

ER patients prefer ordering physicians discuss risks/benefits of CT with them before ordering exam

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The majority of emergency department patients consider having their condition correctly diagnosed with computed tomography (CT) more important than any associated radiation risk. However, two-thirds of patients prefer their ordering physician discuss the risks and benefits of CT with them before ordering the imaging test, according to a study in the November issue of the *American Journal of Roentgenology* (www.ajronline.org).

"Because [patients](#) drive their care to some degree, it is important for physicians to understand patients' knowledge and attitudes about [radiation](#) exposure, particularly as they relate to CT," said Kevin M. Takakuwa, MD, lead author of the study.

The survey study, performed at Thomas Jefferson University Hospital in Philadelphia, PA, included 383 emergency department patients who were asked three knowledge and three attitude questions about radiation from CT scans. In answering the three knowledge-based questions, 79 and 83 percent of patients correctly estimated their risk of cancer from chest X-rays and CT, respectively, as none, small or very small.

"Patients who were white, more educated and had lower pain scores were more likely to be correct," said Takakuwa. Only 34 percent of patients correctly thought that CT gave more radiation than chest X-rays. The more educated patients were more likely to be correct.

In answering the three attitude questions, 74 percent of patients believed having their condition diagnosed with CT was more important than radiation concerns. Patients preferred a better test with more radiation, although 68 percent wanted their physician to take the time to discuss the risk and benefits rather than leaving it to the physician's judgment to order the best test.

"Privately insured patients preferred to have their condition diagnosed with CT rather than worry about radiation. Blacks and patients with less pain wanted the risks and benefits explained at the expense of time. Whites preferred a more definitive test at the expense of more radiation," said Takakuwa.

"Given the differences in knowledge of radiation stratified by age, race, education, insurance status and pain and attitudes about radiation stratified by race, insurance status and pain, our results suggest that we may help [emergency department](#) patients better with targeted teaching about radiation, decreasing their pain, discussing risks and benefits and asking them to participate in the ordering of their diagnostic tests," said Takakuwa.

Provided by American College of Radiology

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