Diagnosis of Fracture Is Associated with Lower Satisfaction with Physician Performance Among Orthopaedic Surgery Patients

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Purpose: Survey-based patient experience data are becoming increasingly important as a tool to guide performance improvement as well as physician and hospital reimbursement. This study is designed to identify risk factors associated with decreased patient satisfaction with physician performance. We hypothesized orthopaedic patients with fractures would be less satisfied with their physicians.

Methods: From November 2010 to November 2012, Press-Ganey satisfaction surveys were sent to all patients after an inpatient stay at a suburban Level I trauma center, which is a quaternary care teaching hospital. Our primary outcome was the proportion of patients that were satisfied or very satisfied with physician performance. We compared this outcome for all orthopaedic patients with and without fractures, controlling for demographic differences in patient population as well as other factors with a logistic regression model.

Results: 8554 surveys were analyzed with a 30% response rate. 1084 of these patients were admitted to an orthopaedic service. Of all patients admitted to orthopaedic services, those with fractures (n = 114) were significantly less likely to be satisfied with the performance of their physicians (79% vs. 91%, P < 0.001). A diagnosis of fracture remained a significant risk factor for decreased satisfaction even after controlling for other demographics in multivariate logistic regression (Figure 1).



Odds of Physician Satisfaction

See pages 99 - 147 for financial disclosure information.

Conclusion: Orthopaedic trauma patients and elective orthopaedic patients may view their care differently because of the unplanned admissions and unpleasant prognoses commonly associated with trauma. We have demonstrated that having a fracture is a strong risk factor for decreased satisfaction with physician performance even when controlling for other relevant variables. As patient satisfaction data are increasingly being used to evaluate hospital and physician performance and to determine reimbursement, it will be important to adjust for factors such as traumatic injury to avoid penalizing those that provide orthopaedic trauma services.

[•] The FDA has not cleared this drug and / or medical device for the use described in this presentation (i.e., the drug or medical device is being discussed for an "off label" use). For full information, refer to page 600.