Factors influencing patients’ preference and confidence in a surgeon

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Abstract:
Introduction: The factors underlying a patient’s choice of a surgeon and the reasons of his continued confidence in him have not been scientifically elucidated in any study in India. However, it is important for surgeons to understand these reasons both to get patients and to hold onto them by providing optimal satisfaction.

Methods: A questionnaire based study was conducted with 300 respondents over 6 hospitals. Responses were obtained for two categories 1. The reasons for choosing a particular surgeon and 2. The reasons for continued confidence in the chosen surgeon. The responses were then statistically analysed. Choices of compulsion like distance, affordability or corporate/insurance tie ups were excluded and responses were taken wherever patients had exercised free choice.

Observations and results: In the first category, the top 6 responses for factors affecting choice of a surgeon were -prior personal exposure to the surgeon, recommendation of a known doctor, reputation of the institute, reputation of surgeon, qualifications of surgeon and higher cost of treatment. In the second category the 6 major determinants of patient satisfaction were- the surgeon’s ability to answer concerns and explain plan of treatment, good listening skills, relaxed, confident and friendly mannerism, cleanliness and comfort of the examination room, neatness of attire and paradoxically crowd in waiting area.

Conclusion: Prior positive experience with the surgeon and recommendation of a trusted health care provider, were the most important criterion in selecting a surgeon. Good verbal and non-verbal communication and empathy were most important for patient satisfaction.

Key Words: Patient satisfaction, Effective Communication, Empathy

Introduction:
Research on Medical decision making abilities has focussed more on physicians than on patients. Even when patient’s decision making has been analysed, it has been in the field of choosing therapeutic options and making make end-of-life decisions. [1] Little work has been done in evaluating the factors affecting a patient’s choice of a doctor, specially a surgeon. Some work has been done abroad, mainly in UK to identify factors affecting choice of physician in their National Health Service. However, even this research is scanty and old. Surgery has always been viewed by the lay population with emotional overtones ranging from apprehension to awe. However, when it befalls someone’s fate to have to undergo surgery, the decision becomes more personal and difficult.

The decision to hand over his/ her body to be cut up by a particular surgeon is not lightly arrived at by any patient. Patient confidence and satisfaction depends on factors which are not always governed...
by marketing strategies. Thus we decided to explore the factors affecting patients’ selection, satisfaction and confidence as regards to their surgeons. To the best of our belief, based on extensive internet and literature search, no study of this kind has ever been done in India.

**Aims:**

1. To identify factors which influence a patient in selecting a surgeon
2. To identify factors which give satisfaction and confidence to the patient in continuing with the surgeon being consulted

**Methods:**

An open interview method was used and 50 cases each were interviewed at 2 corporate, 2 government and 2 industrial hospitals of Delhi, over a one year period from October 2014 to September 2015. The patients from the outpatient waiting area of these hospitals were selected randomly and after taking due consent, requested to respond to the two questions posed. They were asked to grade their responses on a scale of 0 to 10.

The questions posed were-

1. What factors would influence your decision to come and seek treatment from a particular surgeon?
2. What factors would give you the confidence to continue treatment with and be operated upon, by the surgeon you have shown yourself to?

Their responses were collected and the top 6 responses in each category were analysed.

**Exclusion criterion:**

- Choices of compulsion rather than confidence, like-affordability, distance from home etc; were excluded.
- It was further appreciated that industrial hospitals – like Railway or Employees’ State Insurance Corporation (ESIC) might be a compulsion in choice of centre. However, there too if a patient had made a choice of a particular surgeon, then their responses were included and if they had come to the hospital without making a choice, then their responses were excluded.
- Role of corporate / insurance tie ups were dealt with in a similar manner.

**Observations:**

The responses were tabulated using Microsoft Excel worksheet and analysed statistically. (see table 1)

**Factors Influencing selection of surgeon**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Prior personal exposure to surgeon</td>
<td>8.03</td>
<td>2.20</td>
</tr>
<tr>
<td>2 Recommendation of a trusted health care provider</td>
<td>7.70</td>
<td>2.50</td>
</tr>
<tr>
<td>3 Reputation of hospital/ institution/centre</td>
<td>7.58</td>
<td>2.15</td>
</tr>
<tr>
<td>4 Reputation of surgeon</td>
<td>7.39</td>
<td>2.35</td>
</tr>
<tr>
<td>5 Qualifications of surgeon</td>
<td>6.93</td>
<td>2.48</td>
</tr>
<tr>
<td>6 Higher Cost of treatment</td>
<td>6.07</td>
<td>2.16</td>
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</table>

