## International Journal of Biomedical and Clinical Research

2024 Volume 1, Issue 3

DOI: 10.59657/2997-6103.brs.24.016



# Letter to Editor Open de Access

# The Art of Medical Decisiveness

## **Gurmeet Singh Sarla**

Department of Surgery, General and Laparoscopic Surgeon, Military Hospital Khadki, Pune, Maharashtra, India.

#### **Abstract**

Decision making entails selecting a single option from a set of available choices. The critical role of executives in a hospital is pivotal. Timely decision-making, independent judgment and positive results are essential for effective decision-making. There is no magic formula for analyzing data, but a multistep process can be followed to make a winning determination. While background information and circumstances can facilitate decision-making, there are times when one is left with no prior knowledge and forced to decide. In health services, there are occasions when decisions have to be taken almost instantaneously as and when one comes across the situation, and the desired or expected outcome is never inevitable.

**Keywords:** decision making; managerial skills; medical decision-making; decision making in nursing practice

#### **Dear Editor**

Decision-making is the cognitive process of selecting an action among several possible alternative options. It is an inescapable technical management function, and managers must be quick and rational decisionmakers. Medical professionals make calculated decisions which have important consequences, impacting patients on the individual level, community level, national or global level [1]. Healthcare professionals must sometimes make these choices with limited information, resources and knowledge, yet these decisions are expected to be highly calculated and accurate [1]. Decision-making is based on assumptions of values, preferences and beliefs of the decision-maker. It is a problem-solving activity which would yield an optimum result. The scope of the decision-making technique used, and the importance of those decisions differ depending on the manager's position in the organization's hierarchy, the magnitude of authority he has and the extent of responsibility he bears. Junior manager's decisionmaking involves allocating and utilizing resources, whereas senior managers make policy decisions.

A vital component of medical decision-making is evaluation. Decision-makers must concisely evaluate situations to make better choices. Medical decision-making involves formulating a diagnosis after taking a detailed history and thorough clinical examination and treatment plan based on laboratory tests and imaging reports, keeping in mind patient preferences [2]. Clinical experience and clinical findings are both vital components of medical decision-making. Experienced clinicians draw upon their mental models, while clinical findings provide concrete data

for evidence-based decisions. The ideal approach involves integrating both aspects to optimize patient care. Decision-making in the medical profession is extremely important because it involves a commitment of valuable resources, and the desired or expected outcome is never certain. Medical decisions are made under conditions of uncertainty and risk where the patient and his family feel vulnerable, confined, fearful and lonely.

Making the right choice is making the correct decision. In most cases, decision-making is based on experience. Follow-up on the decision accumulating feedback on the impact of the decision is too necessary to learn to make correct decisions. Once taken after due deliberation, decisions should be implemented so that they don't remain just a plan on paper. The most successful man is the most informed man. Information is vital to make a decision. In larger organizations, information is generated at one place and decisions are made at another place. Transmitting correct information from the site of generation of information to the site where the decision is required to be made by the fastest means plays a key role in correct decision-making.

Characteristics of Decision-Making: Decision-making and planning are deeply interlinked. Environmental complexity influences decision-making. A decision taken in a particular set of circumstances might differ in a different set of circumstances. Decision-making has a purpose and is always associated with time lag. It involves actions like defining the problem and analyzing the various alternatives before a final choice is made.

Process of Decision Making: Decision-making involves identifying the problem, defining objectives to be met while solving the problem, making a predecision, generating alternatives, evaluating alternate solutions, making choices, implementing the chosen alternative, and following up.

Types of Decisions: Personal decisions refer to the choices clinicians make based on their individual experiences, knowledge, and values and influenced by factors such as clinical expertise, intuition, and professional judgment. Routine or programmed decisions are those which are repetitive. Organizational decisions are those decisions that are taken to achieve organizational goals. Group decisions are collective decisions that a committee makes with proper representation. Strategic decisions are those decisions which have to be deliberated upon in depth. Policy decisions are those decisions that are made at a higher level. Decisions can also be classified based on the complexity of the problem and the certainty of outcome following the decision. Mechanistic decisions are routine and repetitive where the outcomes are known. In an analytical decision, one has to analyze the situation and decide. In adaptive choices, the result is often unpredictable. **Heuristics:** A heuristic is a rule that guides the search for alternatives into areas with a high probability of yielding satisfactory solutions. They are rule-of-thumb strategies that allow people to make judgments quickly. These strategies help simplify complex medical problems by using minimal relevant information, past experiences, and practical rules of thumb. Rather than aiming for perfect solutions, heuristics focus on providing workable and acceptable answers within a reasonable timeframe. The most common decisional shortcuts used in medicine are the Availability, Anchoring and Confirmatory heuristics [3].

Generating Alternatives: Generating viable options to make the correct decision is essential. Brainstorming is an important technique in stimulating creative thinking, which produces multiple ideas wherein freewheeling is welcome and criticism is prohibited. Synectics is another way of identifying alternatives in which the leader poses the problem using role-playing, analogies, paradoxes, metaphors, and other thought-provoking exercises.

Factors Affecting Decision-Making: It is essential to have adequate and accurate information about the situation for sound decision-making. Prejudice and bias can lead us to make decisions that are not effective. Cognitive constraints hamper decision-

making. Intelligence, expectations, personal habits, social and cultural norms, and time constraints influence decision-making.

