

JUDGMENT / DECISION MAKING

1986 SUBSCRIPTION FEES ARE DUE. . .

Subscription fees for 1986 are now due. Although the cost of mailing went up on January 1st, we shall be able to hold the rates constant for the year. Since we have gone to an annual subscription fee, everyone's fee is now payable. (If your address label is marked "P", then you have already paid for 1986.) We would appreciate payment as soon as possible using the form on Page 13.

VOTE SET FOR J/DM SOCIETY. . .

The Executive Committee has completed drafting a set of bylaws for the creation of a formal organization. By the first of March all paid subscribers should receive a copy of the bylaws for ratification. Those eligible to vote are current J/DM Newsletter subscribers, who by voting, will become charter members should the bylaws be adopted. This is another good reason for paying your subscription soon -- so that you will have a voice in the formation of a new organization concerned with research in judgment and decision making.

MORE ON J/DM ELECTRONIC MAIL. . .

The response to the call for electronic mail addresses in the December issue of the J/DM Newsletter was gratifying. Several J/DMer's contacted the editor directly via BITNET. (His username and node may be found on Page 2). Dozens of your J/DM colleagues can be reached via BITNET. BITNET is an academic computer network which includes over 1000 computers -- some as far away as Europe and Japan. The BITNET network also includes other networks -- NETNORTH in Canada, EARN (European Academic Research Network). If a site is not in BITNET, there is a good chance that it can be reached through a gateway between BITNET and another of the major computer networks such as ARPANET, CSNET, UUCP, CCNET, and MAILNET. Contact your local computing center for information on local access.

If you have access to BITNET, you may send electronic mail, transfer files, and even send interactive messages. Because so many J/DMer's are already on the system, it should be a valuable resource for all of us. In the next J/DM directory we shall include BITNET (or related) usernames, nodes, and addresses.

Although we asked for SOURCE and COMPUSERVE Id's in the December issue, relatively few J/DMer's seem to be subscribers, so it may not be practical at the present time to pursue those networks for J/DM work. However, if some J/DMer's are interested, please let the editor know.

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J/DM
NEWSLETTER

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Number 1

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DEADLINE FOR SUBMISSIONS FOR THE NEXT J/DM NEWSLETTER: MARCH 20, 1986

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FROM THE EDITOR. . .

The J/DM Newsletter welcomes submissions from individuals and groups. However, we do not publish substantive papers. Book reviews will be published. If you are interested in reviewing books and related materials, please write to the editor.

There are few ground rules for submissions. In order to make the cost of the J/DM Newsletter as low as possible, please submit camera-ready copy. This means that the copy should be typed single-spaced on white 8 1/2 by 11 paper. Please leave good margins -- 1 inch at the sides and bottom and 2 inches at the top. If possible, use a carbon or film ribbon. Please mail flat -- do not fold.

Subscriptions: The current rate for the J/DM Newsletter is \$5.00/year. Subscriptions are available on a calendar year basis only.

Checks should be made payable to the Indiana University Foundation. Please send your subscription to the editor.

Foreign Subscriptions: The cost of foreign subscriptions is necessarily higher than domestic subscriptions. ~~Copies will be sent airmail to foreign addresses for \$7.00 (U. S.)~~ per year if drawn on a U. S. bank. (If payable in U. S. dollars, but not drawn on a U. S. bank, the cost is \$25.00 per year. Note that many foreign banks have accounts with a U. S. bank and draw checks on that account.)

Address Correction: Please check your mailing label carefully. Because the J/DM Newsletter is sent by bulk mail, copies with incorrect addresses or otherwise undeliverable are neither forwarded nor returned. Therefore we have no way of knowing if copies are delivered. Any changes or corrections in addresses should be reported to Gary McClelland. (Address changes may also be sent to the editor with subscription payments.)

Mailing Labels: Some readers may wish to send reprint lists or other material to people listed in the directory. Gary McClelland has agreed to provide sets of mailing labels for \$5.00 to individuals employed by non-profit institutions.

Electronic Mail: The editor may be reached through BITNET at "CASTELLAN@IUBACS". [Some users may find it either necessary (or more convenient) to address the editor using only the first 8 characters (CASTELLA).] BITNET addresses also can be reached from most of the university and research networks. I check for mail several times a day, and a prompt reply to electronic messages is assured.

RISK ASSESSMENT. . .

Ellen Goodman

AT LARGE. . .

BOSTON—The images are all around us. Some of them are bewildering, others bemusing. But they are scenes from the risky business of everyday living.

In California, a family cuts back on sugar in the decaffeinated coffee they drink in their house—on the San Andreas fault. In Pennsylvania, a man goes jogging—against the backdrop of Three Mile Island nuclear reactor. In Maine, a woman rides to aerobics class—on her motorbike without a helmet.

A friend of yours, mine, ours, decides that, after the recent crop of air crashes, he will fly only in emergencies. He explains this earnestly, while chain-smoking cigarettes. Another friend drinks only bottled water these days, eats only meat untouched by steroids, and spends weekends hang-gliding.

