

EP-1004**Illuminating actionable practice to improve recall of medical information in nuclear medicine department**

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Aim/Introduction: To prepare patients for nuclear medicine examinations, they are usually provided with a written information note at the time of booking, explaining how the examination is conducted and how they should prepare for it (e.g., interruption of medications). However, nuclear medicine patients are often debilitated, anxious or elderly which causes some of them to fail to understand the complex instructions they receive. This results in some patients arriving on the day of the examination unprepared and thus unable to undergo the procedure. Therefore, we aim to increase the recall of information for nuclear medicine exam preparation to improve patient compliance.

Materials and Methods: In addition to written instructions, in 2019 we introduced a telephone structured interview with the patient carried out by a trained operator of our centre able to explain step by step the preparation for PET and DaTSCAN SPECT and how they are conducted. The interview, which is performed a week before the procedure, is tailor-made and based on a structured checklist.

Results: Before introducing the interview, occasionally patients did not fully understand the written instructions given at the time of booking. If the patient was unprepared for examination, he was dismissed causing delayed diagnosis, a sense of frustration for the patient, and a negative impact on the department's productivity. Implementation of the tailor-made interview, in addition to the written information note, has enabled us to significantly reduce the number of patients who did not follow the correct exam preparation protocol, decreasing the drop-out rate from ~30% to ~2%. The second advantage is that we can intercept any potential issue (e.g., claustrophobia, acute bronchitis..) and implement strategies to counteract them without losing the quality of the examination. This allowed us to greatly improve the patient's physical and psychological compliance during procedures.

Conclusion: Our project allowed us to considerably reduce the number of patients who showed up unprepared for examinations confirming that specific information is better recalled than generally formulated information [1] and accurate knowledge improves patient compliance and satisfaction and decreases anxiety [2]. Finally, this activity contributed to improve the quality of the service provided and the productivity of the department. **References:** [1] Kessels, R. (2003). Patients' memory for medical information. *Journal of the Royal Society of Medicine*, 96(5), 219-222.[2] van der Meulen N., et al. (2008). Interventions to improve recall of medical information in cancer patients: a systematic review of the literature. *Psychooncology*, 17(9), 857-68.

EP-1005**Religion, beliefs and needs in thyroid cancer patients**

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Aim/Introduction: There is limited research specifically addressing the impact of religion and beliefs on quality of life in thyroid cancer patients. However, studies examining the influence of religion and spirituality on quality of life in cancer patients more broadly suggest that these factors can have a significant impact on patients' well-being. Patients who have strong religious or spiritual beliefs may have a greater sense of purpose, meaning, and hope, which can contribute to better mental health and a more positive outlook. **Materials and Methods:** We underwent a questionnaire based-study on 72 differentiated thyroid

cancer patients who were admitted in the nuclear medicine department for radioiodine therapy between November 2022 and February 2023. For assessing the needs, we used Spiritual Needs Questionnaire (Sp NQ) a reliable and valid questionnaire for research and clinical application and for the religious assessing tool we used the System of Belief Inventory questionnaire (SBI-15R). **Results:** 72 patients completed the questionnaires (48 female and 24 male) with a medium age of 52 years old. 58/72 pts were married, 31/72 pts employee and 31/72 pts retired, with most of them with university degree (58/72 pts). The most frequent religion declared was orthodoxy (54/72 pts) followed by catholic (6/72 pts) and other (9/72 pts). Patients reported in more than 90% that religion is a very important issue in their life, with a need for praying/meditation, giving them a strong support in coping with the oncological disease, a real need for recovering the inner spiritual health and to strengthen the relationship with their family. **Conclusion:** It's important to note that the impact of religion and beliefs on quality of life can vary depending on the individual patient and their specific circumstances. It's important for healthcare providers to recognize and respect the role that religion and beliefs can play in a patient's experience with cancer, and to provide support that is sensitive to each patient's individual needs and preferences. **References:** 1. Jim HS, Pustejovsky JE, Park CL, Danhauer SC, Sherman AC, Fitchett G, Merluzzi TV, Munoz AR, George L, Snyder MA, Salsman JM. Religion, spirituality, and physical health in cancer patients: A meta-analysis. *Cancer*. 2015 Nov 1;121(21):3760-8. doi: 10.1002/cncr.29353. Epub 2015 Aug 10. PMID: 26258868; PMCID: PMC4618080. 2. Kristeller JL, Zumbun CS, Schilling RF: 'I would if I could': how oncologists and oncology nurses address spiritual distress in cancer patients. *Psychooncology* 8 (5): 451-8, 1999 Sep-Oct.

EP-1006**Performance Evaluation of the Incorporation of PET/CT Procedures in the SUS**

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Aim/Introduction: High-complexity technologies, such as PET/CT, should have their incorporation constantly analyzed and enhanced to support their consolidation. The evaluation of the performance of these equipment commits to the understanding of subjects such as the clinical application effectiveness, the usage of these devices in the patient's real life, and the impact of this technology in the different regions where they are applied. Therefore, this work aimed to evaluate the performance incorporation PET/CT equipments and procedures by the Brazilian National Health System (SUS) according to admissibility, economic, innovation, and technical criteria, accordant to the Methodological Guideline for the Elaboration of Studies for the Evaluation of EMA (medical-assistance equipment). Furthermore, the demand for the application of this technology was also considered. **Materials and Methods:** The data collection methodology was based on an active search for information, such as the consultation of bibliographies and websites that presented data of interest, such as ANVISA, DATASUS, CNEN, and RHC. **Results:** Thirteen records of equipment from seven distinct manufacturers were identified within the validity period. Moreover, there are 110 registrations with at least one PET/CT equipment in the National Registration of Health Facilities (CNES) and 160 registrations of facilities authorized by the National Commission of Nuclear Energy (CNEN). Published by the National Health Fund (FNS), the

