Key Takeaways:
• Indiana University’s radiology department invites patients to share their imaging experiences during resident teaching conferences.
• Allowing former patients this opportunity can illuminate areas for improvement surrounding quality care.
• Residents and other trainees found the conferences with patients to be enlightening and worthwhile.

Editor’s note: This case study is part of a series called Imaging 3.0 NOW. Case studies in this series highlight straightforward initiatives that radiology practices can implement immediately to jumpstart or advance their Imaging 3.0 efforts.

“A patient presents …” The medical community uses this phrase frequently when discussing patients’ symptoms. However, the idea of a patient presenting has taken on new meaning in the radiology department at Indiana University (IU).

There, radiology leaders have begun inviting patients to attend teaching conferences and present their imaging experiences to residents and other trainees. The goal is to inspire incoming radiologists to provide high-quality, patient-centered care and encourage them to remember the significant impact they can have on individual lives.

An Idea Takes Shape
Richard B. Gunderman, MD, PhD, FACP, the John A. Campbell professor of radiology at IU in Indianapolis, says the notion of having patients share feedback at resident teaching conferences grew from a desire to improve the patient experience through education and awareness.

The noontime conferences usually include approximately 40 residents and fellows and about 20 medical students. Patients have presented at two of the daily conferences so far, and Gunderman plans to invite more patients to the meetings going forward.

“ Normally a teaching conference would consist of a radiologist showing cases, such as chest X-rays and head CT scans, or having the residents look at cases and try to figure out the pathological conditions,” Gunderman explains. “But then we thought, ‘Instead of focusing solely on the images, let’s have patients come and talk about what their experiences were like being diagnosed with diseases such as cancer.’”

Gunderman reached out to several patients and immediately found two courageous women who were willing to participate in the conferences is that they both had worked in radiology departments in the past.

A Brave Reminder
At the start of the conferences, Gunderman asked a few questions, which prompted each of the women to detail her personal experience. The residents then had the opportunity to ask questions, with many inquiring how the physicians might have done better and how the patients viewed radiologists.

Rachel Rincker, MD, a first-year resident at IU, says that while both women expressed unease about having received their diagnoses over the phone, their feedback about radiology was mostly positive. “Breast cancer is a particularly strong story because it’s a screening examination,” she says. “These women specifically said, ‘The radiologist made a huge difference in my care.’”

Through the Patient’s Eyes
Following the two patient-centered conferences, a survey of attendees revealed that many residents
rated the conferences highly, while others also told Gunderman in person that they enjoyed the sessions. Based on this feedback, Gunderman says the department hopes to conduct multiple conferences like this each year and use what they learn to improve patient care.

“Most radiology residents are in their 20s, and, fortunately, most of them haven’t faced too many serious illnesses during their lives,” Gunderman explains. “Unless you have experienced it yourself, it can be difficult to appreciate what it’s like to be told you have cancer or another serious illness. Getting to interact with these patients offers an opportunity to see it through their eyes.”

Next Steps

• Ask patients whether they’d be willing to share their experiences in radiology with trainees at a teaching conference or other type of meeting.
• Create a dialog with patients by asking a few questions that prompt them to share their stories and allow trainees to chime in with questions of their own.
• Survey radiologists, residents, and other attendees after the patient interaction to gauge the impact and assess potential changes that could be made to address patient concerns.

Share Your Story

Have a case study idea you’d like to share with the radiology community? To submit your idea, please click here.