Choosing Wisely: Partnering with Patients to Make Better Choices on Using Health Care Services

www.choosingwisely.org

Maine Health Management Coalition
October 10, 2013
Introduction

• *Choosing Wisely®* is an initiative of the ABIM Foundation to help physicians/health care providers and patients engage in *conversations* about overuse of tests and procedures and support physician/health care providers efforts to help patients make smart and effective care choices

• **Recognizing** importance of physicians/health care providers and patients working together, leading specialty societies, along with *Consumer Reports*, have joined *Choosing Wisely* to help improve the quality and safety of health care in America
All About Choosing Wisely - Video Link

Up to 30% of health care in the U.S. is unnecessary.
Choosing Wisely Medical Partners

Societies That Announced Lists April 2012
• American Academy of Allergy Asthma & Immunology
• American Academy of Family Physicians
• American College of Cardiology
• American College of Physicians
• American College of Radiology
• American Gastroenterological Association
• American Society of Clinical Oncology
• American Society of Nephrology
• American Society of Nuclear Cardiology

Societies That Announced Lists February 2013
• American Academy of Family Physicians
• American Academy of Hospice and Palliative Medicine
• American Academy of Neurology
• American Academy of Ophthalmology
• American Academy of Otolaryngology-Head and Neck Surgery
• American Academy of Pediatrics
• American College of Obstetricians and Gynecologists
• American College of Rheumatology
• American College of Radiology
• American Gastroenterological Association
• American Society of Clinical Oncology
• American Society of Nephrology
• American Society of Nuclear Cardiology
• American Geriatrics Society
• American Society for Clinical Pathology
• American Society of Echocardiography
• American Urological Association
• Society of Cardiovascular Computed Tomography
• Society of Hospital Medicine
• Society of Nuclear Medicine and Molecular Imaging
• Society of Thoracic Surgeons
• Society of Vascular Medicine
Choosing Wisely Medical Partners

**Societies Announcing Lists Later in 2013**

- American Academy of Dermatology
- American Academy of Family Physicians
- American Academy of Orthopaedic Surgeons
- American Association for Pediatric Ophthalmology and Strabismus
- American College of Chest Physicians
- American College of Emergency Physicians
- American College of Rheumatology
- American College of Surgeons
- American Headache Society
- AMDA—Dedicated to Long Term Care Medicine

- American Society of Anesthesiologists
- American Society of Clinical Oncology
- American Society of Hematology
- American Society for Radiation Oncology
- American Thoracic Society
- The Endocrine Society
- Heart Rhythm Society
- North American Spine Society
- Society of Critical Care Medicine
- Society of General Internal Medicine
Five Things Physicians and Patients Should Question

1. Don’t do imaging for low back pain within the first six weeks, unless red flags are present.
   Red flags include, but are not limited to, severe or progressive neurological deficits or when serious underlying conditions such as osteomyelitis are suspected. Imaging of the lower spine before six weeks does not improve outcomes, but does increase costs. Low back pain is the fifth most common reason for all physician visits.

2. Don’t routinely prescribe antibiotics for acute mild-to-moderate sinusitis unless symptoms last for seven or more days, or symptoms worsen after initial clinical improvement.
   Symptoms must include discolored nasal secretions and facial or dental tenderness when touched. Most sinusitis in the ambulatory setting is due to a viral infection that will resolve on its own. Despite consistent recommendations to the contrary, antibiotics are prescribed in more than 80 percent of outpatient visits for acute sinusitis. Sinusitis accounts for 16 million office visits and $5.8 billion in annual health care costs.

3. Don’t use dual-energy x-ray absorptiometry (DEXA) screening for osteoporosis in women younger than 65 or men younger than 70 with no risk factors.
   DEXA is not cost effective in younger, low-risk patients, but is cost effective in older patients.

4. Don’t order annual electrocardiograms (EKGs) or any other cardiac screening for low-risk patients without symptoms.
   There is little evidence that detection of coronary artery stenosis in asymptomatic patients at low risk for coronary heart disease improves health outcomes. False-positive tests are likely to lead to harm through unnecessary invasive procedures, overtreatment and misdiagnosis. Potential harms of this routine annual screening exceed the potential benefit.

