**Title**

Association of general practice registrars’ responses to clinical uncertainty with in-consultation assistance-seeking: a cross-sectional analysis.

**Author and affiliations**

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**Background**

Uncertainty is inevitable in general practice. It is proposed to be associated with clinician stress and burnout, inappropriate clinical decision-making, and increased health costs. Registrars’ responses to clinical uncertainty are acknowledged issues in GP training. Clinical uncertainty could plausibly influence registrars’ seeking of information or assistance, including from their clinical supervisors, during patient consultations. Registrars finding answers to clinical questions during consultations is a vital aspect of their care of patients and important for patient safety. It is also a rich source of registrar learning. But it has implications for supervisor workload.

**Aims**

We sought to establish the association of registrar responses to uncertainty with GP registrars’ in-consultation information-, advice- and assistance-seeking.

**Method**

A cross-sectional analysis of data from the Registrar Clinical Encounters in Training (ReCEnT) cohort study. Outcome factors in logistic regression models were whether the registrar sought in-consultation information or assistance from a) their supervisor; or b) an electronic or paper-based source. Independent variables were the four independent subscales of the Physicians’ Reaction to Uncertainty (PRU) instrument plus registrar, practice and consultation variables.

**Results**

589 registrars contributed details of 70,412 individual consultations.

On multivariable analysis, registrars’ scores on the two ‘affective’ PRU subscales ‘Anxiety regarding diagnosis/management’ (OR 1.03; 95%CIs [1.01, 1.05], p=0.003) and ‘Concern about a bad outcome’ (OR 1.03; 95%CIs [1.01, 1.06], p=0.008) were significantly associated with seeking supervisor advice or assistance. There was no association with the other two PRU sub-scales, ‘Reluctance to disclose uncertainty to patients’ and ‘Reluctance to disclose mistakes to physicians’.

None of the four PRU subscales were significantly associated with seeking information from electronic or hard-copy sources.

**Conclusion**

GP registrars’ ‘affective’ responses to uncertainty are associated with assistance-seeking from clinical supervisors. In-consultation assistance-seeking may attenuate clinical uncertainty and promote registrars’ tolerance of uncertainty, but may also contribute to supervisor workload.