Patient Understanding and Perceptions of Overlapping Surgery: An Observational Study Performed in a Level I Trauma Center Outpatient Clinic

ABSTRACT

INTRODUCTION:
The practice of overlapping surgery—in which a single attending surgeon oversees the surgical care of more than one patient simultaneously—has become a topic of increasing scrutiny in the United States. The aim of this study is to objectively quantify understanding of and level of concern with overlapping surgery in a cohort of patients being treated within the trauma division at our institution. A secondary goal is to identify whether any demographic factors influence self-reported understanding or concern.

METHODS:
The lead author created a 15-question survey to evaluate three primary domains from respondents: demographic features, pre-existing knowledge regarding the practice of overlapping cases in the operating room, and the perceived importance of this practice on the quality of care provided. Standard five-point Likert scales were used for where appropriate. A position statement on overlapping surgery—one designed by our institution and given to all prospective surgical patients—was included in the survey. This position statement gives a brief overview of overlapping surgery and how it is utilized within our institution. The survey was then offered to consecutive patients being treated in the outpatient clinic of the trauma division at our institution, until a total of 200 responses were collected. This population included a mixture of prospective surgical patients and those already having undergone surgery. Patients completed the survey only once and participation was strictly voluntary. No patient identifiers were gathered. Patients were asked to grade their level of concern with overlapping surgery before and after reading the position statement. Statistical analyses were then performed to compare responses between groups.
RESULTS:
Two-hundred patients completed the survey, of which 98 (49%) were male. The age range was broadly distributed. Regarding education, the largest group (73 patients or 36.5%) comprised patients who had graduated from high school. 97 patients (48.5%) reported an annual income of less than 50 thousand dollars. 124 patients (62%) were being seen for follow up after having undergone surgery, and the remaining were prospective patients.

Prior to reading the position statement, 116 of respondents (58%) reported having no knowledge of the practice of overlapping surgery, and only 7 patients (3.5%) reported having extensive knowledge. Regarding patients’ level of concern with overlapping surgery, 127 patients (63%) reported their level of concern as a 1 on an ordinal scale from 1 to 5, corresponding to the lowest possible level. Of that group, 7 patients (5.5%) indicated an increased level of concern after reading the statement, 70 patients (55%) indicated no change, and 50 patients (39.5%) indicated a decrease in level of concern. A total of 18 patients (9%) indicated a level of concern greater than the median level on the ordinal scale.

The most common factors cited as areas of concern by patients were resident, PA or fellow involvement in the case (34%) and that the attending surgeon might not be present for the entire procedure (31%). African Americans expressed a higher average level of concern with overlapping surgery.

DISCUSSION:
The majority of patients surveyed in our clinic indicated little preexisting knowledge of overlapping surgery, and an even larger percentage reported a low level of concern with the practice. These data highlight the importance of explaining overlapping surgery to patients and indicate some level of disagreement between how overlapping surgery has been portrayed in the media and how patients think and feel about it. The process of disclosing the use of overlapping surgery via use of our department’s position statement—and offering an opportunity to discuss it openly in clinic—resulted in a self-reported decrease in level of concern in over one-quarter of
patients. Thus, this survey may serve as a useful tool to openly disclose the practice of overlapping surgery and invite an open discussion with surgical patients.