Choosing Wisely: Neurology Update

March 2, 2018

Choosing Wisely Canada | Choosing Wisely U.S. | Choosing Wisely Australia | Choosing Wisely U.K.

In 2012 Choosing Wisely was launched in the United States with the goal of advancing dialogue on avoiding wasteful or unnecessary medical tests, treatments, and procedures. Modeled after this campaign, and organized by a team of leading Canadian physicians, Choosing Wisely Canada (CWC) aims to help clinicians and patients engage in conversations about unnecessary tests and treatments, and make smart and effective choices to ensure high-quality care.

Choosing Wisely for Providers:

Choosing Wisely Canada, Family Medicine: Thirteen things physicians and patients should question.

Asthma

Choosing Wisely Canada, Respiratory Medicine: Six things physicians and patients could question.

#5, Don’t initiate medications for asthma in patients ≥6 years old who have not had confirmation of reversible airflow limitation with spirometry, and in its absence, a positive methacholine or exercise challenge test, or sufficient peak expiratory flow variability.

#6, Don’t use antibiotics for acute asthma exacerbations without clear signs of bacterial infection.

Choosing Wisely Canada, Internal Medicine: Eleven things physicians and patients should question.

#11, Don’t initiate long-term maintenance treatments in adult patients with suspected COPD/asthma without confirming a diagnosis with objective testing such as spirometry/methacholine challenge.

Anaphylaxis

Choosing Wisely Canada, Paediatrics: Five things physicians and patients should question.

#12, Don’t perform screening panels (IgE tests) for food allergies without previous consideration of the pertinent medical history.

Choosing Wisely for Patients

Broken Bones

Choosing Wisely Canada. Bone density tests: when you need them and why you don’t.

Choosing Wisely Canada. Vitamin D tests: when you need them and when you don’t.