value proposed for such equipment in 2022 is BRL 6,405,000.00. Regarding approved financing proposals, seven are registered and distributed in the records of five facilities. The applied taxes observed are IPI, PIS, and COFINS. Per procedure, according to the SUS table records, the amount paid was BRL 2,107.22, and the total amount paid since the incorporation of the technology is BRL 348,446,738.37. **Conclusion:** The development of the work led to the perception that, although there was some difficulty in obtaining some data that permeate the PET/CT technology, the incorporation of this technology took place in a satisfactory manner. There was divergence in results such as the number of devices. This fact was due to the way in which information was made available, as many data are self-declared by interested parties. Because it is the incorporation of a high-complexity technology in full use, few studies evaluating its performance were observed. Based on Consolidation Ordinance No. 1/2017 - which adopts the recommendation of one PET/CT unit per 1.5 million inhabitants, it was found that few Brazilian states have available the number of devices to meet the needs of demand.

EP-1007

Patient experience at the heart of the implementation of a PET/MRI system in our centre

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Aim/Introduction: Our strategy, as an organization, is focused on improving the patient experience. Our hospital wants to take a step forward to incorporate the patient experience into the organization's culture. Our objective was to create a new culture at the service of the patient as a central axis in the project to set up a PET/MR system in our department, incorporating the patients' point of view (expectations and needs) to improve their experience. **Materials and Methods:** The methodology used is known as Design Thinking, which starts from an objective (a better future situation), instead of a problem to be solved. This is based on: 1.-Identify the most common patient profile, creating "person maps". 2.-Identify the Patient Journey Map from the touch points and pain points. This step involves patients and professionals. 3.-Transform the pain points into insights (answer to the question of why the pain point occurs) and from this answer, propose an improvement project. 4.-Prioritise improvement projects and develop a prototype. 5.-Discuss the prototype with a group of patients, patient relatives and professionals. 6.-Define the implementation strategy. 7.-To measure patient experience through quality indicators. Quality indicators based on patient experience are needed. The average duration of a patient experience project is estimated to be 2-3 months. This generates a report listing the projects derived from the "pain points" reported by patients, with the aim of incorporating these recommendations into the development process to improve the patient experience. This method, which incorporates small group of patients and the interview as techniques, allows to know the needs and expectations of the patients (and their caregivers). **Results:** The results were highly satisfactory with the participation of 13 patients/10 healthcare professions. 28 improvement projects were generated, with 2 projects prototyped based on patient impact and feasibility. Satisfaction surveys were conducted with the professionals involved: 78% gave an overall satisfaction score

of 9 to 10 when participating in a project, and 100% considered that patient experience should be considered in projects for the creation of new hospitals or medical services. Finally, participating patients expressed a high level of satisfaction. **Conclusion:** This project is applicable to all medical centres and institutions, taking into account the differences and characteristics of each centre. It is easy to implement and allows to know the needs and expectations of the patient, and to measure their participation in the process. Changing the culture of a healthcare organization to improve patient care requires prior collaboration with the different professionals involved.

EP-1008

Knowledge, Attitude and Practice towards the Utility of Medical Radioisotopes for Diagnosis and Therapy of Disease used in Nepal

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Aim/Introduction: In the last few years, medical use of radioisotopes has been increased dramatically in Nepal for both diagnosis and therapy of various diseases including many cancers. Radioisotopes such as Technetium-99m has been used for gamma imaging in Nepal since very long for the diagnosis of many diseases. Recently, PET imaging has been started in Nepal that uses Fluorine-18 (F-18) radioisotope for the diagnosis of many cancers at their early stage. This study was conducted to assess the knowledge, attitude and practice (KAP) among the radiation oncology and nuclear medicine personnel towards the utility of medical radioisotopes used in Nepal for the diagnosis and therapy of disease including cancers. **Materials and Methods:** This study was conducted after the approval from Institutional Review Committee (IRC) of B.P. Koirala Institute of Health Sciences (BPKIHS), Dharan, Nepal. Data were collected through the questionnaire from thirty-two radiation oncology and nuclear medicine personnel working at different cancer hospitals and nuclear medicine centers in Nepal where radioisotopes are currently being used. The questionnaire included 38 questions (11 questions for knowledge, 11 questions for attitude and 16 questions for practice) to assess the KAP of the participants. The data collected were entered in the MS excel 2013 and analyzed using statistical analysis software package SPSS 11.5. For descriptive statistics, frequency, percentage, mean and standard deviation (SD) were used along with graphical and tabular presentation. Analyses tests used in this study was independent samples t-test and the Chi-squared test. A p-value <0.05 were considered statistically significant. **Results:** Thirty-two participants (n=32) of age 22-51 years were included in this study for the interview through the questionnaire. Of the total 32 respondent, 26 (82.25%) were man and 6 (18.75%) were female. Results obtained showed that the knowledge regarding the usage of radioisotopes among the participants is inadequate. The overall knowledge among the participants found to be 40.6% only. Similarly, the attitude of the participants toward the application of medical radioisotopes was found to not satisfactory. The overall attitude of the participants was assessed to be 43.75% only. It was also found that the practice of radioisotopes among the participants are very unsatisfactory (18.75%). **Conclusion:** The overall knowledge, attitude and practices of the participants towards the utility of medical radioisotopes found to be 40.6%, 43.75% and 18.75% respectively. From this study, it can be concluded that the awareness regarding the application of medical radioisotopes should be improved.