Tests I Wish You'd Never Ordered (Choosing Wisely ©) G Blackburn DO, MACOI Moderator/Infectious Disease ACOI's 11th Annual Hospital Medicine Update March, 2017 Las Vegas, Nevada

I have no financial conflicts

Opinions are my own

Primum non nocere.....

Someday, YOU - and every single person you know and love - will be a patient

- Most any day on hospital rounds, I see patients undergoing various tests or procedures that do not appear (to me) to add to their care; some turn out to be less than beneficial
- A significant number of my consultations are to explain away results, cancel tests or discontinue orders that could have been avoided
- Do other docs feel the same?
- Is there a way of conveying our opinions to our residents and other physicians, hopefully favorably influencing patterns of care, that could easily include us as patients in the future?

Our Previous Opinionated Panelists

- Mark Baldwin, DO (Nephrology)
- Jack Bragg, DO (Gastroenterology)
- John Bulger, DO (Internal Medicine)
- Martin Burke, DO (Cardiology)
- Robert Chilton, DO (Cardiology)
- Patrick Cullinan, DO (ICU)
- Mitchell Davis, DO (Gastroenterology)
- Robert DiGiovanni DO, Rheumatology
- Gregg Friess, DO
 (Hematology/Oncology)
- Scott Girard, DO (Internal Medicine)

- Robert Hasty, DO (Internal Medicine)
- Leonard Hock, DO (Geriatrics)
- Kevin Hubbard, DO (Hematology/Oncology)
- Marc Kaprow DO (Palliative Care)
- Bryan Martin, DO (Allergy/Immunology)
- Jack Prior, DO (Nephrology)
- Robbie Rose, DO (Neurology)
- Stephen Sokolski, DO (Infectious Disease)
- John Sutton, DO (Endocrinology)
- Paul Wenig, DO (Rheumatology)
- Sandra Willsie, DO (Pulmonary / Critical Care)

 Timothy Barreiro DO, FACOI Pulmonary Medicine

 Patrick Cullinan DO, FACOI Critical Care

 Robert Hasty DO, FACOI Internal Medicine John Sutton DO, FACOI Endocrinology

 Gerald Blackburn DO, MACOI Infectious Disease

October 3, 2016 Mr. Gerald W. Blackburn 398 Cumberland Ct. Milford, MI 48381-3394	LIFE LINE S AT RICHARDSON SE COMMERCE THURSDAY, NOVEM THURSDAY, NOVEM Call to Reserve Name: Mr. Gerald W. Blackburn Date: November 10, 2016 Time: Priority Code: MLRA-211 Location: Richardson Senior Center 1485 E. Oakley Park Rd Commerce Township, MI Call 1-800-395-3920 toll-free today!
Dear Mr. Blackburn.	

We are inviting you to participate in a simple preventive health screening to assess your risk for cardiovascular disease, abdominal aortic aneurysms and other vascular diseases. Appointments are now being made for Thursday, November 10, 2016 at Richardson Senior Center in Commerce Township. In fact, this event is sponsored by Vascular Center of Michigan.

Life Line Screening's ultrasound technology can determine your risk for cardiovascular disease, which is the #1 cause of death in the United States for both men and women. While scheduled checkups with your doctor are valuable, it is a fact that ultrasound is a superior and more accurate approach to detecting plaque buildup before symptoms are present.

I encourage you to read the enclosed information about Life Line Screening. We have partnered with hospitals across the country, and have conducted over 11,000,000 screenings since 1993. Please talk to your family physician about the value of these screenings.

We perform 5 painless screenings for Vascular Disease, Heart Rhythm and Osteoporosis for \$149, a \$181 savings if purchased separately.

SCREENING	INDIVIDUAL PRICE
1. Carotid Artery Screening (Plaque)	\$70
2. Heart Rhythm Screening (Atrial Fibrillation	on) \$70
3. Abdominal Aortic Aneurysm Screening	\$70
4. Peripheral Arterial Disease Screening	\$60
5. Osteoporosis Risk Assessment	\$60
TOTAL COST	\$324

Call now to get all 5 screenings for only \$149 and SAVE \$181!

Please take this important opportunity to validate your good health and gain peace of mind. We are coming to Commerce Township for one day only and appointments are limited, so call toll-free **1-800-395-3920** now.



Yours truly,

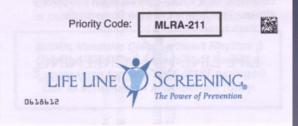
Nathalie Garbani

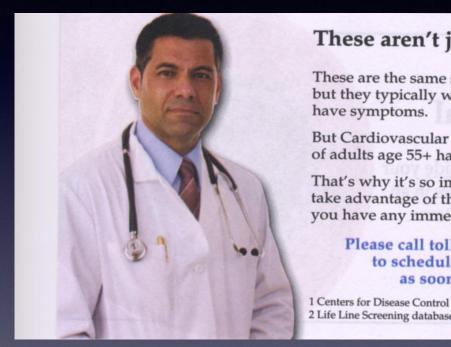
Nathalie Garbani, M.S., Ed.D. Registered Vascular Technologist[®], ARDMS[®] Director of Clinical Quality, Life Line Screening Is Preventive Health Screening Right for You?

Don't Hesitate to Ask Your Doctor



Pre-registration is required. Call toll-free 1-800-395-3920





These aren't just routine medical procedures.