Styles of Decision-Making: Individuals with a directive style tend to make decisions rapidly because they use little information and do not consider many alternatives. They rely on existing rules and aggressively use their status to achieve results. People with an analytical decision-making style tend to analyze their decisions carefully using as much data as possible. Such individuals enjoy solving problems and are willing to use innovative methods to achieve the best solution. People following the conceptual decision-making style have a humanistic and artistic approach and tend to consider many broad alternatives to solve problems creatively. Individuals with this behavioral style are highly supportive and concerned about others' achievements, frequently helping them meet their goals. They are open to suggestions from others and rely on meetings to make decisions.

### **Discussion and Conclusion**

Decision-making in acute care nursing is a complex process because nurses work in a stressful environment and may care for five or more patients in a sensitive care environment [4]. Critical care nurses can make decisions every 30 seconds [5]. Decision-making in nursing practice is influenced by experience, intuition, the context of the decisionmaking situation, knowing the patient, interpretation and reflection [4]. The complexity of decision-making for nurses continues to increase with the increase in patient acuity and technological advances [6]. Nurses use intuitive or analytical approaches in decisionmaking [7]. Clinical decision-making refers to the ability of a Physician to make informed choices based on available knowledge and data. In straightforward cases, they rely on pattern recognition, whilst in complex situations, Physicians apply principles of evidence-based medicine, clinical guidelines, and diagnostic tests to arrive at a diagnosis. Physicians need to balance the need for thorough evaluation against limited resources and costly lab and imaging tests. Physicians adopt clinical decision-making, which is a dynamic process involving expertise, evidence, and patient-centered care.

The three models available are shared decision-making, paternalism and consumerism [8]. Shared decision-making involves patients in decision-making as patients have a right to be involved in decisions

concerning their health and well-being [9]. Kaplan et al., in their study, showed that increased involvement by patients in their health care can lead to improved adherence to management plans and improved health outcomes [10]. Murray et al., in their study, have shown that 73% of Physicians stated that they shared the decision-making with their patients following shared decision making, 15% said they decided on behalf of the patient following the paternalism approach, and 12% left the decision-making to the patient or the patient's family adopting consumerism approach [8].

In conclusion, medical decision-making is regarded as the cognitive process resulting in selecting an action among several possible alternative options. Decisionmaking is an essential function performed by managers and is based on assumptions of values, preferences and beliefs of the decision-maker. It involves actions like defining the problem and analyzing the various alternatives before a final choice is made. A vital component of medical decisionmaking is evaluation. Decision-making in nursing practice is influenced by experience, intuition, the context of the decision-making situation, knowing the patient, interpretation and reflection. Decisionmaking in the medical profession is made under conditions of uncertainty and involves a commitment of valuable resources, and the desired or expected outcome is never certain. Nurses use intuitive or analytical approaches, whereas shared decisionmaking is adopted in medical practice. In summary, medical decision-making is a dynamic process that integrates medical expertise, patient preferences and the context of each case. It reflects the commitment the best possible care while to providing acknowledging the inherent uncertainties medicine.

# **Declarations**

# **Ethics Committee Approval**

Ethics committee approval is not required for Letter Writing to the Editor.

#### **Conflict of Interest**

No conflict of interest was declared by the author.

#### **Author Contributions**

Concept-GSS; Materials-GSS; Data Collection and/or Processing-GSS; Analysis and/or Interpretation-GSS; Writing-GSS; Supervision-GSS.

### References

- 1. Masic I. (2022). Medical Decision Making-an Overview. Acta Inform Med. 30(3):230-235.
- 2. Whang W. (2013). Medical Decision-Making. In: Gellman MD, Turner JR. (eds) *Encyclopedia of Behavioral Medicine*. Springer, New York.
- 3. Whelehan DF, Conlon KC, Ridgway PF. (2020). Medicine and Heuristics: Cognitive Biases and Medical Decision-Making. *Ir J Med Sci.* 189(4):1477-1484.
- 4. Tanner CA. (2006). Thinking Like a Nurse: A Research-Based Model of Clinical Judgment in Nursing. *Journal of Nursing Education*. 45(6):204-211.
- 5. Bucknall T. (2000). Critical Care Nurses' Decision-Making Activities in the Natural Clinical Setting. *Journal of Clinical Nursing*. 9(1):25-35.
- 6. Simmons B, Lanuza D, Fonteyn M, Hicks F, Holm K. (2003). Clinical Reasoning in Experienced Nurses Including Commentary by Heims ML With Author Response. Western Jour of Nursing Research. 25(6):701-724.
- 7. Nibbelink CW, Brewer BB. (2018). Decision-Making in Nursing Practice: An Integrative Literature Review. *J Clin Nurs*. 27(5-6):917-928.
- 8. Murray E, Pollack L, White M, et al. (2007). Clinical Decision-Making: Physicians' Preferences and Experiences. BMC Fam Pract.
- 9. Lo B. (2000). Resolving ethical dilemmas: A Guide for Clinicians. *Philadelphia*, *Lippincott Williams and Wilkins*
- Kaplan SH, Gandek B, Greenfield S, Rogers W, Ware JE. (1995). Patient And Visit Characteristics Related to Physicians' Participatory Decision-Making Style. Results From the Medical Outcomes Study. 33:1176-1187.

**Cite this article:** Gurmeet Singh Sarla. (2024). The Art of Medical Decisiveness, *International Journal of Biomedical and Clinical Research*, BioRes Scientia Publishers. 1(3):1-3. DOI: 10.59657/2997-6103.brs.24.016

**Copyright:** © 2024 Gurmeet Singh Sarla, this is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Article History: Received: June 28, 2024 | Accepted: July 19, 2024 | Published: July 27, 2024