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Titel des Beitrags: The effect of including a 'psychooncological statement' in the discharge summary on patient-physician communication: a randomized controlled trial.

Abstract: The objective of this study is to determine whether the inclusion of a 'psychooncological statement' (PO-statement) in the discharge summary enhances patient-physician communication about psychosocial issues across the inpatient and outpatient sector. A total of 1416 cancer patients were randomly assigned to the intervention (with PO-statement in the discharge summary) or control group (discharge summary without PO-statement). Shortly before discharge from the hospital (T1), patients from the intervention group were screened for psychosocial distress. Based on the electronic clinical documentation system, screening results were subsequently integrated into the discharge summary, which automatically generated a PO-statement. To determine the effect of the PO-statement, patients as well as their primary care physicians (n = 596) were asked during follow-up care (T2) whether psychosocial distress was discussed during the last consultation. Including a PO-statement in the discharge summary did not result in more frequent discussions about psychosocial issues compared with the control group from the patients’ and physicians’ perspectives. Instead, discussions about psychosocial well-being were significantly associated with women of the patient (p <=0.001) and the
physician (p = 0.011), medical discipline (gynecologists; p = 0.002), cancer diagnosis (gynecological cancer; p = 0.002), metastases (p <=0.001), professional training of patients (none, p = 0.026), and psychosocial qualification of physicians (p = 0.018). Written information on psychosocial distress in the discharge summary alone does not affect communication. Copyright © 2013 John Wiley & Sons, Ltd.