

# Patient satisfaction with plastic surgery—it's the surgeon, not the practice

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Patient satisfaction after plastic surgery is most affected by surgeon-related factors, such as taking the time to answer questions and including patients in the decision-making process, reports a study in the September issue of *Plastic and Reconstructive Surgery*, the official medical journal of the American Society of Plastic Surgeons (ASPS).

By comparison, [practice](#)-related issues like waiting time and office staff have a much weaker effect on [patient satisfaction](#) scores, according to the new research by ASPS Member Surgeon Neil Tanna, MD, MBA, and colleagues of Hofstra Northwell Health School of Medicine, New York. They write, "In the outpatient [plastic surgery](#) setting, [patients](#) are more satisfied if they feel that their physician provides them with compassionate, coordinated care."

## To Increase Patient Satisfaction, Spend More Quality Time with Patients

The researchers analyzed responses to a patient [satisfaction](#) questionnaire distributed to patients of nearly 700 plastic surgeons nationwide. Patient satisfaction is an increasingly used measure of healthcare quality and outcomes. The study included responses from nearly 37,000 patients, including more than 400 from the authors' plastic surgery department.

The study focused on two questionnaire items: patients' ratings of how

likely they would be to recommend the plastic surgeon and the plastic surgery practice to others. These "likelihood to recommend" items have been identified as useful indicators of overall patient satisfaction and success of the medical practice.

The results suggested that several categories of practice-related factors did not have a major impact on the likelihood of recommending the surgeon or practice. Correlations were weak for items such as office hours or scheduling appointments, waiting times, interactions with nurses or staff other than the surgeon, or attention to patient privacy or safety.

In contrast, items specifically related to the [plastic surgeon](#) were strongly related to the likelihood of recommending the surgeon and practice. The strongest items were the patient's level of confidence in the surgeon and the surgeon's concern for the patient's questions and worries. Other important factors included the surgeon's explanations of the problem or condition and efforts to include the patient in decisions.

That pattern was consistent with previous studies—in plastic surgery and other medical specialties—showing that the perceived quality and amount of time spent with the doctor or other healthcare provider has a major impact on patient satisfaction scores. "Patients are most likely to recommend plastic surgeons and their practices whose care is characterized by empathy and communication," Dr. Tanna and coauthors write. A recent study in *Plastic and Reconstructive Surgery* found that good communication was an important factor affecting online reviews of plastic surgeons.

Although practice-related factors—such as scheduling, office staff interactions, and waiting times—were still significantly related to patient satisfaction, the correlations were much weaker than for surgeon-related factors. While having an attractive, smooth-running practice is still important, "Resources may be better allocated to improving the time and

quality of time spent with patients," according to the authors.

Dr. Tanna and colleagues believe their study has important implications for marketing the plastic [surgery](#) practice—particularly in improving patients' "likelihood to recommend" as a reflection of the patient's trust in the surgeon. The authors conclude: "In earning patients' trust, [plastic](#) surgeons can fulfill goals of a practicing provider and the goal of any medical professional: improving patient experience by meeting their needs."

**More information:** Kevin Chen et al, Factors Influencing Patient Satisfaction in Plastic Surgery, *Plastic and Reconstructive Surgery* (2018). [DOI: 10.1097/PRS.00000000000004658](https://doi.org/10.1097/PRS.00000000000004658)

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