

## When Is Better Care Not Patient Centered?

To the Editor:

Swenson's commentary, entitled "Patient-centered Imaging,"<sup>1</sup> proposed a "national Web-based platform" that offers administrative restrictions for ordering radiologic studies to reduce overuse and misuse. This would be a substantial step toward standardizing our health care system along principles that have been shown to improve quality in other industries, most notably the principles of Lean Six Sigma.<sup>2</sup> However, such administrative controls alone would not necessarily be patient centered.

The 2007 joint statement of the principles of the Patient Centered Medical Home by the American College of Physicians, American Academy of Family Physicians, American Academy of Pediatrics, and American Osteopathic Association states: "Patients actively participate in decision-making and feedback is sought to ensure patients' expectations are being met" and "Practices advocate for their patients to support the attainment of optimal, patient-centered outcomes that are defined by a care planning process driven by a compassionate, robust partnership between physicians, patients, and the patient's family."<sup>3</sup>

We must not assume that adhering to evidence-based guidelines using health information technology is the sole component of patient-centered care. Administrative control of computerized physician order entry neither engages the patients in the decision-making process, nor ensures that patients' expectations are met. Similarly, Computerized Physician Order Entry restrictions do nothing to strengthen

a partnership with patients and physicians during the care planning process.

In fact, such a centrally administered, standardized restriction may endanger the doctor-patient relationship. When the United States Preventative Services Task Force revised their mammography screening guidelines in 2009, there was a large public outcry against a perceived reduction in services. Rather than embracing steps toward improving quality and effectiveness of health care services, many editorials in the lay press revealed that patients were left confused, frustrated, and leery of the health care system.

These recent experiences show the need to engage the public more fully before, during, and after we make drastic changes to our practice patterns, regardless of the evidence. Simply placing administrative controls or changing national guidelines does not engage the public nor form a robust partnership. If we are to practice true patient-centered care, we must not settle for a doctor-centric approach to systems changes. While striving towards an evidence-based approach that incorporates the latest technology, we must not lose sight of the patient.

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## References

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2. George M. Lean Six Sigma: Combining Six Sigma Quality with Lean Production Speed. New York: McGraw Hill, 2002.
3. American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, and American Osteopathic Association. Joint principles of the patient-centered medical home. 2007.

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