In some peculiar way, each of us assesses risks with a different calculator and determines his or her own personal safety. As private citizens we all live now as if we were working for some vast national life-insurance company. Day by day, issue by issue, bulletin by bulletin we rewrite our own Preferred Risk policy.

The most recent and most emotional scenes of public risk-assessing happen now on the front lines of the AIDS story. Watching the parents demonstrating against one school and then another for allowing AIDS victim into their child's building, I couldn't help wondering how many packed up their picket signs in the back seat, their children in front and drove away without buckling the seat belts.

How do any of us make assessments? What part is reason? What part is fear? What part do statistics play? What part emotions?

The AIDS story is a ripe way to look at how we handle and mishandle risk. It is a case study of sorts, if that is not too cool a phrase for such a terrible disease. It's a tale about experts and the public, about the gap between our skepticism and our longing for certainty.

Not that long ago, when Edmund Muskie was looking for facts about the relationship between pollution and health, he asked for a "one-armed" scientist who didn't always say, "On the one hand this, on the other hand that." Last week in New York, parents grilled doctors for absolute promises that their children could not "catch" AIDS by, for example, being bitten. Instead, they got qualifications: "I consider it unlikely." In dealing with the experts, the public wants guarantees and is offered odds.

There are two cultures at work in risk-assessment, and more sensibilities. As an article in October's Science '85 magazine points out, there are times when the public pays scant attention to major risks and times when even a small risk is too big to be accepted. Our attitudes are much more complicated than the numbers.

Last year, for example, 45,000 Americans died in car accidents, half of whom would be alive if they'd worn seat belts. On the other hand, not a single medical person caring for AIDS patients has come down with the disease. Yet the fear of holding the hand of a person with AIDS may far outweigh the fear of driving.

Continued on Page 4

GOODMAN AT LARGE (cont). . .

As the Science '85 writer explains, "We may be much more willing to accept higher risks in activities over which we have control, such as smoking, drinking, driving or skiing, than things over which we have little control, such as industrial pollution, food additives, and commercial airlines." Or surely, AIDS.

In dealing with public attitudes, we can't discount dread from the risk equation. Certainly not in talking of AIDs. The odds of an AIDS cataclysm on the scale of medieval plagues may be small, but we always weigh heavily the smallest chance of any massive disaster. It is dread that tips the scales of statistical logic.

None of us knows yet where the argument about the dangers of AIDS will lead. There is a part of us that remains open to information. We do quit smoking or try to; we do pass mandatory seat belt laws. In the latest Harris survey, less than one-third of us still believe that AIDS can be caught by casual contact.

Our anxiety may indeed follow statistics, the path of the disease, up or down. But I have the sense that there will be chilling arguments ahead of us. This is, after all, a country that bans saccharin and builds nuclear bombs. We argue and will go on arguing about risk in two different languages: numbers and emotions, odds and anxieties.

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REGARDING MEDICAL DECISION MAKING. . .

Recent Developments in the Psychology of Judgment and Decision Making, and Recent Developments in Medical Decision-Making have been reprinted from MEDICAL DECISION MAKING with the permission of Birkhauser Boston, Inc.

*** NOTICE: In January, 1986, MDM will be undergoing two changes. Lee B. Lusted, MD, Editor-in-Chief since the journal's inception in 1980, will be stepping down. Dennis G. Fryback, PhD, has been appointed Dr. Lusted's successor as Editor-in-Chief. The publisher, beginning with Vol. 6 in January, 1986, will be Hanley & Belfus, Inc., of Philadelphia, PA.

MEDICAL DECISION MAKING is an international journal of The Society For Medical Decision Making (SMDM). MDM is devoted to the analysis of decision making as it applies to clinical practice, to the establishment of health care policies, and to the administration of health care programs. Contributions on application, methodology, education, and decision support in any of these areas are welcome.

SMDM annual membership dues of US \$60.00 include a journal subscription. Individual subscriptions are also available for US \$60.00. For libraries, non-SMDM members, etc., the annual subscription rate is US \$78.00.

For information concerning SMDM membership or journal subscriptions, please write to Dennis G. Fryback, PhD, Editor-in-Chief, Medical Decision Making, University of Wisconsin, 1513 University Avenue, Madison, WI 53706, USA.

RECENT DEVELOPMENTS IN MEDICAL DECISION MAKING

Journal Articles

ASHWORTH CD, WILLIAMSON P, MONTANO D: A scale to measure physician beliefs about psychosocial aspects of patient care. *Soc Sci Med* 19:1235-1238, 1984. Describes and validates a measure to assess physicians' psychosocial beliefs.

BECKMAN HB, FRANKEL RM: The effect of physician behavior on the collection of data. *Ann Intern Med* 101:692-696, 1984. Observes that physicians actively regulate the quantity of information elicited at the beginning of the clinical encounter, usually resulting in the premature interruption of patients.

BENBASSAT J: Common errors in the statement of the present illness. *Med Educ* 18:417-422, 1984. Reports that the main difficulty students had in recording a case history was in the identification and description of the patient's complaints.

