

Agenda Setting Tips

Assumptions:

- Time is valuable and limited; extra time with one patient means less for the next
- You may not be able to address all problems in a single visit – and that’s okay!
 - Some issues can be postponed for follow-up. More time on fewer problems = better care

Value of Agenda Setting:

- Focuses on issues most important to patient
- Uncovers other important issues that may not have surfaced
- Sets the tone for shared decision-making
- Sets realistic expectations for the visit

1) Starting your visit (do this for every patient):

- “I see that you’re here to discuss your gout. Before we begin, I always like to find out: are there any *other* issues you were hoping to discuss today? It would be helpful if we could make a list so we can figure out how to best use our time today.”
- (for return patients): “Last time we had planned for you to come back today to follow up on your high blood pressure. Were there any other issues you had hoped to discuss today? Let’s make a list so we can figure out how to best spend our time today.”

2) Make the list:

- After patient has listed their concerns always ask: “Something else?” – and wait more than 1 sec for the answer!
- Keep asking until the patient indicates completion: e.g. “that’s it,” or “nothing else.”

3) Plan the visit:

- “Where should we start?”
- “That’s a lot of topics to try to tackle in the time we have for this visit. Would it be all right if we prioritized the ones that are most important to you and focus on those today?”
- “I’m not sure we could do all of those problems justice if we try to tackle them all in the time we have today. I do think it would be important to discuss your chest pain today since it sounds like potentially the most serious. Would it be all right if you picked one other issue to deal with today as well and save the rest for next visit?”

4) Restate the agenda

- “So today we will plan to cover your headaches and chest pain, and save your shoulder pain for the next visit”

5) Concluding the visit – plan for next visit

- “Let’s schedule an appointment now for another visit to focus on that shoulder pain.”
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Potential sidetracks:

- Postpone your urge to ask diagnostic questions – focus on making the list!
- For premature diving by the provider: “Excuse me for a moment, I am getting a little ahead of myself. Before we talk further about your headaches, were there any other issues you wanted to cover today?”
- For premature diving by the patient: “Forgive me for interrupting. I certainly want to hear more about the headaches, but before we get into further detail I’d like to know if there are other issues you wanted to discuss today --- I just want to make sure we make the best use of our time today.”

AGENDA SETTING BEHAVIORS OBSERVATION FORM

Resident: _____ Year: R1 R2 R3 Date of Evaluation: / /

The following behaviors were observed during this evaluation of the resident’s clinic encounter: (NOTE: the ones marked with a * are identified as required to meet minimal competency)

Initiation of Visit

- Orienting patient to agenda setting process

Solicitation of Concerns

- The doctor identified patient concerns *
- The doctor invited patient to voice additional concerns (e.g. “Is there something else?”) *
- The doctor recognized and responded to “clues” for other agenda items?
- The doctor summarized the patient’s concerns?

Prioritization and Negotiation

- The doctor asked the patient which concern were most important to the patient to cover today?
- The doctor let the patient know what he/she was most hoping to cover today?
- The doctor acknowledged the patient’s concerns without agreeing to cover all the issues at today’s visit?
- The doctor proposed an appropriate agenda for the office visit and acknowledged unmet patient concerns? *
- If there was disagreement between the doctor and patient about the agenda, the doctor respectfully tried to resolve the conflict?
- If there were items not covered in the agenda, the doctor made arrangements to cover them at a subsequent visit(s)?
- The doctor restated the negotiated agenda

Attestation of Competency: The resident has shown at least minimal competency in Agenda Setting YES NO

Take Home Points:

- Do this for every clinic visit – the one time you forget will be the one where you regret it!
- It can be done in seconds to minutes and will likely save you time in the long run
- Doing it consistently will help set realistic expectations –many patients will come to expect it!
- Is a central part of patient-centered care
- **** The whole team can help with Agenda Setting -- schedulers, front desk, medical assistants, etc.****

Additional reading:

Baker LH, O’Connell D, Platt FW, “What Else?’ Setting the Agenda for the Clinical Interview,” Ann Intern Med 2005;143:766-770

Skills practice:

For the physician role (Don't peek at the other side!**):**

- A) 43 yo woman here for "preventive exam."

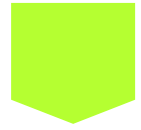
- B) 35 yo man, appt line reads: "testicular pain." Your MA has listed the chief complaint as "Pain in L testicle." You read through his previous notes and he has been seen twice before in clinic over the last month for testicular pain – his STD w/u has been negative and a scrotal U/S showed a moderate-sized L hydrocele. Previous notes are also remarkable for a blood pressure of 160/100; he is not on any blood pressure meds.

- C) 47yo woman, appt line reads: "back pain / arm pain / psych issues."
 - You enter the room and see a smiling, somewhat disheveled woman accompanied by her dog and carrying an envelope stuffed with papers.