5. Don’t perform Pap smears on women younger than 21 or who have had a hysterectomy for non-cancer disease.
   Most observed abnormalities in adolescents regress spontaneously, therefore Pap smears for this age group can lead to unnecessary anxiety, additional testing and cost. Pap smears are not helpful in women after hysterectomy (for non-cancer disease) and there is little evidence for improved outcomes.
Consumer Reports

• Consumer Reports is Choosing Wisely partner and supports it by creating patient-friendly materials based on society recommendations and engaging coalition of consumer communication partners to disseminate content and messages about appropriate use to communities

• Tools and resources can be found at: www.consumerhealthchoices.org

Chest X-rays before surgery
When you need them—and when you don’t

If you’re scheduled for surgery, a pre-operative chest X-ray can sometimes help make it safer by identifying medical problems that might make it a good idea to delay or even cancel the procedure. But if you don’t have signs or symptoms of heart or lung disease, you should think twice about having the X-ray. Here’s why:

The test usually isn’t helpful for low-risk people without symptoms.
Many people automatically receive a chest X-ray to “clear” them before surgery, and some hospitals even require the test for almost all patients who are admitted. But serious abnormalities found through chest X-rays are uncommon in low-risk people, so most of the time all that’s needed is a careful medical history and physical examination. A chest X-ray doesn’t add much useful information for people without risk factors for heart or lung problems and rarely changes their treatment or helps the anesthesiologist and surgeon manage their care. In fact, in those people the test can produce false alarms that require follow-up tests that usually aren’t necessary and can add needless risk and expense.

It can pose risks.
A chest X-ray exposes you to a small amount of radiation. While the risk from any single exposure is uncertain, the harmful effects of radiation might be cumulative, so it’s best to avoid exposure whenever you can. Also, most abnormal test results from the X-ray must be followed up with additional tests to rule out a serious prob-
5 QUESTIONS to ask your doctor before you have any medical test or procedure.

1. **Do I really need this test or procedure?** Tests should help you and your doctor decide how to treat a problem, and procedures should help you live a longer, healthier life.

2. **What are the downsides?** Discuss the risks as well as the chance of inaccurate results or findings that will never cause symptoms but may require further testing.

3. **Are there simpler, safer options?** Sometimes lifestyle changes will provide all the relief you need.

4. **What happens if I do nothing?** Ask if your condition might worsen — or get better — if you don’t have the test or procedure now.

5. **How much does it cost?** Ask whether there are less expensive alternatives, or generic versions of brand-name drugs.

You can use the questions above to start a conversation with your doctor about the tests, treatments and procedures you need — and don’t need.

Remember, overuse, or misuse, of medical tests and procedures provides little benefit, and in some cases can even cause harm. By talking to your doctor, you can improve the care you receive — and save yourself from the discomfort and expense of unnecessary tests or procedures.

A talk with your doctor is the smart way to make sure you end up with the right amount of care: not too much, not too little.
Choosing Wisely Consumer Partners

These organizations, working with Consumer Reports, are joining Choosing Wisely to help disseminate information & educate patients on making wise decisions:

- AARP
- Alliance Health Networks
- Midwest Business Group on Health
- Minnesota Health Action Group
- National Business Coalition on Health
- National Business Group on Health
- National Center for Farmworker Health
- National Hospice and Palliative Care Organization
- National Partnership for Women & Families
- Pacific Business Group on Health
- SEIU
- The Leapfrog Group
- Union Plus
- Wikipedia

Tools and resources can be found at: [www.consumerhealthchoices.org](http://www.consumerhealthchoices.org)
Choosing Wisely in Maine

Maine Quality Counts (QC) is the leading multi-stakeholder effort to develop the *Choosing Wisely in Maine* initiative

QC selected by ABIM Foundation as one of 9 regional improvement collaboratives nationally to help raise awareness of Choosing Wisely recommendations among providers and consumers

- Effort supported by statewide physician organizations and providers
Choosing Wisely in Maine

