

GRiST coding scheme and rules for NIH-ESRC stage 2 patient-doctor consultations

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May 13, 2013

1 Rules for setting up the patient and completing the consultation

1. Login to egrist.org.
2. Go to the nih-esrc group and click on the logo.
3. You will now be at the patient management page and can start a new “consultation”.
4. When starting a new patient consultation:
 - (a) Select the Add Patient button.
 - (b) Put the nine digit number assigned to them in the patient id followed by a hyphen and either 1 or 2 depending on which consultation it is. e.g. 123456789-1; 123456789-2.
 - (c) Put the nine digit number assigned to them in the Patient Forename. e.g. 123456789
 - (d) Put the number of the consultation (1 or 2) in the Patient Surname. e.g. 2
 - (e) *Note* The duplication of the numbers is to make it easier for me to extract the right consultations for participants and because you can’t have two consultations with the same id.
5. **Crucial rule** When you have finished coding, **do not** select the “finish” button, **just use “suspend”**.
 - (a) If you want to add or change anything later, you can just “resume” the assessment.
 - (b) If you had pressed the “finish” button, you would have had to start a new assessment and half the data is not carried across.

2 Rules for coding metadata (to do with the study, not the GRiST record of the transcript)

1. Every comment or management box entry must be preceded by the clip number: R1:, N4:, D6: etc
 - (a) R, N, D for receptionist, nurse, doctor.
 - (b) Number for the number of the clip
 - (c) Put a colon after each code.
2. Statements about the **patient** go into the **comments box**.

3. Statements about **other people** (doctor, family, etc) go in the **management box**.
4. Demographics will let you record all the participant details you need. For all of them, select the “who I am” node of the mind map.
 - (a) Age will need to be put in the “date of birth” box as the year only, using all four digits. e.g. 1976
 - (b) Recording information about the doctor’s gender and ethnicity will be in the **management boxes** for each one as follows:
 - i. Write Y for concordant or N if not concordant with the patient.
 - ii. We will then know that this means the same/different gender/ethnicity.
5. Doctor’s communication style
 - (a) Select the relationships node of the mind map
 - (b) Put HPC or LPC (high/low patient centered) in the **management box**, for the question “To what extent do you have people you can confide in and who care about you?”.
6. To provide information about family history of depression/mental illness:
 - (a) Select the “serious mental illness” node of the mind map.
 - (b) Put Y or N in the **management box** of “Do you have any history of serious mental-health problems (past or present)?” for mental illness in general.
7. The patient’s presenting complaint details go in the **comment box** of depression:
 - (a) Select the mind map node for depression
 - (b) In the **comment box** for “Do you have any experience of depression (past or present)?”, use the following codes followed by a colon, before any qualifying comment you might also want to add:
 - i. B: Bereavement
 - ii. S: Separation from loved ones
 - iii. PIll: Physical illness
 - iv. PInj: Physical injury
 - v. F: Financial problems
 - vi. M: Mental illness
 - vii. W: Work/study stress
 - viii. N: Non-specific
8. Question to the patient about would you like to see the same or a different doctor?
 - (a) Select the “treatment or medication” mind map node
 - (b) Put “same” or “different” in the **comment box** for the service support question “To what extent do you feel that your health, social care, or community services are helping you effectively?”
9. Question to the patient about preferring medication or therapy:

- (a) select the “treatment or medication” mind map node
- (b) Put “medication” or “therapy” in the **comment box** of the benefit from treatment question: “To what extent do you think your prescribed medication or treatment is working properly?”

10. Question to the patient about sticking with the medication/therapy:

- (a) select the “treatment or medication” mind map node
- (b) Use the rating scale for the question about following health professionals’ advice: “To what extent do you take medication or treatments as prescribed or advised by health professionals?”

3 Using GRiST to code the transcripts

Basically, you do a GRiST assessment on the patient in the normal way that a clinician would, or you would do on yourself if using myGRiST. If there are additional bits of information you want to add to the quantitative questions, put them in the comment boxes. However, if there seems to be a number of issues that frequently come up for the transcripts in a particular part of GRiST, we can create a new subtree for these codes. This will make it easier both to code and analyse the data subsequently.

Any decisions to add a subtree needs to be taken by the coding group of researchers, because it is effectively augmenting the coding scheme. It also means you will need to go back to the previous patients and recode their comment boxes into the subtree. You can easily see whether this is the case for a patient by selecting the report and checking what was put in the comment box.