



## Letter to the Editor Regarding “Factors Affecting Outpatient Consultation Length among Specialists in Tabriz, Iran”

Elaheh Haghoshayie<sup>1,2</sup>, Edris Hasanpoor<sup>1\*</sup>

<sup>1</sup> Department of Healthcare Management, Research Center for Evidence-Based Health Management, Maragheh University of Medical Sciences, Maragheh, Iran

<sup>2</sup> Clinical Research Development Unit, Shahid Beheshti Hospital, Maragheh University of Medical Sciences, Maragheh, Iran

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#### \*Corresponding Author:

Edris Hasanpoor

Department of Healthcare Management, Research Center for Evidence-Based Health Management, Maragheh University of Medical Sciences, Maragheh, Iran.

#### Email:

edrihasanpoor@gmail.com

#### Tel:

+98-9375504406

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We read the paper written by Hajizadeh et al. (1) published in *Evidence Based Health Policy, Management & Economics* in 2019 and aimed to study the factors affecting outpatient consultation length among specialists in Tabriz City, Iran. Although this was a valuable investigation and its findings were very interesting, some issues should be considered. Our main concern is that the authors did not compare consultation lengths between similar studies conducted in Iran. It seems that comparing consultation lengths conducted in a similar context is valuable and has a great impact on managers, policy-makers, and users' decision-making.

Consultation length is a fundamental domain of patient-physician communication, so that its insufficiency can negatively affect the effectiveness of treatment and diagnosis process (2). Additionally, the consultation length partly indicates the consultation quality and is a critical element in medical care outcomes and patients' satisfaction (3-5). In other words, a significant part of the patient satisfaction comes from the interactional communication with the clinical staff, which is confirmed as a key element in excellent consultation (2-4, 6).

Numerous studies were conducted on consultation length in Iran, which could be included in the Hajizadeh et al. (2, 6-16) study. Hajizadeh et al. (10) concluded that the average length of outpatients' visits was 6.9 (*SD* = 2.6) minutes in Sheikh al-Raise clinic in Tabriz (1). However, a similar study conducted at the same



clinic during the same time (2015) showed that average duration of clinical consultation was 8.52 ( $SD = 3.14$ ) minutes. In Qazvin, the mean length of outpatient' visits in 2011 and 2013 were 5 ( $SD = 0.6$ ) and 4.67 ( $SD = 2.43$ ) minutes, respectively (8, 15). The finding of Khori's study indicated that the average visit time was 6.9 ( $SD = 2.6$ ) minutes in Gorgan (14). Khiavi (13) carried out a study in Ahvaz in 2015 and reported that the average visit time was 4.88 ( $SD = 0.12$ ) minutes. An interventional study (16) conducted in Qazvin in 1996 showed that the average visit time increased significantly from 4.34 ( $SD = 1.3$ ) to 5.06 ( $SD = 1.1$ ) using the participation management. According to a systematic review over the medical visit time, the mean visit time was 4.89 minutes in Iran (11). Furthermore, another systematic review investigated the consultation length and its determinants in outpatient clinics in 34 countries using 189 papers (2).

### Key words

Consultation length, Physician-patient relations, Physicians, Outpatients.

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### References

1. Hajizadeh A, Kakemam E, Khodavandi M, Khodayari-Zarnaq R. Factors Affecting Outpatient Consultation Length among Specialists in Tabriz, Iran. Evidence Based Health Policy, Management and Economics. 2019; 3(4): 276-83.
2. Hajebrahimi S, Janati A, Arab-Zozani M, Sokhanvar M, Haghgoshayie E, Siraneh Y, et al. Medical visit time and predictors in health facilities: a mega systematic review and meta-analysis. International Journal of Human Rights in Healthcare. 2019; 12(5).
3. Bahadori M, Hasanpoor E, Yaghoubi M, HaghGoshyie E. Determinants of a high-quality consultation in medical communications: a systematic review of qualitative and quantitative evidence. International Journal of Human Rights in Healthcare. 2019.
4. Bahadori M, Yaghoubi M, Haghgoshyie E, Ghasemi M, Hasanpoor E. Patients' and physicians' perspectives and experiences on the quality of medical consultations: a qualitative evidence. International Journal of Evidence-Based Healthcare. 2019. doi: 10.1097/ XEB. 0000000000000210.
5. Hasanpoor E, Bahadori M, Yaghoubi M, Haghgoshayie E, Mahboub-Ahari A. Evidence-based management as a basis for evidence-based medical consultation. BMJ Evidence-Based Medicine. 2020; 25(3): 83-4.
6. Janati A, Hasanpoor E, Aslani F, HaghGoshayie E, Hassanzadeh E. Evaluating visit quality in plan of health sector evolution in Iran: A local survey from Tabriz. International Journal of Epidemiologic Research. 2017; 4(1): 69-77.
7. Fersosi M, Raeisi A, Ganji H. Investigating the effect of quality improvement package visit from Iran Health Transformation Plan in Alzahra University Hospital , Isfahan, Iran. Health Information Management. 2016; 13(4): 292-6.
8. Hasanpoor E, Asghari JafarAbadi M, Saadati M, Sokhanvar M, Haghghoshaei E, Janati A. Provincial level survey provides evidence for remarkably short outpatient visit length in Iran. International Journal of Hospital Research. 2015; 4(2): 77-82.
9. Hasanpoor E, Delgoshaei B, Abolghasem Gh, Khoshkam M, Sokhanvar M. Surveying standard of visit time of outpatient at general hospitals: A case study in Qazvin. jhosp. 2015; 14(3): 75-81. [In Persian]
10. Hasanpoor E, HaghGoshayie E, Aslani F, Arab Zozani M. Survey on waiting time and visit time in plan of health sector evolution in Iran: A case study in Tabriz. International Journal of Epidemiologic Research. 2016; 3(3): 239-45.
11. Heydarvand S, Behzadifar M, Gorji HA, Behzadifar M, Darvishnia M, Bragazzi NL. Average medical visit time in Iran: A systematic review and meta-analysis. Medical Journal of the Islamic Republic of Iran. 2018; 32(58): 1-15.



12. Jahani MA, Fakhteh R, Fathi A, Khosravi A. Factors Affecting Average Patient Visits in Hospitals Affiliated to Mazandaran University of Medical Sciences after Implementation of Health System Development Plan. *Healthcare Management*. 2018; 9(3): 19-27. [In Persian]
13. Faraji Khiavi F, Qolipour M, Farouji DA, Mirr I. Relationship between Outpatients' Visit Time and Physicians' Prescription Quality in Teaching Hospitals of Ahvaz: 2015. *Global Journal of Health Science*. 2016; 8(11): 83.
14. Khorri V, Changizi S, Biuckians E, Keshtkar A, Alizadeh A, Mohaghheghi A, et al. Relationship between consultation length and rational prescribing of drugs in Gorgan City, Islamic Republic of Iran. *Eastern Mediterranean Health Journal*. 2012; 18(5): 480-6.
15. Mohebbifar R, Hasanpoor E, Mohseni M, Sokhanvar M, Khosravizadeh O, Isfahani HM. Outpatient waiting time in health services and teaching hospitals: a case study in Iran. *Global Journal of Health Science*. 2014; 6(1): 172.
16. Mosadegh Rad A. The role of participative management in outpatients 'waiting time, visit time and satisfaction at. *Bull Pan Am Health Org*. 1996; 30(2): 118-24.