

# Poor communication of test results poses risk for patients

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A lack of clear systems for communicating test results in primary care can lead to confusion, frustration and anxiety for patients and potential delays in diagnosis and treatment, according to research published in the

*British Journal of General Practice* July 12.

The study, by researchers at the University of Bristol and the National Institute for Health and Care Research Applied Research Collaboration West (NIHR ARC West), compared doctor and patient views of communicating blood test results within a single health encounter for the first time.

The researchers found that methods of communicating test results varied between doctors and were based on habits, experience and personal preferences rather than protocols.

Doctors expected patients to know how to access their test results but patients were often uncertain and used guesswork to decide how and when to access them.

Patients and doctors generally assumed the other party would make contact about test results, which could lead to a delay in the communication of test results or test results not being communicated at all.

While doctors generally had positive views about sending results by [text message](#), patients had more mixed views, with some concerned that texts did not convey enough information for them to understand the results and others finding them inappropriate or "flippant."

Online access to results was available in just two of the practices taking part in the study but none of the participating patients from those practices was aware that they could get their test results in this way.

Dr. Jessica Watson, a GP and NIHR Doctoral Research Fellow at the University's Center for Academic Primary Care, and lead author of the study, said: "GPs have a medico-legal and ethical responsibility to ensure

they have clear, robust systems for communicating test results. New technologies may be incorporated into these systems but are not a panacea. Failure to ensure safe systems for communicating test results could have significant consequences for patients and practices. Relying on patients to get in contact and making assumptions about their knowledge of how to do so were particular risks highlighted in our research."

Twenty-eight patients and 19 GPs from six GP practices in Bristol and surrounding areas were interviewed for the study between May 2019 and March 2020. Patients were interviewed when they were tested, or shortly thereafter, and again when they received their results. GPs were interviewed after the [patients](#) had received their results.

**More information:** Jessica Watson et al, 'I guess I'll wait to hear'—communication of blood test results in primary care a qualitative study, *British Journal of General Practice* (2022). [DOI: 10.3399/BJGP.2022.0069](#)

Provided by University of Bristol

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