

Denying patient requests lowers physician ratings

November 28 2017

Patients who ask for specialist referrals, laboratory tests or certain medications and don't get them tend to be less satisfied with their doctors than those whose requests are fulfilled, new research from UC Davis Health shows.

Based on the results, published today in *JAMA Internal Medicine*, the study authors recommend communications training for physicians that fosters positive experiences for patients without agreeing to all requests for particular diagnostics or treatments.

"It is common for patients to come to the doctor's office with specific requests in mind," said lead author Anthony Jerant, chair of the Department of Family and Community Medicine at UC Davis Health. "Many of those requests are highly reasonable, but some are for services of questionable or low value that are unlikely to improve [health](#) or could even be harmful. Physicians rarely receive training on how to deal with those situations, which is crucial given the importance placed on patient-satisfaction survey results in improving [health care](#) and, in some cases, to determine [physician](#) compensation."

The study included over 1,100 patients in the family and community medicine clinic at UC Davis Health. Over the course of nearly a year, they answered survey questions about office visits with their doctors, including their requests for medical services, assessments of the doctor's communications and understanding, and overall ratings of the doctor.

Patients in the study made nearly 1,700 specific requests of their doctors. When fulfilled, which was about 85 percent of the time, satisfaction with clinicians was generally high. However, when patient requests for referrals, pain medications, other medications and tests were denied, clinician satisfaction ratings significantly lowered—by 10 to 20 percentage points.

The differences were noteworthy since the analyses accounted for a broad range of patient characteristics, such as gender and race/ethnicity, which prior research has shown can influence satisfaction ratings.

The authors now hope to study whether training physicians to effectively manage patient requests could improve this situation. Based on previous research, mostly related to antibiotic use, Jerant believes a strategy known as watchful waiting—a middle ground between a flat denial and immediate "yes"—could be useful to physicians.

"It is challenging for primary care clinicians to balance [patients'](#) needs, good stewardship of [health care resources](#) and time efficiency during office visits," said Jerant. "Training clinicians to effectively handle patient requests could help them achieve that balance in their practices."

More information: Anthony Jerant et al, Association of Clinician Denial of Patient Requests With Patient Satisfaction, *JAMA Internal Medicine* (2017). [DOI: 10.1001/jamainternmed.2017.6611](https://doi.org/10.1001/jamainternmed.2017.6611)

Provided by UC Davis

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