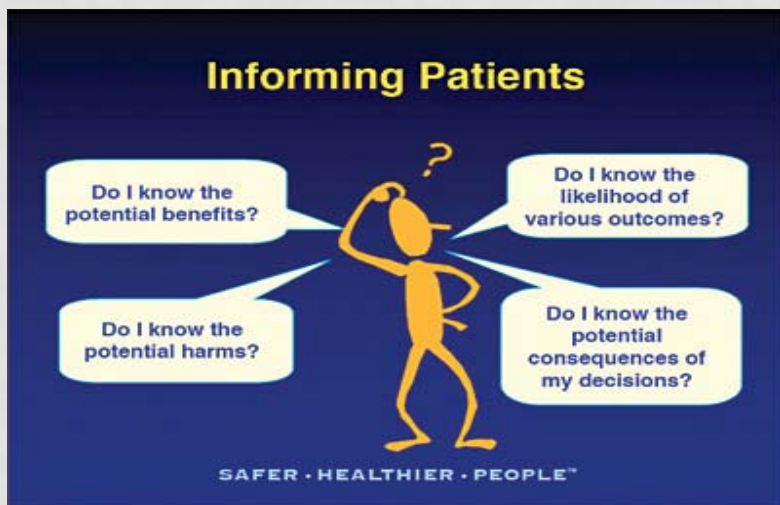


RETHINKING INFORMED CONSENT: THE CASE FOR SHARED MEDICAL DECISION MAKING



SHARED DECISION MAKING: A DEFINITION



- Integrative process between patient and clinician that:
 - Engages the patient in decision-making
 - Provides patient with information about alternative treatments
 - Facilitates the incorporation of patient preferences and values into the medical plan



Rhode Island Hospital Performed Surgery on Wrong Body Part for Fifth Time

The Rhode Island Department of Health is investigating Rhode Island Hospital in Providence after the hospital admitted to operating on the wrong body part for another patient, marking at least the fifth wrong-site surgery at the hospital since 2007.



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AboutLawsuits.com



PATIENT SAFETY

Wrong Site Surgery



Wrong Patient Surgery



How do we describe operating on a patient who would say NO to surgery if alternatives, risks and benefits were well understood?



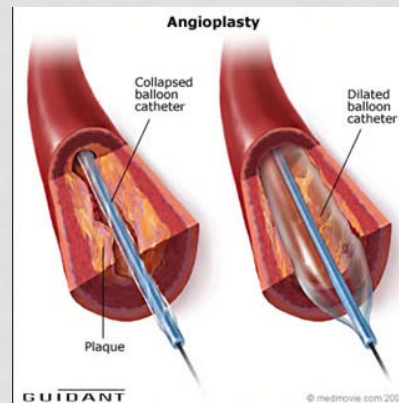
Is informed consent “real”?

- In a survey of consecutive patients scheduled for an elective coronary revascularization procedure at Yale New Haven Hospital in 1997-98
 - 75% believed PCI would help prevent an MI
 - 71% believed PCI would help them live longer
 - Less than half could name even one possible complication of PCI
 - 85% were “consented” just before the procedure (by a fellow or an NP)