Will use 5 major strategies for implementing Choosing Wisely across the state:

1. Building general public awareness
2. Engaging providers
3. Engaging consumers
4. Testing additional ways to implement Choosing Wisely in provider practice sites
5. Identifying areas to engage patients on Choosing Wisely topics “in the visit” (i.e. within the clinical encounter)
Choosing Wisely in Maine Focus Areas

Things Physicians/Health Care Providers and Patients Should Question: (See http://www.choosingwisely.org/doctor-patient-lists/ for complete Medical Specialty Recommendations)

1. Cardiac imaging (EKGs, stress tests, cardiac catheterization) for patients at low risk for heart disease
2. Imaging tests (CT scan, MRI) for low back pain
3. Antibiotics for upper respiratory infections
4. Imaging tests (CT scan, MRI) for uncomplicated headaches
5. Bone-density (DEXA) scans for low-risk women
6. Sleeping pills or sedatives (e.g. benzodiazepines) for insomnia, agitation, or delirium in older adults
7. Opioids or butalbital as pain medications for treating migraine headaches
8. Imaging tests (CT scan) of the head in emergency department patients with minor head injuries
CW in Maine Focus Areas: Consumer Reports Fact Sheets

Choosing Wisely

EKGs and exercise stress tests
When you need them—and when you don't

Imaging tests for lower-back pain
You probably do not need an X-ray, CT scan or MRI!

Imaging tests for headaches
When you need a CT scan or MRI—and when you don’t

Bone-density tests
When you need a test and when you don’t

Treating sinus problems
Don't rush to antibiotics

Insomnia and anxiety in older people
Sleeping pills are usually not the best solutions

Treating migraine headaches
Some drugs should rarely be used
“Safe, high quality, accessible and affordable healthcare is important to all of us.”
Kathy Day’s Kidney Stone
Did I need all this?
Did it help or change the outcome?

1. At least 5 sets of blood work, with CBC, chemical profiles, parathyroid hormone levels
2. Several urine tests, including urinalysis and urine culture, and two 24 hour urine tests
3. 1 MRI
4. 2 CT scans
5. 2 ER visits, 2 primary care visits, 2 urologist visits, 1 endocrinologist visit
6. Prescriptions for antibiotic (no infection) and Flomax
7. Lab analysis of kidney stone

Estimate $15,000 ++++
Louie’s story
Treating sinusitis
Don’t rush to antibiotics

Millions of people each year are prescribed antibiotics for sinusitis, a frequent complication of the common cold, hay fever, and other respiratory allergies. In fact, 15 to 21 percent of all antibiotic prescriptions for adults in outpatient care are for treating sinusitis. Unfortunately, most of those people probably don’t need the drugs. Here’s why.

The drugs usually don’t help
Sinusitis can be uncomfortable. People with the condition usually have congestion combined with yellow, green, or gray nasal discharge plus pain or pressure around the eyes, cheeks, forehead, or teeth that worsens when they bend over. But sinus infections almost always stem from a viral infection, not a bacterial one—and antibiotics don’t work against viruses. Even when bacteria are responsible, the infections usually clear up on their own in a week or so. And antibiotics don’t help ease allergies, either.

They can pose risks
About one in four people who take antibiotics have side effects, including stomach problems, dizziness, or rashes. Those problems clear up soon after stopping the drugs, but in rare cases antibiotics can cause severe allergic reactions. Overuse of antibiotics also encourages the growth of bacteria that can’t be controlled easily with drugs. That makes you more vulnerable to antibiotic-resistant infections and undermines the benefits of antibiotics for others.

When should you use antibiotics?
You usually need an antibiotic when you have an infection that is caused by bacteria, and the infection is not going away on its own. This may be the case when:

• Your symptoms last longer than a week.
• Your symptoms start to get better, but then get worse again.
• Your symptoms are very severe. You should get immediate treatment if:
  — You have severe pain and tenderness in the area around your nose and eyes.
  — You have signs of a skin infection—such as a hot, red rash that spreads quickly.
  — You have a fever over 102°F.

