Experience in Audiology with a patient informed choice pathway for MRI requests

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Background/summary

- The NICE 2019 guidance for managing hearing adult hearing loss tightened up criteria for MRI referrals and the consequent increase in referral rate was raised as a concern by Radiology. Audit indicated a striking 60% increase in Audiology referral numbers.
- Discussions between Audiology and ENT came to a consensus that MRI requests were suitable for an informed choice pathway. The MRI scan is looking for a rare condition which even when found most often leads to conservative management. The scan can show up incidental findings, most commonly age related brain changes which the patient might not necessarily want to know about. (If it was your family member what would you want?)
- Patient information to facilitate an informed choice pathway was developed jointly with input from Radiology and with patient feedback.
- Radiology have been very supportive and the pathway aligns well with their national ‘Get It Right First time’ (GIRFT) initiative. ENT/Audiology requests make up the largest number for any directorate within this Trust. Using an informed choice pathway ensures that patients who proceed to a scan actually really understand and want it. This frees up finite scanning resources for other patients/conditions.

Developing the patient information

- Initial draft based on other NHS informed choice information (managing skin melanoma)
- Discussion and feedback incorporated from ENT, Audiology and Radiology colleagues
- Feedback sought from patients by questionnaire

Patient feedback on first draft

- ‘I think people are quite frightened of having an MRI and it might be worth pointing out that there is someone with them all the time’
- ‘I do not understand the phrase asymmetrical hearing loss’
- ‘Information provided seems clear and concise - this information would have led me to not have the scan’

Historic Increasing MRI referrals

- The 2018 NICE guideline for managing adult hearing loss tightened up the criteria for cochlear asymmetry to >=15dB at any two adjacent test frequencies (0.5, 1, 2, 4 and in addition including 8kHz)
- Over 3 months all Audiology MRI referrals using the NICE criteria were reviewed against the previous more lax criteria (>=20dBHL at two adjacent frequencies)
- There was a 60% increase!

Referral numbers for MRI following introduction of the patient informed choice pathway

- Over an 18 month period 523 patients with asymmetrical SNHL followed the pathway and 185 patients declined the scan (35%)
- Over a 12 month period 253 patients with unilateral non-pulsatile tinnitus followed the pathway and 86 patients declined the scan (34%)

Audiologist Script:

- The hearing test results show a difference between your two ears which meets the criteria for referral for an MRI scan to investigate what may be causing the difference in hearing.
- There are advantages as well as disadvantages to having an MRI scan investigation. We therefore are not automatically arranging a scan but instead are asking you to consider whether you really want it.
- We are giving you some written information about the pros and cons of having a scan to take home and consider, and you might want to discuss this with other family members.

Patient feedback on the pathway

- 9/9 stated they preferred the informed choice pathway compared to the clinician deciding on their behalf
- 8/9 stated that the written information was clear
- 4/9 stated that they liked to have both the written information and verbal advice. 4/9 preferred written information only and 1/9 preferred verbal information.