**Factors Influencing patient satisfaction and continued confidence in the chosen surgeon**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Mean</th>
<th>SD</th>
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<tbody>
<tr>
<td>1 ability to answer concerns and explain plan of treatment</td>
<td>8.51</td>
<td>0.93</td>
</tr>
<tr>
<td>2 Listening skills</td>
<td>8.29</td>
<td>1.24</td>
</tr>
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Discussion
Increasingly the doctor-patient relationship is being viewed as a service provider-consumer relationship and being evaluated as such.
Leavey et al showed that this consumerist approach to medicine depends on several premises. These include a motivation on the part of patients to exercise choice, a range of alternatives from which to choose and information about those alternatives. [2]
However, market forces would apply only if people chose their doctors as if they were choosing a service. But very few patients do this.
This apparent lack of motivation by patients to exercise choice is neither due to a shortage of alternatives, nor due to lack of availability of information. Probably, most people are not demanding more information before choosing a doctor because the information available is not what patients wish to know. It seems that a doctor’s approachability and manner are easily the most important things that patients look for and that is not available in any printout. Therefore, patients largely rely on personal recommendation and inquiry.[3]
Moreover patient confidence and satisfaction depends on factors which are not always governed by marketing strategies. Though no such studies have been done in Indian setting, human nature being similar universally, lot of parallels can be drawn from some studies done in the west.
In our study, as also in others, it is obvious that prior positive personal experience and word of mouth recommendations of a fellow physician/health care provider known to the patient, are more important than any advertisement strategies and even qualifications. Minor factors included female patients having some preference for lady surgeons and patients from Bihar, Bengal and Punjab showing some preference for surgeons from their state. Though some authors have noted such preferences with regard to age and sex, [4], patient perceived professionally relevant factors (e.g. qualifications, office appearance etc.) have been found to be more important than the doctor’s personal characteristics.[1] It was interesting to note that higher cost of treatment actually drew in more patients. However, it is to be noted that this was after affordability as a criterion had been excluded.
After having selected and meeting the surgeon, communication is by far the single most important criterion deciding patient satisfaction. This has also been seen in various previous studies where information given by the doctor has shown a high correlation with patient satisfaction. Equally important in patient satisfaction have been the information provision by patients.[5]
Both verbal and non-verbal communication behaviours, which include, lack of dominance, enquiry about psychosocial issues, information giving attitude, positive affect and friendliness, discussing options, and encouraging patients to ask questions, are associated with higher patient Satisfaction.[6]
Elizabeth Hall, MD, has described communication as the key for patient satisfaction. She has stressed on acknowledging the patient's feelings and concerns and the importance of letting them know that they are being understood and active attention

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<th>Mean</th>
<th>SD</th>
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<tbody>
<tr>
<td>3</td>
<td>Relaxed, confident and friendly mannerism</td>
<td>7.39</td>
<td>2.35</td>
</tr>
<tr>
<td>4</td>
<td>Cleanliness and comfort of the examination room</td>
<td>6.89</td>
<td>2.30</td>
</tr>
<tr>
<td>5</td>
<td>Neatness of attire</td>
<td>6.33</td>
<td>2.68</td>
</tr>
<tr>
<td>6</td>
<td>Crowd in waiting area</td>
<td>5.85</td>
<td>2.30</td>
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is being paid to both, their verbal and nonverbal language. “It is not only what we say, but also how we say it”. [7]
Cornstock et al found that listening and asking open ended questions correlated positively with patient satisfaction. [8] Rotor et al concluded that social communication, partnership building, positive non-verbal behaviour, positive talk and technical and inter-personal competence were main predictors of patient confidence. [9] Williams and Calnan found that a doctor’s perceived failure to take patient’s problems seriously was a major indicator for dissatisfaction. [10] Other major indicators of patient dissatisfaction have been identified as lack of warmth and friendliness on the part of the doctor, failure to take into account the patient’s concerns and, lack of clear cut explanation and use of medical jargon. [11] Thus a doctor’s listening skills and empathy depicted both verbally and by mannerism are also of utmost importance.

Paradoxically, crowd in waiting area actually increased the patients’ confidence in the doctor provided the waiting area itself was comfortable. The definition of a comfortable waiting area differed from population to population and varied between public and corporate settings. However, once inside the examination room patients’ expected both the doctors and the premises to be spic and span and comfortable.

Conclusions
Factors patients perceive as most important to their choice of a treating surgeon are those that have the greatest effect on the quality of healthcare they are likely to receive. [1] However, the most important determinants of their decision are personal and interactive, like prior experience with the treating surgeon and word of mouth recommendation from a trusted expert in health care field. Subsequently, communication skills of the surgeon, and his mannerism, are essential for patient confidence and satisfaction.
The most important factor which gives a patient confidence in choosing a surgeon is the prior personal experience with the surgeon. This is followed by the recommendations received from a known physician. These were closely followed by the perceived reputation of centre and then that of the surgeon as available from media, word of mouth advertisements, etc. Since affordability had been excluded, higher cost of treatment, instead of being a deterrent, was a confidence building factor with almost 50% patient’s feeling that a more expensive surgical treatment, would probably also be better. The exact qualifications of the surgeon came a distant sixth and were not very important to almost 50% patients. Some other factors which were important to a lesser degree included sex of the doctor, the state he/she belonged to and international exposure of the doctor.

Bibliography
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