

# First-of-kind study reveals public and physician attitudes toward recording clinical visits

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Dartmouth Institute Assistant Professor Paul Barr, Ph.D., led a first-of-kind study that assesses the attitudes of doctors and the public toward recording clinical visits. The research team also surveyed 49 of the largest health systems in the US to determine whether they currently have in place policies on the sharing of recordings for doctors and patients. Credit: The Dartmouth Institute

With over three-quarters of Americans now owning a smartphone, healthcare researchers have speculated that the number of patients recording visits with their doctor was increasing. However, a new study by researchers from The Dartmouth Institute for Health Policy and Clinical Practice is the first to measure the prevalence of recording of clinical visits in the United States. The first-of-its-kind study, recently published in the *Journal of Medical Internet Research*, also assesses the attitudes of doctors and the public toward recording, and surveys 49 of the largest health systems in the U.S. to determine whether they currently have in place policies on the sharing of recordings for doctors and patients.

"We know that up to 80% of [healthcare](#) information is forgotten by [patients](#) after their clinic visit," says Dartmouth Institute Assistant Professor Paul Barr, Ph.D., the study's lead investigator. "There's also been significant research that shows access to recordings can improve patient satisfaction and increase understanding of medical information. But, this is the first study, to my knowledge, that surveys doctor and patient attitudes to try to really understand how they feel about recordings and where things might be headed."

The research team used online surveys to assess clinician and patient attitudes about recording. To ensure a diverse representation of specialists, researchers included clinicians from the following eight specialties: emergency medicine, general/family medicine, internal medicine, general surgery, obstetrics and gynecology, orthopedic surgery, [physical rehabilitation](#), and psychiatry. To assess patient attitude toward recording, the research team surveyed over 500 adults from 48 states—in a sample that was representative of U.S. demographics.

Among their findings on clinician attitudes:

- 28% reported recording a clinical visit for a patient's personal

use.

- Among those who had not, 50% were willing to do so, while 50% were not.
- Analysis found that only clinical specialty (as opposed to factors such as gender or length of time in practice) was associated with recording a visit in the past.
- Clinicians in oncology and physical rehabilitation were more likely to have recorded a visit, while clinicians in general/family practice were least likely to have recorded a visit.

Among their findings on public attitudes:

- 16% of respondents reported recording a clinic visit with permission, while only 3% did so secretly (without asking permission first); 82% had never recorded a clinic visit.
- 59% said they would consider recording with the permission of the doctor, while only 7% said they would consider recording without a doctor's permission.
- Analysis found that individuals who reported having recorded a visit with permission of a doctor were more likely to be male, to be younger, and to speak a language other than English at home.
- While 63% of individual respondents were interested in recording a visit in the future.
- Only 10% of respondents said their clinic (doctor's office) offered recordings of visits for personal use.
- A limitation of the study was that focusing on a sample of the public, rather than a sample of patients, may underrepresent the prevalence of recording occurring in healthcare, as it includes respondents who may have limited experience with health systems.

Of the 49 [health systems](#) surveyed, none reported having a dedicated policy or guidance for [doctors](#) or patients on the practice of sharing

recordings; two said they had an existing policy which would cover patient requests for audio and video recordings of clinical visits.

The researchers conclude that their findings suggest that while patients and individual [healthcare providers](#) are taking the lead on sharing recordings of clinical visits, policy makers are lagging behind. They also note that dissemination of innovation in healthcare has a tipping point of between 15-20%, after which it's difficult to stop, and that recording and sharing of clinical visits may have reached this point.

"Recording clinical visits could help us tackle some of the biggest challenges in healthcare. It could help patients with chronic conditions better adhere to their treatment plans, potentially lowering costs. It could help alleviate the documentation burden many healthcare providers currently face," Barr says. "But, we urgently need to have some policy guidelines in place for clinicians and patients—we needed them yesterday."

**More information:** Paul J Barr et al, Toward Open Recordings: The prevalence of recording clinic visits for patients' personal use in the U.S. (Preprint), *Journal of Medical Internet Research* (2018). [DOI: 10.2196/11308](#)

Provided by The Dartmouth Institute for Health Policy & Clinical Practice

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