

Breaking Bad News To Patients On The Breast Imaging Service: Designing a Resident Curriculum

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Background

- Breast cancer is increasingly common, affecting many individuals and their friends/loved ones
 - 1 in 8 US women will develop breast cancer in their lifetime
- For most rotations, radiology residents are not involved in direct patient care and may not have the same clinical experience as our non-radiology colleagues
- Currently no standardized curriculum in the Department of Radiology to teach residents how to effectively communicate with patients
- We hypothesize that implementing a standardized curriculum for the diagnostic radiology residents will allow them to learn the fundamentals and gain the appropriate skills required to deliver results to patients confidently

Curriculum Design

Five steps:

1. Residents will complete a self-evaluation about their comfort level with delivering results to a patient prior to starting rotation

3. One of the faculty will debrief with the resident. The resident will then be instructed to watch the educational video

5. Residents will complete the same self-evaluation as in Step 1

Start of rotation

End of rotation

2. Each resident will undergo two standardized patient encounters representing common clinical scenarios seen in breast radiology

4. Residents will undergo two additional standardized patient encounters at the end of rotation

Materials and Methods



Prior to starting the breast rotation, residents will receive a welcome packet including:

1. Resident self-evaluation (pre- and post-curriculum)
2. Educational video
3. SPIKES protocol information and SP session scoring sheet



First week of rotation: complete first SP encounter and pre-curriculum self-evaluation



Middle of rotation: review educational video, obtain feedback from faculty, and review the SPIKES protocol info sheet



Last week of rotation: complete second SP encounter and post-curriculum self-evaluation



Resident Survey

- An IRB-exempt, anonymous ten-question self-evaluation was created using an internet-based survey engine (Survey Monkey)
- The 5-point Likert Scale was used to gather resident feedback on personal and curriculum subjects
 - 1 indicating not at all confident/important
 - 5 indicating extremely confident/ important
- Residents will fill out same self-evaluation twice for comparison
 - Pre- and post- curriculum



Educational Video

- Included in rotation welcome packet
- Two pre-recorded scenarios performed by current faculty member and radiology resident
 - “Good” news scenario
 - Patient has a palpable abnormality; it's a simple cyst
 - “Bad” news scenario
 - Patient presents for a callback for screen-detected asymmetry, which effaces on additional imaging and is benign. But she has an incidentally seen mass that has some suspicious features. On diagnostic work up, this is assessed as a BIRADS 4A.



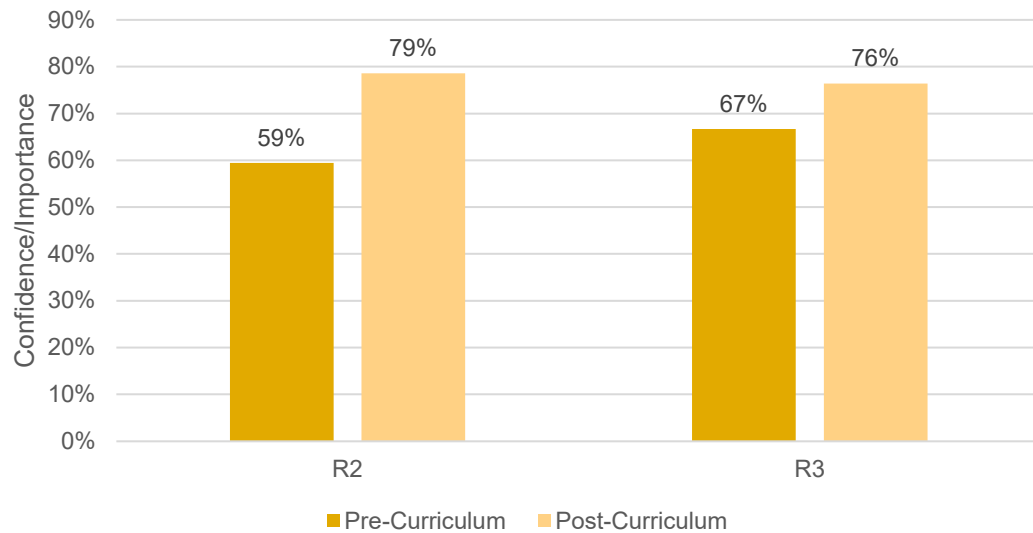
Standardized Patient Encounters

- Pre-curriculum and post-curriculum encounters are scored using the SPIKES protocol for delivering bad news
- A UCLA breast faculty acts as the patient, the resident acts as the attending
- Residents complete one “good” and one “bad” scenario for each encounter
 - Good news scenarios:
 - Patient has a palpable abnormality that is assessed as a simple cyst
 - Patient with benign diagnostic workup, but has had two relatives die from breast cancer so she's anxious
 - Bad news scenarios:
 - Patient has screen-detected calcifications that are assessed as suspicious (BIRADS 4C) on diagnostic work up
 - Patient has an incidental finding that is assessed as suspicious (BIRADS 4A) on diagnostic work up
- Immediate feedback from faculty

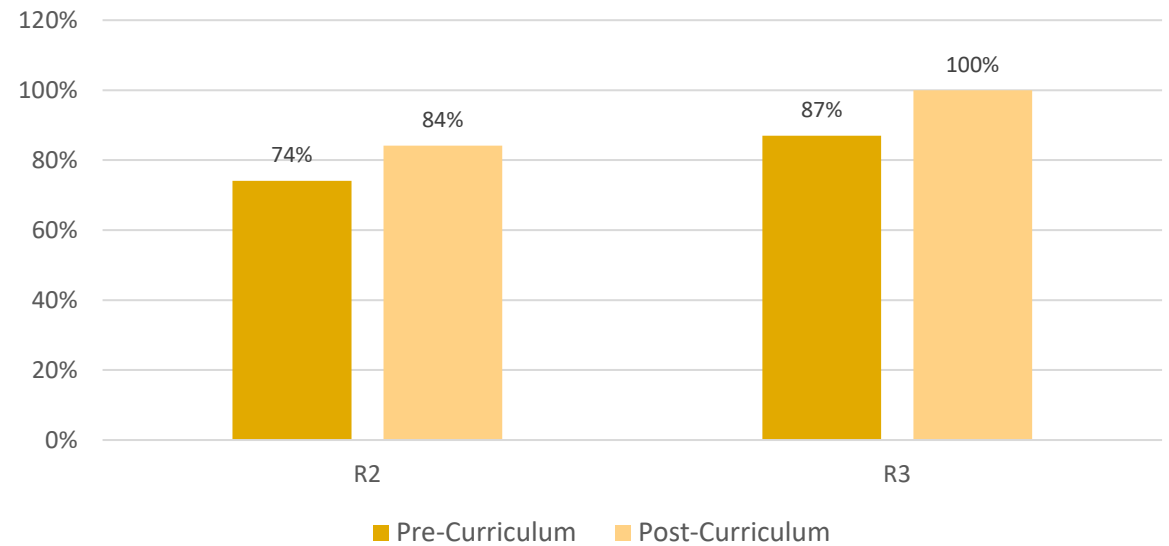


Results

Pre vs Post Curriculum Survey Responses (average)



Pre and Post Curriculum SP Encounter Scores





Conclusions

- Implementing a standardized curriculum for radiology residents completing their breast rotation will increase their confidence and ability to effectively deliver patient results
- The overall goal is to ease patients allowing them to feel as comfortable and confident with their providers as possible, thus decreasing anxiety when presenting to the breast imaging department
- Further analysis will be performed as more residents complete their rotation

Please feel free to reach out with
questions or comments:

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THANK YOU.