

TO THE EDITOR:

I find the "Abstracts" section in each issue of the journal to be useful and thought provoking. I was fascinated by two items that appeared in the October issue—"Defining High-Quality Healthcare" (page 1468) and "Understanding Quality Information" (page 1474).

My perceptions of medicine's relatively recent adoption of business quality initiatives have been indelibly shaped by my previous experience as a computer systems analyst (medicine is my third career). Drawing on this dual perspective, I would argue that while outcome is important, it is an indirect variable; thus, in standard engineering quality initiatives it would be a quality *control* issue, not a quality *assurance* issue. Healthcare report card initiatives generally concentrate on indirect variables, making it very difficult for physicians to have any control of their situation.

From one trained in quality in both engineering and medicine, it would be proper to have quality assurance on things that the physician at the point of care has complete control over (ie, the interview and physical exam), yet this for some reason is rarely discussed.

While physicians are liable for failure to diagnose, diagnosis is an indirect variable with only indirect physician control at best. The physician can guarantee a level of competence with both the interview and physical exam; however, when it comes to the diagnosis, the physician can only guarantee that the diagnosis matches the information collected during interview and physical exam. Through a series of patient visits the diagnosis can become statistically more and more correct, but it can never be guaranteed.

The growing use of disease management programs, which presuppose a confirmed diagnosis and guideline-driven methods of treating a patient, raises the question of whether this approach offers the best care. It is difficult for the physician at the point of care to use hindsight-driven protocols, because the physician is "foresighting" the problem. [This has been discussed extensively on the "health-pro@netcom.com" listserv, a discussion group on the Internet about "foresighted" versus "hindsight" physician patient-evaluation methods.]

Thank you so much for your excellent reviews and great articles.

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