

CEJA Report 12 – A-98 Reporting Clinical Test Results: General Guidelines

INTRODUCTION

Inquiries from physicians and patients about standards for clinical test result reporting have prompted the Council on Ethical and Judicial Affairs to offer some general guidelines. Physicians may adopt different routines to suit their personal preferences and practice, thereby making a rigid policy impractical. Nonetheless, with the understanding that there may be reasonable variations, certain unchanging safeguards should be in place in order to alleviate any of the patients' attending anxieties, to secure patients' rights, and to facilitate patient-physician communication.

CONSIDERATIONS FOR REPORTING CLINICAL TEST RESULTS

Patients' Anxieties

When a physician recommends that a patient undergo clinical tests, the patient's emotions are understandably heightened. The role of the physician as a reassuring presence and a good communicator is important.¹ One study found that "thirty of [the 38 patients included in final evaluation] had pre-test anxiety...Residual anxiety was inversely proportional to post-test understanding."² Receiving information helps patients feel in control of decisions about their medical care, less confused and more reassured.³

Prompt Reporting

To alleviate post-test anxiety, physicians should report clinical test results to patients within a reasonable time frame.^{4,5} The urgent nature of the test result and the seriousness of the condition should be considered when calculating a reasonable time frame. Physicians should use their best professional judgment when determining what length of time is reasonable for the particular situation at hand. If the physician anticipates delays in receiving back test results, this should be explained to patients at the time of testing (*e.g.*, if a test must be sent away to a distant laboratory, patients should be informed that the test results will take longer to return).

Consistency

Physicians should adopt a consistent reporting policy that accommodates the demands of their practice while at the same time being considerate of patients' anxieties. For instance, an appropriate reporting policy may consist of the primary care physician calling the patient only if the test result is positive and otherwise sending the test results via the mail in a sealed envelope. Alternatively primary care physicians may adopt a test result reporting policy that consists of always calling the patient to inform him or her of their test results regardless of the status of the results. Further consideration should be given to which steps will be taken if the test results are life-threatening. In all cases, the policy should be consistent and should be disclosed to patients during the clinical encounter so they know what to expect.

When formulating reporting policies, physicians should consider under what circumstances and by whom tests are appropriately reported to the patient. For example, it is common for physicians to seek additional consultation to conduct clinical tests that are essential for accurate diagnosis and treatment. At times, such consultations are marked by differing expectations among the primary care physician, consultants and other providers, such as nurses or residents.⁶ For example, some consultants may either choose to or be required to disclose to the patient the results of the tests they conduct. Communication among the care team regarding expectations, such as how to expect test

results to be reported, is essential so that the patient can receive consistent care. Any anticipated inconsistencies should be disclosed to patients as soon as they are discovered.

Patient Information and Informed Consent

Physicians should provide test results in language understandable to the patient and in the manner deemed most appropriate by the physician.⁷ Patients have the right to receive information from physicians that is necessary to discuss benefits, risks, and costs of appropriate medical treatment.⁸ Patients can effectively exercise their right to self-decision and informed consent only if they possess enough information to enable an intelligent choice.⁹ Disclosure of significant information gathered from clinical tests is necessary in order for the patient to fully explore treatment options. The Council on Ethical and Judicial Affairs' Opinion E-8.12, "Patient Information," states, in part, "Only through full disclosure is a patient able to make informed decisions regarding future medical care."¹⁰

Confidentiality

Medical records are confidential documents. The information included in the medical record should not be shared with third parties without the patient's prior written consent.¹¹ Test results fall under this confidentiality protection because they will ultimately become part of the information contained in the patient's medical record. When physicians report test results they should be mindful of methods that might make the test results accessible to third parties. All appropriate precautions should be taken to ensure the confidentiality of test results when reporting them to the patient. Such precautions may include, but are not limited to, not leaving test results on an answering machine, on voice mail or with a third party unless previously given permission to do so by the patient, not delivering test results via electronic mail, and not sending test results through the mail in any form other than a sealed envelope.

