

## POSTER 77

**PATIENT SATISFACTION AND ANXIETY WITH INFORMED CONSENT  
DELIVERED THROUGH INFORMATIONAL VIDEO COMPARED TO THE  
TRADITIONAL PHYSICIAN INTERVIEW**

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**Abstract****Objective:**

1. To evaluate patient satisfaction and anxiety towards informed consent with traditional physician interview compared to combination of watching an informational video and patient-specific physician interview.
2. To discover how an informational video will affect physician time management.

**Methods:** This is a prospective, randomized controlled trial evaluating satisfaction and anxiety in patients being consented for tonsillectomy and adenoidectomy with the standard physician interview compared to utilizing an informational video as an adjunct. Randomization occurs into control (physician interview) versus intervention (informational video plus patient-specific physician interview) groups. Measured variables and outcomes for the study include satisfaction and anxiety levels evaluated before and immediately after the informed consent process with validated anxiety (State-Trait Anxiety Inventory, STAI) and satisfaction (Client Satisfaction Questionnaire-8, CSQ-8) questionnaires and time involved for the informed consent (total time and direct physician contact). This is a MU IRB approved office-based study.

**Results:** Analysis of 32 patients (17 control, 15 intervention) has not shown a statistically significant difference in anxiety or satisfaction between the two groups after informed consent, but a statistically significant difference in physician time spent ( $p < 0.0001$ ) on the informed consent process. The intervention group had overall less direct physician time spent with the patient on informed consent compared to the control group.

**Conclusion:** We provide evidence that viewing an informational video with patient-specific physician interview for informed consent maintains satisfaction and anxiety levels, and reduces total direct physician time committed to the informed consent process compared to the traditional physician interview.