When you need an antibiotic, which one should you use?
When you need an antibiotic, ask your doctor if you can use generic amoxicillin. It is usually the best choice. It costs about $4 for a prescription. It works just as well as brand-name antibiotics, such as Augmentin, that cost much more.

What about a CT scan?
A CT scan is a series of X-rays. It gives your doctor a picture of your sinuses.

Some doctors recommend a CT scan when you have a sinus problem. But usually you do not need a CT scan. Generally, you only need a CT scan if you have sinus problems often, or if you are thinking about having sinus surgery.

Advice from Consumer Reports
How should you treat sinus problems?
Most people get over a sinus infection in about a week. These tips may help you feel better sooner:

Rest. Your body needs rest to fight the infection. Try to rest as much as you can, especially in the first few days.

Drink warm liquids. Drinking warm water, tea, and other liquids helps thin and loosen mucus. This helps it drain away faster.

Breathe warm, moist air. The steam from a warm shower or bath, or from a kettle of boiling water helps to loosen mucus and soothe your throat.

Keep your head up on a pillow when you lie down. This helps keep postnasal drip from going into the back of your throat.

Gargle to soothe your throat. Use half a teaspoon of salt stirred into a glass of warm water.

Rinse your nose. Saline sprays or nasal irrigation kits may make you feel better. Make sure you follow the directions.

Be careful with over-the-counter remedies. Some nasal drops or sprays contain oxymetazoline (Afrin, Neo-Synephrine Nighttime, and generic store brands). These may help for a few days. But they can make you more stuffy if you use them longer than three days.

• If you still feel stuffy up after three days, try generic pseudoephedrine pills. They cost less than the brand-name (Sudafed) but work just as well. You need to ask the pharmacist for them because they are kept behind the counter. But check with your doctor first, since they can cause serious side effects.

• Avoid allergy medicines (antihistamines, like Benadryl or Claritin). They do not relieve cold symptoms very much. And they can cause unpleasant side effects, such as dizziness, dry mouth, headache, and sleepiness.
More Medicine is not always better Video Link -
One theme underlying Choosing Wisely and similar campaigns is not necessarily obvious to the audience: Some tests and treatments are wasteful, useless and even harmful. That’s not an easy message to deliver to patients and their families. They have come to expect whole arrays of procedures to help diagnose and treat a disease. Yet doctors have identified dozens of overused and unnecessary tests and procedures that don’t provide a benefit and may even cause harm.

Talking with your Doctor Video Link - From Consumer Reports and the Choosing Wisely campaign, here is advice about how to make the most productive use of a few minutes with your doctor. It includes 5 questions that will help you avoid unnecessary tests and treatments.
1. One page introduction:

2. 5 questions to ask your doctor (PDF):

3. Physicians role in Choosing Wisely:
http://www.mainequalitycounts.org/articles/2-335/making-it-ok-to-ask-role-of-physicians/0

4. CW in Maine focus areas:
http://www.mainequalitycounts.org/page/2-919/cw-top-5-focus-areas

5. All 21 Choosing Wisely Grantees:
http://www.choosingwisely.org/grantees/

6. American Board of Internal Medicine link to Choosing Wisely:
http://www.choosingwisely.org/

7. Consumer Health Choices (Consumer Reports) information and consumer materials/videos:
http://consumerhealthchoices.org/campaigns/choosing-wisely/

8. How to talk to your doctor:
http://consumerhealthchoices.org/our-new-video-talking-points
5 QUESTIONS to Ask Your Doctor Before You Get Any Test, Treatment, or Procedure

1. **Do I really need this test or procedure?** Medical tests help you and your doctor or other health care provider decide how to treat a problem. And medical procedures help to actually treat it.

2. **What are the risks?** Will there be side effects? What are the chances of getting results that aren’t accurate? Could that lead to more testing or another procedure?

3. **Are there simpler, safer options?** Sometimes all you need to do is make lifestyle changes, such as eating healthier foods or exercising more.

4. **What happens if I don’t do anything?** Ask if your condition might get worse — or better — if you don’t have the test or procedure right away.

