

## Physician groups call for fewer medical tests

## April 4 2012



Many patients could safely avoid X-rays, MRIs, heart stress tests and other common procedures, docs say.

(HealthDay) -- Nine physician specialty groups have created lists of common tests or procedures that they believe are often overused or unnecessary, to help doctors and patients make wiser decisions about care.

Each group came up with a list with five tests or procedures in their respective fields. The lists were released Wednesday as part of the ABIM Foundation's Choosing Wisely campaign.

The lists of "Five Things Physicians and Patients Should Question" are meant to help patients receive the most appropriate, evidenced-based care for their individual situations.

Here are some examples:



- Most patients who faint do not require brain imaging scans such as CT or MRI. Research has shown that when there is no evidence of seizure or other <u>neurologic symptoms</u>, <u>brain scans</u> do not improve patient outcomes. -- American College of Physicians
- Healthy patients without <u>cardiac symptoms</u> do not need to undergo stress imaging tests as part of their yearly checkups. In this group of people, these tests rarely lead to any meaningful change in patient management. -- American College of Cardiology
- Patients who have an unremarkable medical history and physical exam don't need to have a chest X-ray before going into outpatient surgery. In most cases, X-rays won't change patient management and have not been shown to improve patient outcomes. -- American College of Radiology
- Dual-energy X-ray <u>absorptiometry</u> (DEXA) should not be used to screen for osteoporosis in women under 65 and men under 70.
  Research has shown DEXA scans are not helpful in patients in this age group with no osteoporosis risk factors. -- American Academy of Family Physicians
- <u>Dialysis patients</u> who have limited <u>life expectancies</u> and no signs or symptoms of cancer should not get routine cancer-screening tests. These tests do not improve survival in this group of patients and can result in a false positive diagnosis that could lead to overtreatment, harm and unnecessary stress. -- American Society of Nephrology

Other groups that compiled lists are the: American Academy of Allergy, Asthma & Immunology; American Gastroenterology Association; American Society of Clinical Oncology; American Society of Nuclear Cardiology.

"These societies have shown tremendous leadership in starting a long overdue and important conversation between physicians and patients



about what care is really needed," Dr. Christine Cassel, president and CEO of the ABIM Foundation, said in a news release from the American Academy of Otolaryngology -- Head and Neck Surgery.

"Physicians, working together with patients, can help ensure the right care is delivered at the right time for the right patient. We hope the lists released today kick off important conversations between <u>patients</u> and their physicians to help them choose wisely about their health care," Cassel said.

It was also announced that eight more specialty societies have joined the Choosing Wisely campaign and will release their lists of overused and unnecessary procedures and tests in the fall.

They include the: American Academy of Hospice and Palliative Medicine; American Academy of Otolaryngology -- Head and Neck Surgery; American College of Rheumatology; American Geriatrics Society; American Society for Clinical Pathology; American Society of Echocardiography; Society of Hospital Medicine; and Society of Nuclear Medicine.

**More information:** Here's where you can learn more about the <u>Choosing Wisely campaign</u>.

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