

Speaker 1: Story from the front lines: failing grades for doing the right thing. Mrs. Smith is a 40 year old woman who has always had her annual pap smear. With the change in pap smear guidelines, she does not need a pap smear this year. Mrs. Smith comes in for her annual well-woman visit, and she expects a pap smear. She was always taught that screening for cervical cancer was very important, and she is a little worried over this new recommendation and expresses this concern to her physician. So a pap smear is performed. This takes less time than counselling her about why the pap smear guidelines have changed. And it makes the patient happy, because it makes her feel safe.

The test shows mild dysplasia, so she returns to the office for another appointment, including a colposcopy and biopsy. Mild dysplasia is confirmed on the biopsy and the patient is told that this does not need treatment, but that she should have another pap in six months. She's a little anxious, but relieved that this abnormality was caught in time. So, the patient had anxiety expense, discomfort, and a couple of extra procedures over this. It turns out that she is happy that her doctor did not follow the guidelines. After all, in her view, he found something and now he will follow it closely. But, the pap smear did not need to be done in the first place, and the results of mild dysplasia are very unlikely to be significant in this case. Most mild dysplasias resolve spontaneously without any needed treatment. Furthermore, progression from mild to cancerous is very slow, so progression would be discovered within the recommended interval. As a physician, what do we have to believe in?

This is just my opinion, but I think that physicians have to believe in educating their patients about why certain tests do not need to be done. I also think we have an obligation to the society as a whole to be good stewards of healthcare dollars. It does take more work to teach patients about why a test may not need to be performed. In fact, it takes longer to explain this than to just do the test. In my current system, the grade on my report card which I receive every month and shows each physician listed with the number of patients seen and the amount of charges generated, is lower for doing the right thing rather than the more expensive thing. There is no column for following guidelines or saving patients money by choosing a more conservative and less costly treatment. But I choose to try and do the right thing, and to follow appropriate guidelines when I can.