RECOMMENDATIONS

The Council recommends adoption of the following general guidelines and that the remainder of this report be filed:

1. To alleviate patients' anxieties, physicians should report clinical test results to patients within a reasonable time frame. Since many variables contribute to the urgency of a particular situation, physicians should use their best professional judgment when determining what length of time is reasonable for the particular situation at hand. Anticipated delays should be explained to patients at the time of testing.
2. Physicians should adopt a consistent reporting policy that accommodates the demands of their practice while at the same time being considerate of patients' anxieties. The reporting policy should be disclosed to patients during the clinical encounter when tests are administered so patients know what to expect. Reporting policies should take into consideration under what circumstances and by whom tests are appropriately reported to the patient. Any anticipated inconsistencies should be disclosed to patients as soon as they are discovered.
3. Physicians should provide test results in language understandable to the patient and in the manner deemed most appropriate by the physician. Any information gathered from test results that would be necessary for patients to make intelligent medical decisions and give informed consent on future medical treatments must be disclosed to them.

4. Physicians should take all appropriate precautions to ensure the confidentiality of test results. Such precautions may include, but are not limited to, not leaving test results on an answering machine, on voice mail or with a third party unless previously given permission to do so by the patient, not delivering test results via electronic mail, and not sending test results through the mail in any form other than a sealed envelope.

REFERENCES

1. Reiser DE, and Rosen DH. *Medicine as a Human Experience*. Maryland: Aspen Systems Corporation Publication. 1984. p. 28, 83, 104-5.
2. Levine MJ. Patient reassurance when test results are normal. *J Fam Pract*. 1996;43:440-441.
3. Kavanagh AM, Broom DH. Women's understanding of abnormal cervical smear test results: a qualitative interview study. *BMJ*. 1997; 314: 1388-1391.
4. Council on Ethical and Judicial Affairs, American Medical Association. Fundamental Elements of the Patient-Physician Relationship. Principle III states, in part, "The patient has the right to...timely attention to his or her needs." *Code of Medical Ethics* 1996-97. p. xxxix.
5. The California Health and Safety Code § 123 148 (1997): Report to patient of results of clinical laboratory test. "The test result...shall be reported to the patient within a reasonable time period after the test results are received at the offices of the health care professional who requested the test."
6. Stoeckle JD et al. A Manual on Manners and Courtesies for the Shared Care of Patients. *J Clinical Ethics* 1997 Spring; 8(1): 15-26.
7. This provision is recommended in accordance with the California Health and Safety Code § 123 148 (1997): Report to patient of results of clinical laboratory test. "Notwithstanding any other provision of law, a health care professional at whose request a test is performed shall, upon a written or oral request of a patient who is the subject of a clinical laboratory test, provide the patient with the results of the test in plain language conveyed in the manner deemed most appropriate by the health care professional who requested the test. The test result...shall be reported to the patient within a reasonable time period after the test results are received at the offices of the health care professional who requested the test."
8. Council on Ethical and Judicial Affairs, American Medical Association. Fundamental Elements of the Patient-Physician Relationship. *Code of Medical Ethics* 1996-97. p. xxxix.
9. Council on Ethical and Judicial Affairs, American Medical Association. Opinion 8.08, "Informed Consent." *Code of Medical Ethics* 1996-97. p. 120.
10. Council on Ethical and Judicial Affairs, American Medical Association. Opinion 8.12, "Patient Information." *Code of Medical Ethics* 1996-97. p. 125.
11. Council on Ethical and Judicial Affairs, American Medical Association. Opinion 7.02, "Records of Physicians: Information and Patients," makes this claim while allowing for the exception that confidentiality can be breached if required by law or to protect the welfare of the individual or the community. This exception is spelled out more clearly in Opinion 5.05, "Confidentiality." *Code of Medical Ethics* 1996-97. p. 77, 101.