

Cardiothoracic Surgery—“Choosing Wisely” Recommendations

Douglas Wood, MD, UW Professor and Chief of Cardiothoracic Surgery is the newly elected [Society of Thoracic Surgeons \(STS\)](#) President. Below is a press release describing the *Choosing Wisely* campaign and its recommendations. Dr. Wood, who was an active participant in this campaign, comments on the *Choosing Wisely* recommendations.

The Society of Thoracic Surgeons (STS) released a list of specific tests and procedures that are commonly ordered, but not always necessary in cardiothoracic surgery. The list is part of the [Choosing Wisely®](#) campaign, an initiative of the [American Board of Internal Medicine \(ABIM\)](#) Foundation that identifies targeted, evidence-based recommendations that can support conversations between patients and physicians about what care is really necessary.

STS made the following five recommendations for cardiothoracic surgery:

- Patients who have no cardiac history and good functional status do not require preoperative stress testing before noncardiac thoracic surgery;
- Do not initiate routine evaluation of carotid artery disease before cardiac surgery in the absence of symptoms or other high-risk criteria;
- Do not perform a routine pre-discharge echocardiogram after cardiac valve replacement surgery;
- Patients with suspected or biopsy proven stage I non-small cell lung cancer do not require brain imaging before definitive care in the absence of neurologic symptoms; and
- Before cardiac surgery, there is no need for pulmonary function testing in the absence of respiratory symptoms.



Douglas Wood, MD

All five recommendations and the process of selecting the final list are outlined in a [Special Report in the March 2013 issue of *The Annals of Thoracic Surgery*](#).

“The STS has long been a leader in data-driven and patient-centered health care,” wrote STS President Douglas E. Wood, MD, (pictured above) Chief of the Division of Cardiothoracic Surgery and Vice-Chair of the Department of Surgery at the University of Washington and colleagues. “*Choosing Wisely* allows the STS to continue that leadership alongside like-minded specialty societies to empower the physician-patient dialogue and to avoid unnecessary procedures that may harm patients while driving up health care costs.”

By releasing the *Choosing Wisely* list, the Society hopes to challenge common practice - practice that may be imbedded in tradition, routine, or defensive medicine, but may not have good justification, according to Dr. Wood. The list is not meant to be rigid or constraining; the goal is for open communication between surgeons and patients to empower the two together to make better decisions about health care choices.

Sharing in this goal and releasing lists along with STS at a Washington, DC, press conference were 16 other organizations representing more than 350,000 physicians, nurses, pathologists, radiologists, and other health care professionals. To view the full listing, visit www.choosingwisely.org/doctor-patient-lists/

To date, more than 130 tests and procedures to question have been released as part of the *Choosing Wisely* campaign, and the specialty societies responsible for these recommendations are now undertaking considerable efforts to share them with their collective memberships of more than 725,000 physicians.

To learn more about *Choosing Wisely* and to view the complete lists, with additional detail about the recommendations and evidence supporting them, visit www.ChoosingWisely.org.