

# Dietitians' Experiences with Pre-consultation Questionnaires in Clinical Settings

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## Introduction

Pre-consultation questionnaires are increasingly used to gather patient information prior to consultations to improve the efficiency and quality of interactions. Obtaining a diet history is an essential component of a nutrition assessment (Figure 1). Time taken to obtain a diet history is dependent on the respondent's memory and the level of details required. Moreover, such interviewer-based method may be subjected to observer bias and the communication skills of the interviewer.

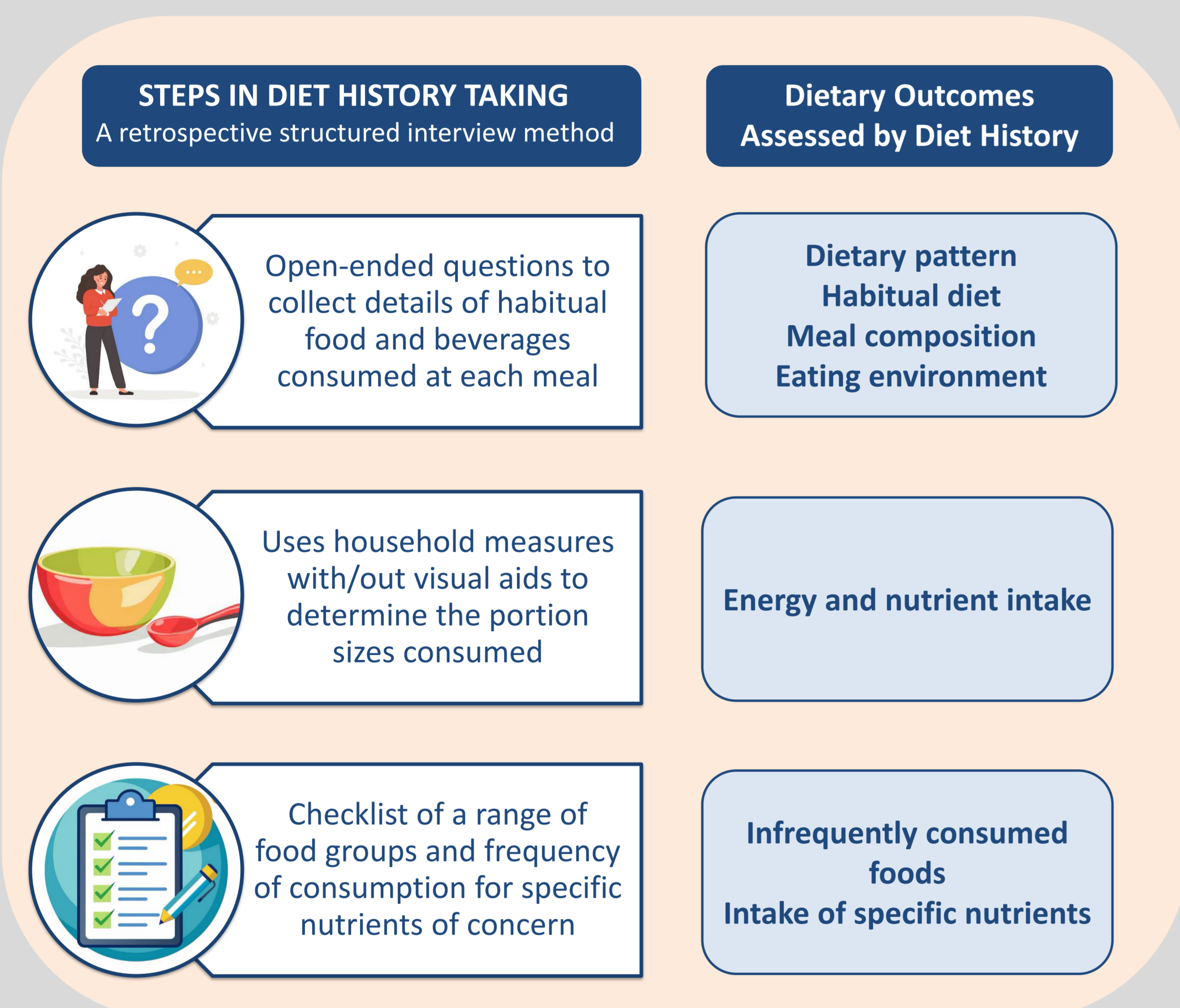


Figure 1: Steps in diet history taking and the dietary outcomes assessed

## Aim

To reduce the time taken during consultation and minimize interviewer-related bias, an online pre-consultation diet history tool was introduced in our clinic. This is a report on the dietitians' experiences with the tool.