Skills practice:

For the patient role:

- A) You are a 43 yo woman here for “preventive exam.” This is your list of problems that you were hoping to discuss (you may or may not let the person playing the physician know all of the issues up front; it depends on how well they agenda set. To you, the questions about the breast cancer screening and your heart issue are the most important, but this is the order you have them written down):
- 1) Annual – need a pap smear, last 3 were normal.
 - 2) Diarrhea – for the last 2 weeks. Non bloody, no fevers.
 - 3) Osteoarthritis – you have chronic joint aches in your fingers and knees
 - 4) Breast exam – you are currently nursing and advised to wait until done to have your annual mammo. You are very concerned about missing a breast cancer
 - 5) Broken tailbone - with childbirth; still having pain and wonder what your options are
 - 6) Aortic insufficiency: you had an Echo a few years ago showing mild AI and wanted to know recommendations for repeat imaging; notified that AI trivial at last examination (no clear indication for repeat echo or endocarditis prophylaxis)
 - 7) Skin check - Patient would like to a dermatologist for full skin exam
 - 8) Thyroid scan/check - 1 cm nodule noted of right posterior gland in 1999; TSH studies normal at that time; no further work-up. You are wonder if you need follow-up.
- B) You are a very anxious person who hasn't really seen many doctors in the past. If the doctor starts asking you about your testicular pain, you will be happy to tell him more about it and your concerns, but really you have all of these other issues on your mind (also, you are a fast talker and sometimes just jump from topic to topic):
- really the testicular pain is mostly better but if asked you will start telling the whole story over again – started a month ago, seen by another provider 2 wks ago who treated you for STDs but all of your testing was normal. Then you had an ultrasound showing bilateral hydroceles – is that concerning, doc? – and now mainly you have a little tightness in your testes after ejaculation
 - Insomnia: this has been lifelong. And also you feel like a very anxious person – you used to take valium for this but more recently start using marijuana to help with the sleep. Also, EtOH: you drink max 10 beers at once, more typically is maybe 2x/month, typically 6 beers at a time but spread out throughout the day. You feels like you should stop drinking because you don't want to become an alcoholic.
 - Elevated blood pressures: you have been checking at home for the last couple of weeks; bp's mostly running in the 170-190 systolic range. (+) extensive FH of HTN. Some second degree relatives w/ CAD. DOE / palpitations: You have gained about 30# over the last few months and have noticed you are much more SOB than usual even with minimal jogging or climbing stairs. Also have associated palpitations.
- C) This case is about catching cues and anticipating needs. When asked, you can clearly list the issues you'd like to discuss: chronic back pain, recent shoulder injury, and chronic depression.
- However, you are on chronic narcotics for your back pain and need a refill. You don't realize your doctor might want to know that up front so you only mention that if specifically asked, otherwise you were going to mention it at the end.
 - Also, you're applying for disability and you have a 6 page disability form that needs to be turned in next week. You don't realize your doctor might want to know this up front as well. You figure it's just some paperwork they can fill out at the end. You only mention if specifically asked.



WELCOME! We offer you this form to help make your appointment with your healthcare provider today more *meaningful*.

What are the main concerns you would like to discuss with your provider today?

1. _____
2. _____
3. _____

Are you experiencing any of the following?

- | | |
|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Black/Tarry Stools <input type="checkbox"/> Bleeding <input type="checkbox"/> Blood in Stool <input type="checkbox"/> Breathing Difficulty <input type="checkbox"/> Bruising (unusual) <input type="checkbox"/> Chest Pain or Tightness <input type="checkbox"/> Cough <input type="checkbox"/> Coughing Blood <input type="checkbox"/> Disorganized Thinking
(Distracted, Illogical, Challenge
"Thinking Straight") <input type="checkbox"/> Excessive Thirst <input type="checkbox"/> Eye Pain <input type="checkbox"/> Falls <input type="checkbox"/> Fatigue (new or worsening) <input type="checkbox"/> Feeling Anxious <input type="checkbox"/> Feeling Down <input type="checkbox"/> Fever <input type="checkbox"/> Headaches (new or worsening) <input type="checkbox"/> Hearing Loss (new or worsening) <input type="checkbox"/> Heartbeat Concerns <input type="checkbox"/> Memory Problems <input type="checkbox"/> Numbness | <ul style="list-style-type: none"> <input type="checkbox"/> Pain (new or worsening)
Location _____
Severity from 0-10: _____ <input type="checkbox"/> Skin Changes (recent) <input type="checkbox"/> Sexual Concern <input type="checkbox"/> Swallowing Problem <input type="checkbox"/> Swollen Ankles <input type="checkbox"/> Urination Change <input type="checkbox"/> Vision Change (recent) <input type="checkbox"/> Watery Stools <input type="checkbox"/> Weakness <input type="checkbox"/> Weight Change (unintentional) <input type="checkbox"/> Wheezing <p>Female Only:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Breast, Menstrual or Vaginal
Bleeding Concerns <input type="checkbox"/> Last Menstrual Period _____ |
|---|--|
- None of the Above**
- _____
- _____

Thank you for completing the form. Your provider will review and discuss what is most important today.

PLACE LABEL HERE