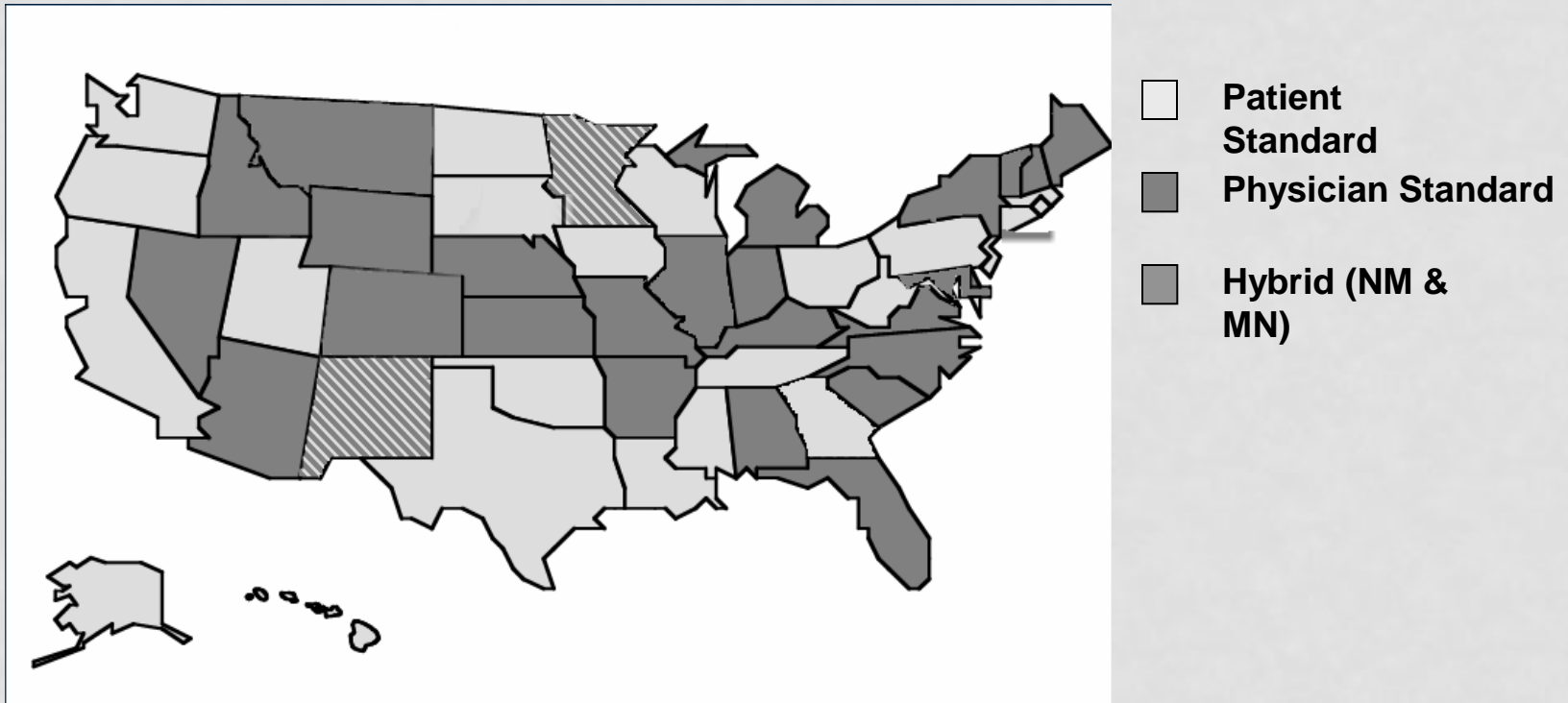


Is informed consent “real”?

- While even through the latest meta-analysis in 2009 (61 trials and 25,388 patients):
 - “Sequential innovations in catheter-based treatment for non-acute coronary artery disease showed no evidence of an effect on death or myocardial infarction when compared to medical therapy.”



23 Patient vs. 25 Physician States 2 Hybrids



Considerable Evidence of Impact

In 86 trials addressing 23 different screening or treatment decisions, use has led to:

- Greater knowledge
- More accurate risk perceptions
- Greater comfort with decisions
- Greater participation in decision-making
- Fewer people remaining undecided
- Fewer patients choosing major surgery



HEALTH POLICY REASONS FOR ADOPTION OF SDM ON LARGE SCALE

- Ethical imperative to do the right thing
- Perfected Informed Consent-aligning preferences, values and lifestyle with individual's clinical decision
- Bridging health disparities
- Conservative utilization of surgical interventions



NEW TORT: OVERUTILIZATION

- Personal Injury Case- Unnecessary Surgery



Patient Protection and Affordable Care Act

HR3590 Section 936



1. Produce patient decision aids
2. Set quality standards and certify decision aids
3. Create Shared Decision Making Resource Centers
4. Grant funds to providers for development, use and assessment of SDM techniques using certified decision aids

Authorized not Appropriated



SDM POLICY ACTIVITY IN THE US