## Method

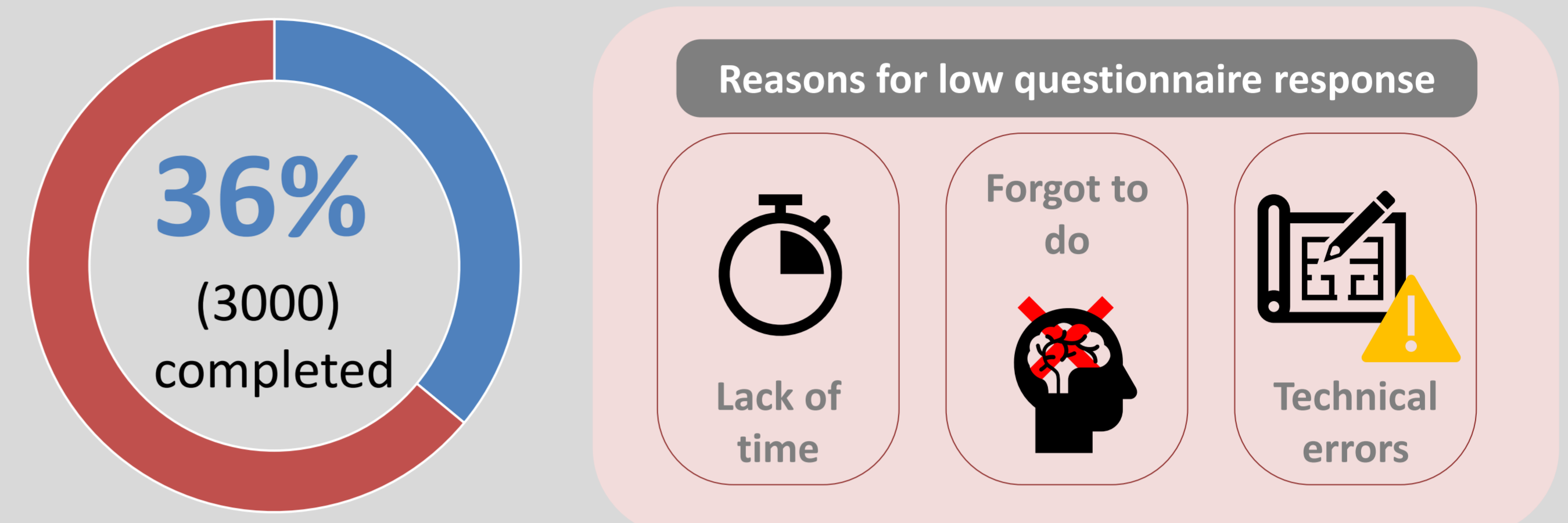
A semi-qualitative interviewer-administered survey was conducted amongst dietitians who had experienced the tool (n=11). Open-ended feedback was obtained during the interview.

Using a 5-point Likert scale, satisfaction, usefulness and importance of the tool were rated.

Quantitative data was summarized using descriptive statistics. Common themes from qualitative data were identified and reported.

