Diagnostic Certainty

Ross N Isacke
Maine Medical Center

Follow this and additional works at: https://knowledgeconnection.mainehealth.org/cpi

Recommended Citation
https://knowledgeconnection.mainehealth.org/cpi/18

This Poster is brought to you for free and open access by MaineHealth Knowledge Connection. It has been accepted for inclusion in MaineHealth Performance Improvement by an authorized administrator of MaineHealth Knowledge Connection. For more information, please contact mckeld1@mmc.org.
Problem/Impact Statement

In HM, there is no way to reflect back on one’s thoughts regarding diagnostic certainty at admission when performing self-reflection nor a way to convey diagnostic certainty in the medical record to partners.

Scope

Physician partners in hospital medicine, hospital medicine APPs as well as our learners: Internal medicine, medicine/pediatrics, and family medicine residents performing admission H&Ps to MMC.

Baseline State:

- No standardized history and physical template in use in hospital medicine.
- Numerous different documentation standards
- No way to convey degree of certainty in diagnosis at time of admission via the medical record
- No way reflect back on one’s thoughts regarding diagnostic certainty at the time of admission when performing self-reflection activities.
- No self-reflection activities on tolerance of diagnostic uncertainty

Baseline Metrics/Current State

Diagnostic Certainty

MMP Hospital Medicine FY 20

Drs. Bob Trowbridge, Ross Isacke, Brian King

Baseline State:

- No standardized history and physical template in use in hospital medicine.
- Numerous different documentation standards
- No way to convey degree of certainty in diagnosis at time of admission via the medical record
- No way reflect back on one’s thoughts regarding diagnostic certainty at the time of admission when performing self-reflection activities.
- No self-reflection activities on tolerance of diagnostic uncertainty

Goal/Objective

Expand the use of the diagnostic certainty tool in epic that was introduced in FY 19 and study effects on work prioritization, length of stay, readmission, morbidity/mortality and self-reflection.

Scope

Physician partners in hospital medicine, hospital medicine APPs as well as our learners: Internal medicine, medicine/pediatrics, and family medicine residents performing admission H&Ps to MMC.

Baseline State:

- No standardized history and physical template in use in hospital medicine.
- Numerous different documentation standards
- No way to convey degree of certainty in diagnosis at time of admission via the medical record
- No way reflect back on one’s thoughts regarding diagnostic certainty at the time of admission when performing self-reflection activities.
- No self-reflection activities on tolerance of diagnostic uncertainty

Baseline Metrics/Current State

Impact During COVID

Adaptation of the process of applying degree of certainty helped inform pretest probability of COVID applied to test result.

Plan

Countermeasures

<table>
<thead>
<tr>
<th>By When &amp; Status*</th>
<th>Who</th>
<th>Deliverable</th>
</tr>
</thead>
<tbody>
<tr>
<td>End Q1</td>
<td>HM Quality, Physicians Informatics</td>
<td>Build reporting tool for low/moderate/high diagnostic certainty for individual providers. This tool will require individual list of charts, graphical breakdown of how providers are breaking down certainty.</td>
</tr>
<tr>
<td>End Q2</td>
<td>MMP HM Physicians</td>
<td>Providers perform periodic self-reflection on outcomes based on clinical diagnostic impressions</td>
</tr>
<tr>
<td>End Q3</td>
<td>HM Quality, MMP HM Physicians</td>
<td>Global review and assessment for further study. (Addition of COVID component)</td>
</tr>
<tr>
<td>End Q4</td>
<td>HM Quality</td>
<td>Review for publication/prepare poster</td>
</tr>
</tbody>
</table>

Review:

- Review of self-reflection questionnaires
- Further survey regarding how knowledge of personal dx certainty influences self-review
- Further survey regarding how knowledge of partner’s dx certainty influences patient care
- Further study tool’s impact on care

Next Steps:

- Discuss with residency programs ongoing surveys with each incoming class re tolerance of diagnostic uncertainty
- Discussions with other departments MMC residents rotate on regarding use of diagnostic certainty tool
- Review for potential publication