

Does a Detailed Pre-Visit History Improve Patient Trust in Care?

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OVERVIEW

- Pelvic health care requires complex multidisciplinary histories spanning bladder, bowel, sexual function, and pelvic pain.
- Detailed pre-visit questionnaires can efficiently capture symptoms, uncover relevant symptoms, and better inform the clinical encounter.

Objective: Assess patient experience with a comprehensive pelvic health intake questionnaire and its association with physician trust.

METHODS

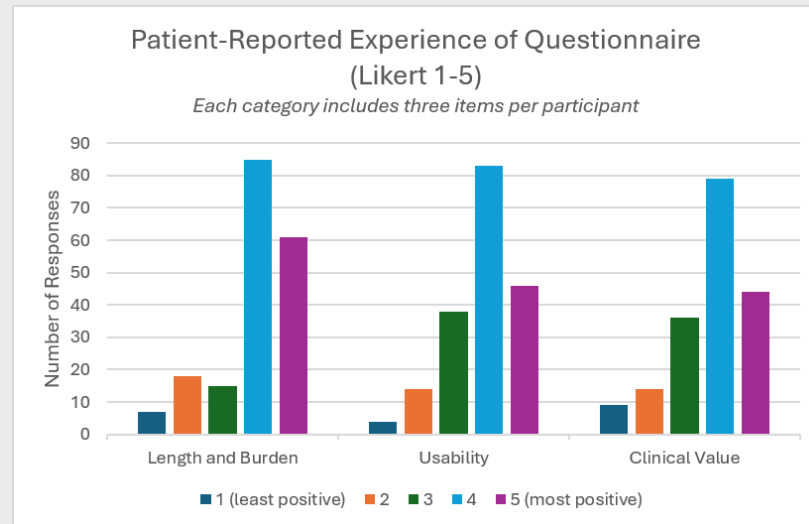
- Cross-sectional follow-up survey of subspecialty urology and multidisciplinary pelvic pain patients.
- Patients previously received a 45-min electronic pelvic health intake coded with responsive branching logic.

Follow-Up Survey Design:

- Patient experience: 3 domains (Length & Burden, Usability, and Clinical Value), each with 3 items on a 5-point Likert scale.
- Physician trust: abbreviated Wake Forest Trust in Physician Scale (WFTPS), 5 items, 5-point Likert scale.

Analysis: Pearson correlations assessed associations between questionnaire experience and physician trust; trust was compared between patients who recalled vs. did not recall completing the intake.

RESULTS



- 113 patients completed the follow-up survey; 64 (56.6%) recalled the intake questionnaire.
- 72% learned something from the questionnaire itself.

Measure	Mean ± SD	r	p
Usability	3.83 ± 0.84	0.59	<0.001
Length & Burden	3.94 ± 0.94	0.35	<0.001
Clinical Value	3.74 ± 0.99	-0.06	>0.5
Overall Questionnaire Impact	3.80 ± 0.81	0.51	<0.001

Conclusions

- Patients reported a positive overall experience with the pre-visit questionnaire.
- More positive questionnaire experience, particularly usability, was associated with greater physician trust.
- Detailed pre-visit intakes may support patient-centered care beyond history collection alone.