The 16-question survey contained 2 sections (eFigure; http://www.jamainternalmed.com). Section 1 assessed knowledge and perceptions about health risks and benefits from CT or cardiac SPECT. The last question of section 1 asked patients if the scan they were about to undergo exposed their body to radiation. Only if patients responded “yes” were they instructed to continue.

Methods. This prospective survey study took place at a large academic medical center. From February through December 2011, randomly selected patients presenting for nonurgent outpatient CT and cardiac SPECT scans were surveyed.

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Patient Knowledge and Understanding of Radiation From Diagnostic Imaging

There is immense excess cost associated with using brand-name drugs when equally efficacious generics are available. For unclear reasons, a large proportion of physicians are reluctant to opt for the more cost-effective choices, especially if patients request brand-name drugs. Campbell et al find that social factors appear to influence medication decisions. Such situations call for systems-level interventions to overcome the irrational cultural practices. In this case, large, closed health systems with pharmacy benefits and managed formularies use pharmacy-level decision making on drugs, once the physician has made the decision on the appropriateness of the medication. These systems also allow for physician override when appropriate. Such systems-level interventions have immense potential to increase value in prescription medication use.

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RESEARCH LETTERS

Systems-Level Interventions to Improve Value in Prescription Medication Use

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