Integration of the Same Cross-cutting Patient Reported Outcome Measures Across Multiple Subspecialties

Mark A Nyman, M.D.[1]

[1]Division of General Internal Medicine

INTRODUCTION

The use of Patient Report Outcome Measures (PROM) to assess outcomes of medical care continues to advance across various disease states and patient populations. Attention has been brought to the need for standard sets of measures for specific disease states to allow for comparisons of outcomes across different practices within a nation or across the world. However, less attention has been paid to the patient journey. Typically, in clinical practice, patients present with multiple medical conditions that need addressing or they may visit several specialty areas for the same condition. Use of legacy measures within disease states, even if standard across all practices, creates the potential for overlapping or redundant questions when a patient's journey includes multiple disease states or their journey includes visits to multiple specialty practices. One way of avoiding this overlap is to use cross-cutting domain specific measures that matter to patients. The Patient-Reported Outcomes Measurement Information System (PROMIS®)[1] offers such cross-cutting measures such as physical function and pain interference. To further reduce the overall patient burden with the number of questions answered, PROMIS has created computer adaptive testing (CAT) algorithms to reduce the number of questions presented to a patient per domain. These same PROMIS CAT based algorithms have now been incorporated into the actual instance of the local electronic health record (EHR) to allow for seamless integration into the clinical practice. We report on the application of two cross-cutting domain specific PROMIS CATs in five different specialty practices across all care settings of a large academic medical center.

OBJECTIVES

Use PROMIS-CAT for PROM to assess Physical Function and Pain Interference across specialties including Physical Medicine and Rehabilitation, Orthopedics, Rheumatology, Pain Medicine, and Neurosurgery to reduce redundant questions being queried through a patient's journey.

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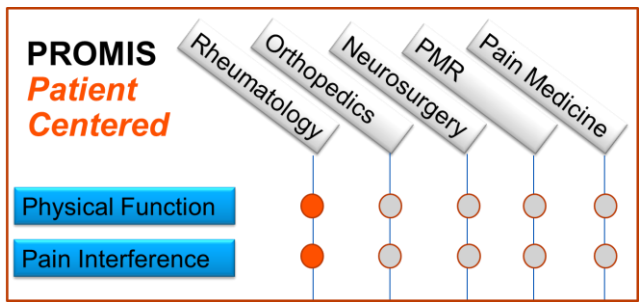
METHODS

Through a centralized PROM governance and engagement of clinical practice leadership, the common domains of physical function and pain interference were initially adopted for implementation. Common platforms were built within the EHR to allow for visualization of the PROM results for providers during their visit with patients. Links to pull pertinent results into notes were provided.

RESULTS

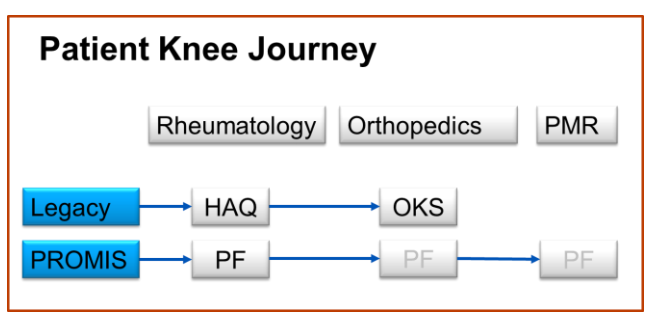
We have successfully applied the physical function and pain interference PROMIS CATs to five different specialty practices, including Physical Medicine and Rehabilitation, Orthopedics, Rheumatology, Pain Medicine, and Neurosurgery. CATs are assigned to all clinical visits with rules to prevent repeated administration more than once per month. If a patient's journey takes them to all five specialty areas within a 30-day time span, they only complete that specific PROMIS CAT domain once (See FIGURE 1 and 2).

FIGURE 1: Shared Domains of Interest



Patient's seen within the same week in multiple specialties complete assessment within a particular domain only one time

FIGURE 2: Patient Journey



DISCUSSION

PROM use to accurately assess patient outcomes from the patient perspective continues to expand. Assessing the value of services rendered from the patient's perspective is a laudable goal. Specialties are interested in the outcomes of their providers. Payors of care are interested in assessing the value of the care they are purchasing. Researchers cling to legacy measures. Standardizing the measurement across providers is critical to fully understand and compare the outcomes of care provided. However, we must not forget the full journey patients are required to walk. Within a disease state they may require the assistance of multiple specialists, or a patient may have multiple problems that need assessing by multiple specialists – so measures must be harmonized across specialties to avoid redundant and repetitive questionnaires. Use of specialty specific legacy measures sets patients up for repetition when seeking care through multiple disciplines. Use of cross-cutting domain specific PROMS like PROMIS® across disparate disciplines can alleviate this patient burden.

CONCLUSIONS

- To protect patients from excess questionnaire burden, it is possible to widely implement cross-cutting domain specific PROMs across multiple subspecialties within a large academic clinical practice.
- Payers, researchers, and specialties need to consider the broader patient journey and allow for the use of cross-cutting PROMs within their outcome value sets.

REFERENCES

1. https://www.healthmeasures.net/explore-measurement-systems/promis accessed 9-16-2024

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