5. **How much does it cost?** Ask if there are less-expensive tests, treatments or procedures, what your insurance may cover, and about generic drugs instead of brand-name drugs.

Use the 5 questions to talk to your doctor about which tests, treatments, and procedures you need — and which you don’t need.

Some medical tests, treatments, and procedures provide little benefit. And in some cases, they may even cause harm.

Talk to your doctor to make sure you end up with the right amount of care — not too much and not too little.
• **Winthrop Family Medicine, Winthrop, ME**
  
  – Provider education - Choosing Wisely educational presentations will be standing agenda topic at all provider meetings.
  
  – Work station links to Choosing Wisely on all provider laptops and exam room computers.
  
  – Easy access to preprinted materials for all staff and patients
  
  – Empower and train all staff to communicate and use the Choosing Wisely tools at every encounter. We are consumers ourselves first, and the more all staff learn about the materials and how to access information, they will be more engaged in increasing the value of healthcare for all.
  
  – MA's rooming patients can provide a patient with appropriate printed material to read while waiting for their provider to enter the room, that might be a result of a question or concern that the patient brought up during the rooming process.
  
  – Handouts in both the waiting room and exam rooms
  
  – Highlighting education material for staff in the shadow boxes in the hallway
  
  – Highlighting a Choosing Wisely subject and patient experience at our monthly staff meetings 9. Increase patient access to cost information
  
  – Add link to Choosing Wisely from MaineGeneral and practice websites
Three Easy Things Your Practice Can Do!

• Construct a Bulletin Board in Waiting Room
• Set Up File folders in exam rooms with 2 page patient info sheets
• Educate staff and providers
  – Standing agenda items
  – Staff meetings
  – Provider meetings
  – Clinical/admin meetings
Make Choosing Wisely Materials Available to your Patients!

• Put Choosing Wisely Materials Front and Center!
• Bulletin Boards in Waiting Rooms and Staff Areas
• Hand Outs
  – 5 Questions
  – 2 page patient education sheets
Make it Easy for Providers & Staff to Use Choosing Wisely

- **Post Choosing Wisely** materials where patients and staff can see them often
- **Displays in staff and patient** areas make the material familiar
- **Place file folders** in exam rooms with 2 page patient education handouts for easy access for providers and clinical staff
- **5 questions handed** out at check in
- **2 page patient education** sheets handed out to patients during the rooming process when the information is relevant to the reason for the visit
- **Providers and staff** have information to address Question #5, How Much Does it Cost?
Shadow Boxes in Staff Areas
Educate, Educate, Educate!

- Educate Staff and Providers about Choosing Wisely
- Standing Agenda Item
  - Staff meetings
  - Provider meetings
  - Admin/Clinical Meetings
  - Quality Team meetings
  - Lunch and Learns  If you feed them, They will come.
Treat the staff to pizza and do a lunch and learn about Choosing Wisely
Choosing Wisely in Maine

Choosing Wisely® is an initiative of the ABIM Foundation to help physicians and patients engage in conversations about the overuse of tests and procedures and support physician efforts to help patients make smart and effective care choices. Recognizing the importance of physicians and patients working together, leading specialty societies, along with Consumer Reports, have joined Choosing Wisely to help improve the quality and safety of health care in America.

As part of Choosing Wisely, each participating specialty society has created lists of “Five Things Physicians and Patients Should Question” that provide specific, evidence-based recommendations physicians and patients should discuss to help make wise decisions about the most appropriate care based on their individual situation.

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http://www.mainequalitycounts.org/ChoosingWisely
For More Information

• For Health Care Providers:
  – Choosing Wisely: www.choosingwisely.org
  – ABIM Foundation: www.abimfoundation.org
    • The Medical Professionalism Blog: blog.abimfoundation.org
    • Twitter: @ABIMFoundation / Facebook: ABIM Foundation

• For Consumers:
  - Consumer Reports: www.consumerhealthchoices.org

• For Providers & Consumers:
  – Maine Quality Counts: www.mainequalitycounts.org
  – Twitter: @MEQualityCounts
  – Facebook: Maine Quality Counts