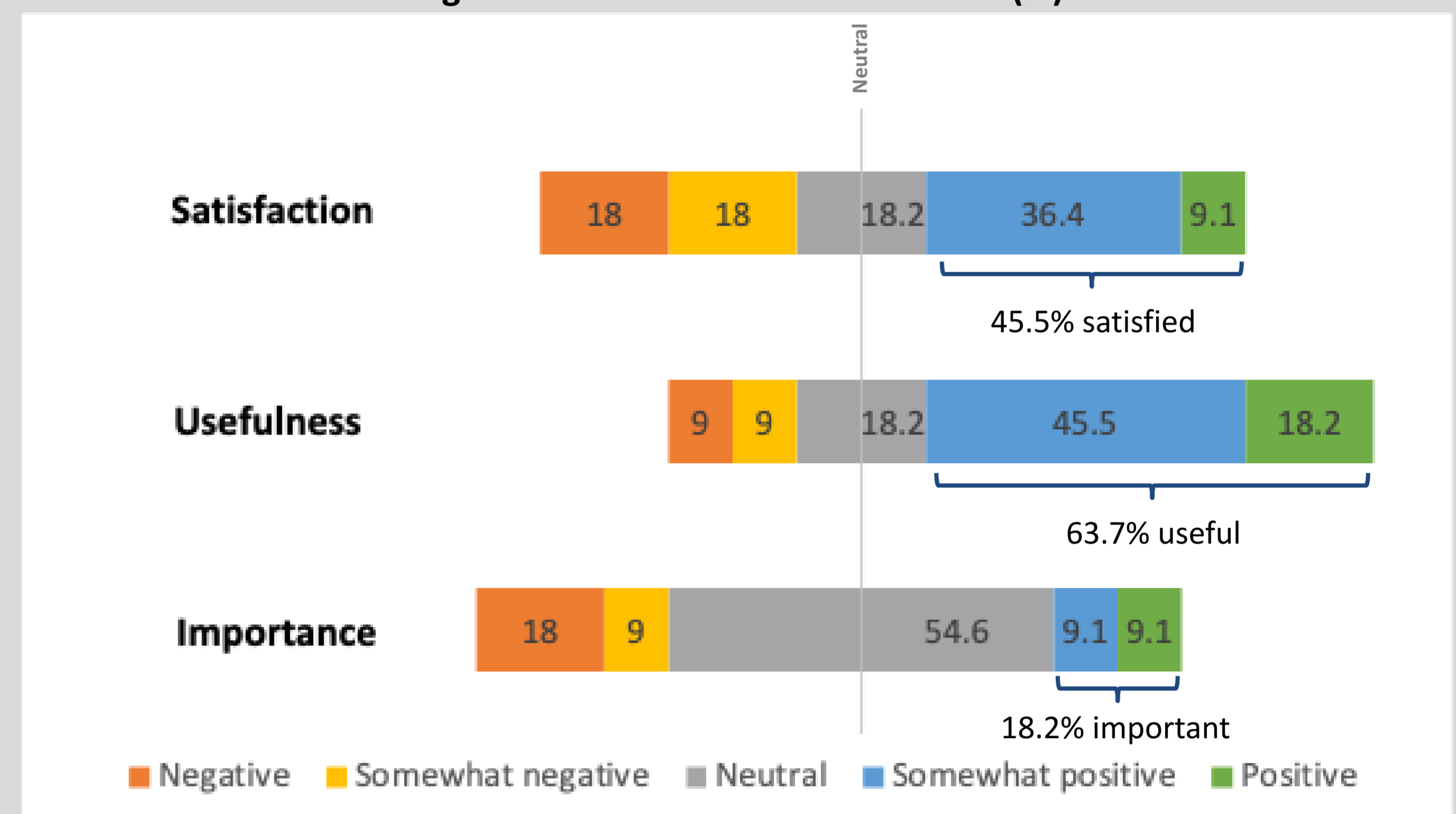
## Results

Over the 15-month trial period, 8330 questionnaires were sent.



While 64% of dietitians found the tool to be useful, less than half of them were satisfied with the tool and the majority were neutral about its importance (Figure 2).

Figure 2: Perceived value of the tool (%)



### Best aspects of the tool

- Time-savings (perceived 5-10 minutes saved per consultation)
  - Enables time to focus on nutrition education and counselling
- Facilitates pre-consultation screening and planning

### Challenges & Barriers of using the tool

- Not integrated with electronic medical record system (EMR)
  - Inconvenience and extra burden to toggle two different systems
  - Labourious effort for information transfer
- Technical slowness to log in to access the tool
- Incomplete questionnaire requires additional time to clarify information

## Conclusion

Dietitians perceived a pre-consultation diet history tool to be potentially useful to save time and reduce bias. Its utility was influenced by lack of integration into the EMR and the genericity of the questions. Further development is necessary to ensure system efficiency and tool customizability. It was suggested that an enhanced capability to generate specific condition-related dietary question, as well as timely and appropriate inbuilt prompts, may help to improve questionnaire completeness, its overall functionality and usefulness to make it a valuable tool in nutrition assessments.