the primary care provider (r=0.43, p<0.01), but not with expectations for MUS improvement (r=0.07 to 0.15, p=0.55). These findings indicate that addressing perceptions of disagreement (and potentially actual disagreement) with the provider will be an important intervention target, but that veterans’ expectations for improvement and therefore potentially their actual improvement may be difficult to change.

PHS89 EATING METROPOLITAN FUNCTIONAL IMPAIRMENTS OF RHEUMATOID ARTHRITIS: INTEGRATION OF NATIONALWIDE SURVIVAL WITH HEALTH ASSESSMENT FROM CLINICAL COHORT

Hzung M†, Chiu Y.M†, Hwang J*, Wang J†
†Department of Public Health, National Cheng Kung University Medical College, Tainan, Taiwan, 2Changhua Christian Hospital, Changhua City, Changhua County, Taiwan, 3Institute of Statistical Science, Academia Sinica, Taipei, Taiwan, 4National Cheng Kung University College of Medicine, Tainan, Taiwan

OBJECTIVES: The lifetime functional impairments associated with rheumatoid arthritis (RA) have received little attention in the literature. This study determines the dynamic changes of different physical functional impairments over time and the factors that affect them. A cohort consisting of 39,455 incident RA patients in Taiwan between 1998 and 2009 was used to measure impairment items and levels in 394 consecutive patients at three clinics for the period 2011-2012. A HAQ-DI score over 1.5 was considered as suffering from severe disability. Lifetime functional impairments were obtained by extrapolating the gender and age-stratified survival functions to lifetime, and then multiplying them with the proportions of different kinds of functional impairments over time.

RESULTS: On average, RA patients had 5.40, 15.05, and 2.36 years with no, moderate, and severe disability, respectively. In RA patients diagnosed at the ages of <50, 50-64, and ≥65 were expected to have 23.02, 15.03, and 8.46 years living with disabilities, which would be about 76.1%, 75.3% and 77.7% of their lifetime, respectively. A higher proportion of females suffered from functional disabilities than males, at 78.7% and 59.2%, respectively. The most common functional impairments were reach and grip. Conclusions: RA patients suffer from functional disabilities over three-fourths of their remaining lifetime, and are in need of long-term care.

PHS90 PATIENTS’ PERCEPTIONS OF PHYSICIAN’S CARING ATTITUDE IS THE CRITICAL FACTOR IN DETERMINING PATIENT SATISFACTION

Park C†, Kim N†, Chung J†, Feldman SR*, Balkrishnan R*, Chang J†
†The University of Texas at Austin, Austin, TX, USA, *Northwestern University, IL, USA, 2University of Washington, Seattle, WA, USA, 3University of Michigan, Ann Arbor, MI, USA, 4Samford University, Birmingham, AL, USA

OBJECTIVES: Patient satisfaction is a crucial component of better health care outcomes. Recently, many physicians voluntarily started to report their satisfaction on physicians using the Internet. Given these, there is need to evaluate the relationship between physicians’ attitude and patients’ satisfaction using the recent web-based survey data. METHODS: Data from a cross-sectional survey on the ratings of physicians provided by patients were used to evaluate the relationship between physicians’ attitudes and patients’ satisfaction. The independent variable was the physician’s attitude, and the dependent variables were patients’ satisfaction with the physician and patients’ satisfaction with the office setting. RESULTS: A total of 273,994 patients were included. The average (standard deviation, SD) of patients’ satisfaction with the physician was 78.08 (0.14), and the average (SD) of patients’ satisfaction with the office setting was 78.62 (0.12) out of 100. Physicians’ attitude was a significant predictor factor on patients’ satisfaction with the physician (β = 8.71, p < 0.001) and the office setting (β = 7.03, p < 0.001). The predictor variables (physicians’ attitudes and covariates) accounted for 92.5% of the variance on satisfaction with physicians. Additionally, both longer waiting times to get an appointment to see physicians and to see physicians after arriving at the office were highly correlated with lower patients’ satisfaction with their physicians (ρ = -0.26, p < 0.001 and ρ = -0.52, p < 0.001, respectively). CONCLUSIONS: There is a strong relationship between perceptions of physicians’ friendliness/caring and patients’ satisfaction. Empathy skills can be significantly increased after taking targeted educational programs. To facilitate patients’ satisfaction with health care a continuous effort to develop empathetic ability of physicians should be undertaken so that patients perceive their empathic physicians.

PHS91 LEAN "INFLOW" CHANGE MAY IMPROVE PRIMARY CARE PATIENT SATISFACTION: A PILOT STUDY

Chen PH, Wong E, Hung D

OBJECTIVES: This study examines the impact of Lean “inflow” change on patient satisfaction at a primary care pilot clinic location of a large, multispecialty health care provider in Northern California undergoing system-wide transformation. METHODS: The health care provider serving 24 million patients has invested a significant amount of resources in Lean management to transform the way primary care is delivered. The Fress Ganey (PG) outpatient survey was used. The monthly PG score, covering a two-year period, compared pre and post-implementation of Lean in the pilot site relative to two comparison sites. Monthly site differences between pilot and comparators in median PG scores were calculated as the dependent variable. Segmented regression with a breakpoint at the start of the intervention was used to assess the change in PG scores, adjusting for site and time effect relationship. RESULTS: Relative to comparator 1, there was a significant trend post Lean implementation of 0.2 percentage point per month (p<0.002) in pilot site Internal Medicine and 0.1 percentage point per month (p=0.004) in pilot site Pediatrics. There was a significant trend post implementation of Lean of 0.1 percentage point per month (p=0.001) in pilot site Family Medicine and Pediatrics relative to comparator 2. Besides, there was an immediate and 2 percentage points (p<0.001) increase in pilot site relative to comparator 2 at the 3 months of Lean implementation. CONCLUSIONS: Lean “inflow” changes had improved patient satisfaction in pilot site Pediatrics by 1.9 and 7.5 percentage points relative to two comparators, respectively. Patient satisfaction in pilot site was estimated to increase by 2.7 percentage points relative to comparator 1 for Internal Medicine and 7.6 percentage points relative to comparator 2 for Family Medicine after Lean was implemented, based on the trend of site differences in the preceding year. Overall, Lean “inflow” change seemed to improve primary care patient satisfaction.

PHS92 RELIABILITY OF THE EFFECTIVENESS OF SMOKING CESSATION INTERVENTIONS AMONG MALE SAUDI COLLEGE STUDENTS

Almajbeg YS, Abuhogah S, Sansipgy SS

OBJECTIVES: Several pharmacological and behavioral interventions have been implemented to help smokers with smoking cessation efforts. However, smoking still persists as there may be a lack of belief in the effectiveness of these interventions. The objective of this study was to assess the effect belief in the effectiveness of smoking cessation interventions among male Saudi college students. METHODS: A non-experimental cross-sectional study of male students who used at least one smoking cessation program was assessed via a pre-validated Likert scale. Data was collected between December 2011 and January 2012. Descriptive and regression analyses were conducted. RESULTS: A total of 337 surveys were received (response rate of 36.6%). About 21% of the respondents were self-identified smokers. The average age of respondents was 22.6 (±2.2) years. The majority of