news is good news' -- meaning they should assume that their tests are normal unless they are contacted. This is a dangerous assumption."

"With the recent enactment of federal stimulus legislation to support greater adoption of health information technology, this study demonstrates why health IT hardware alone will not improve care," says Dr. Mark Smith, president & CEO of the California HealthCare Foundation, which funded the research. "Ensuring that processes are in place to efficiently notify patients of their lab results should be part of the meaningful use of electronic health records."

"Dr. Casalino's research provides concrete and immediately useful steps that can and should be put into place to improve the delivery of medical care," says Dr. Alvin I. Mushlin, Professor and Chairman of the Department of Public Health at Weill Cornell Medical College. "With good processes, we can ensure that patients with abnormal lab results get proper follow-up."

Source: New York- Presbyterian Hospital ([news](#) : [web](#))

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