UC Irvine
Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health

## Title
Physician Perception of Patient-Physician Communication

## Permalink
https://escholarship.org/uc/item/7sb1m7v1

## Journal
Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 26(3.1)

## ISSN
1936-900X

## Authors
Gore, Katarzyna
Brown, Dustin
Coghlan, Callan
et al.

## Publication Date
2025-06-16

## DOI
10.5811/westjem.48608

## Copyright Information
This work is made available under the terms of a Creative Commons Attribution License, available at https://creativecommons.org/licenses/by/4.0/

eScholarship.org Powered by the California Digital Library
University of California

(16/79) of faculty felt the curriculum sufficiently prepares residents for future billing responsibilities. Residents and faculty identified reimbursement models, critical care billing, and determining encounter-appropriate E/M codes as areas of need (Table 1). Faculty attestations often add information to resident notes for billing (Figure 1), but only 41% (32/79) felt equipped to teach these skills. Graduates reported greater confidence than residents and faculty in most areas (Table 1), and 58% (11/19) felt the billing curriculum prepared them for independent practice.

**Conclusions:** Residents and faculty indicated a need for improved billing education under the 2023 guidelines and areas for curricular improvement. Graduates felt more confident in their billing knowledge than anticipated

**Table 1.**

| | % Agreeing or Strongly Agreeing | | |
|---|---|---|---|
| | Residents (n=28) | Faculty (n=79) | Graduates (n=19) |
| I understand how the reimbursement model from the Centers for Medicare & Medicaid Services influences billing and coding practices in the emergency department. | 36% | 53% | 79% |
| I understand how Relative Value Units (RVUs) are related to the medical services I provide. | 68% | 68% | 79% |
| I understand how Evaluation and Management (E/M) coding levels for emergency department encounters (CPT 99281-99285) are determined. | 68% | 62% | 84% |
| I understand the requirements for documenting critical care billing (CPT 99291 and 99292). | 43% | 77% | 74% |
| I am able to determine the appropriate E/M code for my patient encounters. | 29% | 33% | 58% |
| I adjust my level of documentation based upon the patient's presentation and anticipated E/M coding level. | 32% | 39% | 58% |
| I utilize tools in the electronic medical record (e.g., smartblocks or smartphrases) to help guide my documentation for improved billing. | 64% | 61% | 95% |

## 33 Physician Perception of Patient-Physician Communication

*Katarzyna Gore, Dustin Brown, Callan Coghlan, Danielle Raslan, Galeta Clayton, Aylin Ornelas Loredo, Michael Gottlieb, Stanley Rozentsvit, Hunter Jenkins*

**Background:** Assessing patient satisfaction with physician performance, particularly in communication, is standard in the U.S healthcare system. There is significant variability in residency training regarding specific areas of patient centered communication.

**Objective:** The objective of this study was to compare resident and attending physician self perceived communication skills and perform a thematic analysis of reported challenges and barriers to good communication.

**Methods:** This was a cross-sectional mixed methods survey study among resident and attending physicians at a single academic center. We developed a survey, informed by the validated Communication Assessment Tool. Additional questions focused on health equity and open-ended responses. The survey items used 1-5 Likert scales. We gathered content and response process validity prior to distribution. The survey was distributed weekly for 3 weeks, following modified Dillman methods. For quantitative analysis, we compared mean resident vs attending scores utilizing a pooled unpaired sample t test. For qualitative analysis, two study members performed thematic analysis following best practices in qualitative research.

**Results:** 72% (26/36) of residents and 53% (26/49) of attending physicians completed the survey. There was no statistically significant difference between resident and attending perceptions for any survey items. Thematic categories were consistent across both groups and identified the following challenges: managing expectations, time, and equity concerns.

**Conclusion:** Patient centered communication is a milestone based competency in which residents should progress, therefore, the lack of difference between resident and attending groups brings to question how best to educate and evaluate communication skills. Both groups rated their training on communication lower when compared to other questions in this study. This study further identifies the need for standardized patient centered communication in training in order to prepare resident physicians.

**Table 1.**

| Question | Attending mean | Resident mean | P-value |
|---|---|---|---|
| (1-13) How do you rate your ability: | | | |
| (1) Effective Communication | 3.92 | 3.88 | 0.8438 |
| (2) Empathy | 3.92 | 3.92 | 1 |
| (3) Minimize patient misunderstanding | 3.61 | 3.46 | 0.4134 |
| (4) Convey complex information | 3.88 | 3.54 | 0.1199 |
| (5) Resolving communication challenges | 3.54 | 3.12 | 0.0667 |
| (6) Manage patient expectations | 3.50 | 3.19 | 0.1482 |
| (7) Elicit patient health care concerns | 3.65 | 3.62 | 0.8587 |
| (8) Develop rapport | 3.96 | 4.27 | 0.1722 |
| (9) Communicate effectively with non-English speaking patients | 2.85 | 2.88 | 0.8775 |
| (10) Communicate effectively with patients that share a different gender | 3.77 | 3.85 | 0.7218 |
| (11) Communicate with patients that have a different race | 3.50 | 3.77 | 0.1935 |
| (12) Communicate with LGBTQIA+ patients | 3.85 | 3.73 | 0.6284 |
| (13) Use pronoun-sensitive language with transgender patients | 3.35 | 3.58 | 0.4195 |
| (14) How would you rank the training (dedicated time during residency focused on patient communication strategies led by core faculty) you have received on patient centered communication? | 2.96 | 2.88 | 0.7677 |
| (15) How would you rate the simulation experiences you have participated in regarding patient centered communication? | 3.19 | 3.23 | 0.8864 |
| (16) Do patient evaluations accurately reflect your communication abilities | 2.08 | 2.65 | 0.0628 |