

## Digital diagnostic tools lead to patient dissatisfaction, says MU expert

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Health care practitioners now can access patients' data using electronic medical records, which often include information systems that assess individuals' medical histories and clinical research to facilitate doctors' diagnoses. A University of Missouri researcher says the increased use of computerized clinical decision support systems (CDSSs) leads to greater patient dissatisfaction and could increase noncompliance with preventative care and treatment recommendations.

Victoria Shaffer, an assistant professor of health sciences and psychological sciences, says CDSSs offer several types of decision aids, including alerts about <u>medication errors</u>; suggestions for alternative prescriptions or courses of treatment; ideas for managing <u>chronic</u> <u>diseases</u>; and reminders to discuss vaccinations, screenings or other <u>preventative care</u> services. Physicians concerned about whether using CDSSs will negatively affect their relationships with clients could incorporate the tools to engage patients and help them understand diagnoses and recommendations, she said.

"Patients may be concerned that the decision aids reduce their face-toface time with physicians," Shaffer said. "However, practitioners can use the aids as teaching tools to explain their diagnoses using pictures or graphs, which make the patients' experiences much more interactive and educational."

Shaffer found that patients view physicians who use decision aids as less capable than practitioners who make judgments unaided or consult their



colleagues. However, patients were less likely to assign physicians responsibility for negative <u>health outcomes</u> when they used CDSSs; therefore, the aids may serve protective functions in litigation, she said.

Shaffer said researchers' next step is to identify whether educating patients about the benefits of decision aids alleviates their concerns and leads to greater compliance with practitioners' medical advice.

"Patients who desire to control their health outcomes are much less comfortable with health care practitioners' use of technology," Shaffer said. "Anything physicians or nurses can do to humanize the process may make patients more comfortable."

Shaffer is an assistant professor in the Department of Health Sciences in the MU School of Health Professions and also in the Department of Psychological Sciences in the MU College of Arts and Science.

The study, "Why Do Patients Derogate Physicians Who Use a Computer-Based Diagnostic Support System?", was published in the journal *Medical Decision Making*. Shaffer's coauthors include C. Adam Probst, a graduate of Wichita State University; Edgar Merkle, an assistant professor in the MU Department of <u>Psychological Sciences</u>; Hal Arkes, professor of psychology at The Ohio State University; and Mitchell Medow, an internal medicine physician in Boston, Mass.

Provided by University of Missouri-Columbia

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