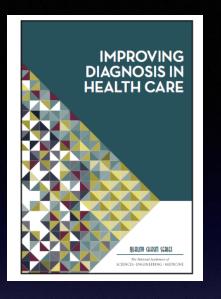
These are the same screenings that your doctor could order for you, but they typically will not be paid for by insurance unless you already have symptoms.

But Cardiovascular Disease is a leading cause of death today,¹ and 70% of adults age 55+ have 2 or more risk factors and may not be aware.²

That's why it's so important to be proactive about your health and take advantage of this advanced ultrasound technology to see if you have any immediate or long-term risks.

Please call toll-free 1-800-395-3920 to schedule your screening as soon as possible.

as soon as possible. 1 Centers for Disease Control 2 Life Line Screening database analysis, 8 million customers screened between 1993-2014



Sept 22, 2015

Improving Diagnosis in Health Care, a continuation of the landmark reports To Err Is Human: Building A Safer Health System (2000) and Crossing the Quality Chasm: A New Health System for the 21st Century (2001) finds that diagnosis—and, in particular, the occurrence of diagnostic errors—has been largely unappreciated...... The committee concluded that most people will experience at least one diagnostic error in their lifetime, sometimes with devastating consequences.

Medical Error Is Third Leading Cause of Death in US.....

...... after heart disease and cancer.....say authors Martin Makary, MD, MPH, and research fellow Michael Daniel, from Johns Hopkins University School of Medicine.

BMJ 2016;353:i2139

(Unfortunately), the stories never seem to end

- An 85 y.o. gentleman, the father of a physician, in reasonably good health visits his new PCP for a "checkup"
- Palpation of the abdomen: possible enlarged aorta. Could there be an aortic aneurysm?
- Abdominal ultrasound: normal aorta, but..........something suspicious in the head of the pancreas!

- CT: normal pancreas, but.....a solitary lesion in the liver strongly suggestive of hepatocellular carcinoma! (the pt had worked w/ numerous chemical solvents his entire life)
- The patient decided against further workup, but.....

- The well-intentioned daughter convinced him to see a liver specialist.....who noted that he had a single lesion, his overall health was good, and his alphafetoprotein was low.
- "With a resection he might live several more years"
 But first, he would need a biopsy!

The good news: no cancer!

- The bad news: Dx hemangioma
 - Almost bled to death, requiring 10 units of blood
 - Pain Rx -> urinary retention -> Foley catheter (removed by patient at home)
- Ultimately, the patient survived his care

Total bill for hospitalization: \$50,000!!!

Rothberg MB. The \$50,000 Physical. JAMA 2014; 311(21):2175-2176

Is this really what we've become or where we are headed?

A friend who had been coughing for three weeks received the following email from her internist after a clinic visit: "Chest x-ray impression: $3.6 \times 2.3 \times$ 6.0 cm left upper lobe mass. This may represent a focal pneumonia; however, at patient's age, a primary lung malignancy is highly concerning. Recommend CT chest with contrast for further evaluation." Friedman E. You've Got Mail. JAMA, June 7, 20 The report was accompanied by this "personal" note:

"Miss ——, please be seen in the ER if not feeling better. Clearly it's pneumonia and suspicion of malignancy that requires CT chest and pulmonary consultation. Hope all goes well, good luck with everything!"

Friedman E. You've Got Mail. JAMA, June 7, 2016

Several years ago I went to my internist and he suggested that I get an MRI of my heart...I asked why...I didn't have any risk factors and I didn't have any symptoms...the internist said that these MRIs are incredible and really informative.
I said OK...but I didn't get it

> from.....Ellen M. Friedman, MD, FAAP, FACS Professor, Otolaryngology Director, Center for Professionalism in Medicine Baylor College of Medicine

 The next year, the internist looked in my chart and said that he couldn't find the results of my cardiac MRI...and I admitted that I hadn't gotten it because I didn't see why I needed one. The

internist said that it was really important to get this as a baseline study even though I didn't have symptoms, so that in the future we would have this information. I still didn't see the point, but I thought if this guy has asked for this twice, I might as well get it... WELL...

- I got the cardiac MRI. The MRI said that I have the heart of a 23 year old...PERFECT. All vessels were healthy... BUT they saw a mass in my lung that needed attention
- I was shocked

I didn't smoke or have any risk factor...BUT the Chief of Pediatrics at my hospital had died two years earlier of lung cancer, also without any risk factors....so I was worried. This was followed up with PFTs, and a PET scan of the lungs...the PET scan showed the lung mass AND a breast mass which raised the concern of breast cancer

 Eventually, after repeated visits, mammograms etc and a great deal of personal distress it turned out that I did NOT have breast or lung cancer and the lung lesion was a probable teratoma, present since birth, which <u>required another</u> <u>image a year later</u>...but no further workup or biopsy...ALL BECAUSE OF THE CARDIAC MRI THAT I DIDN'T NEED!!!!!!





Walt Kelly 1971

Summary I

- Many (often the newest) tests and/or (often the latest) procedures are frequently ordered that add little or nothing to the care of the patient
- These are often expensive, unproven, misinterpreted as to their utility, inconvenient, and/or uncomfortable. They can also be dangerous and occasionally fatal

Summary II

- Often justified as necessary in the era of "defensive medicine", they sometimes create more problems than they supposedly solve
- If a test result will not affect the appropriate care of your patient, then maybe you should not order that test

Primum non nocere.....

Someday, YOU - and every single person you know and care about - will be a patient

Thank you

(w/ special thanks to Susan Stacy FACOI)