# Improving Patient-Centered Care Delivery in 2017: Introducing Pre-Anesthesia Decision Aids

# Introduction/Problem

Shared decision making is a patient-centered method of making medical decisions that requires physicians to engage with patients regarding treatments that have options – options for which patient preferences as well as physician professional opinion warrant consideration prior to making a final treatment decision. Shared decision making is most appropriate when there is more than one clinically appropriate approach to treatment without complete consensus amongst medical professionals, which is a commonly encountered scenario in anesthesia. In such a situation, decision aids can help patients understand the different therapeutic options and the clinical evidence for each and can assist them in forming and conveying their preferences to their physicians.

# Aim/Goal

To develop anesthesia decision aids to enhance patient knowledge about anesthetic techniques and improve patient engagement in making anesthesiarelated decisions.

#### The Team

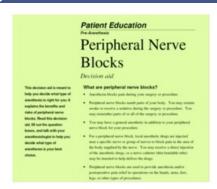
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# The Interventions

- ➤ In 2010, the ASA Committee on Professional Liability partnered with the shared decision-making team at the University of Washington under a grant from the Agency for Healthcare Research and Quality (AHRQ R21 HS19532) to develop regional anesthesia decision aids.
- > Two patient decision aids were developed: Epidural and Spinal Anesthesia and Peripheral Nerve Blocks. They describe the nature of the procedure, benefits, risks (minor and major), side effects, choices, and a reference list. Spaces are included for patients to list the benefits that matter most to them, concerns about possible risks, questions, and information needs.
- The decision aids were transitioned to the ASA Committee on Patient Safety and Education (CPSE) for branding and were approved by the ASA Administrative Council on December 9, 2016 for use in anesthesia clinical practice.

# Results/Progress to Date





Snapshot of the first page of the Epidural and Spinal Anesthesia and Peripheral Nerve Block patient decision aids.

#### Lessons Learned

> The Epidural and Spinal Anesthesia and Peripheral Nerve Block decision aids were tested with patients in a pre-anesthesia evaluation clinic. They were shown to increase patients' knowledge about regional anesthesia and engagement during the clinic visit. Patients more frequently discussed their anesthesia options during the clinic visit if they had been given a decision aid before their visit compared to patients who did not receive decision aids.

# **Next Steps**

- > Currently, ASA governance, publications, and digital content staff are working to copyedit and post the pre-anesthesia patient education decision aids online to be readily available to ASA members for adoption into anesthesia practice.
- > The CPSE proposes the development of additional patient decision aids.
- > For the next decision aid, we might consider the term "Twilight Sleep", clarifying what this means to the patient and how this may differ from the term "sedation". Our goal will be to help patients understand the types of procedures in which these anesthetic techniques might be used, their level of consciousness during the procedure, and what they can expect to feel using such a technique.
- > Other possible future decision aids include DNR/DNI orders during the perioperative period, Monitored Anesthesia Care (MAC), and herbal medications, including medical marijuana.

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