BENBASSAT J, BACHAR-BASSAN E: A comparison of initial diagnostic hypotheses of medical students and internists. *J Med Educ* 59:951-956, 1984. Reports that students are deficient in their ability to consider diagnostic hypotheses in terms of probabilities.

BENJAMIN-BAUMAN J, REISS ML, BAILEY JS: Increasing appointment keeping by reducing the call-appointment interval. *J Appl Behav Anal* 17:295-301, 1984. Reports that shortening the call-appointment interval reduces the number of unkept appointments.

BERNER ES: Paradigms and problem-solving. A literature review. *J Med Educ* 59:625-633, 1984. Proposes a scientific paradigm emphasizing multiple types of problems with varied solution strategies.

BLACKMAN JA, HUNTLEY JS: The pediatrician's guide to computer video-discs. *Pediatrics* 74:543-547, 1984. Discusses possible medical applications of videodisc technology.

000 CHRISTENSEN-SZALANSKI

BLOOM JR, SPIEGEL D: The relationship of two dimensions of social support to the psychological well-being and social functioning of women with advanced breast cancer. *Soc Sci Med* 19:831-837, 1984. Explains the erosion of social support during a life-threatening illness as a result of the limitations imposed by the illness on one's opportunities for social exchange.

BORDAGE G, ZACKS R: The structure of medical knowledge in the memories of medical students and general practitioners. Categories and prototypes. *Med Educ* 18:406-416, 1984. Examines the manner in which medical knowledge is organized in the clinician's memory.

BOYLE MH, TORRANCE GW: Developing multiattribute health indexes. *Med Care* 22:1045-1057, 1984. Reviews the procedures for developing a multiattribute health index for use in population health studies and program evaluations.

CAGEORGE SM, ROOS LL JR: When surgical rates change. Workload and turnover in Manitoba, 1974-1978. *Med Care* 22:890-900, 1984. Suggests that a pattern of increased specialization has been emerging in which surgeons' surgical workloads were growing while those of general practitioners were declining.

CALNAN M: The health belief model and participation in programmes for the early detection of breast cancer. A comparative analysis. *Soc Sci Med* 19:823-830, 1984. Reports that different dimensions of the health belief model are among the best predictors of attendance at different programs but that the overall variance explained by the model was small.

CALNAN M, MOSS S: The health belief model and compliance with education given at a class in breast self-examination. *J Health Soc Behav* 25:198-210, 1984. Reports that different dimensions of the health belief model are among the best predictors of attendance at the program but that the overall variance explained by the model was small.

CHASSE JD, LESOURD DA: Rational decisions and occupational health. A critical view. *Int J Health Serv* 14:433-445, 1984. Critically examines the tendency to predict worker behavior on the basis of rational decision models; argues that this method can produce "dangerous hypotheses."

CHEN M-S, TATSUOKA M: The relationship between American women's preventive dental behavior and dental health beliefs. *Soc Sci Med* 19:971-978, 1984. Reports that women's success or failure to engage in preventive dental behavior was related to their health beliefs.

CICCONE DS, GRZESIAK RC: Cognitive dimensions of chronic pain. *Soc Sci Med* 19:1339-1345, 1984. Proposes that all behavioral interventions exert an influence on chronic pain through a common mechanism by changing the way people think about their pain.

CLEARY PD, JETTE AM: The validity of self-reported physician utilization measures. *Med Care* 22:796-803, 1984. Identifies relatively small reporting error but suggests that this error can have a substantial impact on prediction models.

CLEVERLEY WO, NUTT, PC: The decision process used for hospital bond rating—and its implications. *Health Serv Res* 19:615-637, 1984. Reports that the criteria used to rate hospital bonds provides strong financial incentives for increases in hospital size and complexity and penalizes those hospitals that rely on extensive amounts of public financing.

COX K: Decision making in professional associations. *Soc Sci Med* 19:1159-1165, 1984. Describes a procedure which enables professional bodies to engage a large sample of their constituency in extensive planning exercises.

DANS PE, CHARACHE P, FAHEY M, OTTER SE: Management of pneumonia in the prospective payment era. A need for more clinician and support service interaction. *Arch Intern Med* 144:1392-1397, 1984. Compares the diagnostic and therapeutic management of pneumonia during 1970 and 1980.

DEYO RA, INUI TS: Toward clinical applications of health status measures. Sensitivity of scales to clinically important changes. *Health Serv Res* 19:275-289, 1984. Reports that several instruments that measure health status were relatively insensitive to clinically discernible changes in individual patients.

DUBBERT PM, JOHNSON WG, SCHLUNDT DG, MONTAGUE NW: The influence of caloric information on cafeteria food choices. *J Appl Behav Anal* 17:85-92, 1984. Reports that caloric labeling of foods did not reduce the total caloric content of foods consumed by individuals.

EPSTEIN AM, READ JL, WINICKOFF R: Physician beliefs, attitudes, and prescribing behavior for anti-inflammatory drugs. *Am J Med* 77:313-318, 1984. Observes no correlation of prescribing behavior with beliefs about costs, response rates, or side-effect rates; identifies a correlation of prescribing behavior with attitudes regarding the importance of costs and placebo effects.

EPSTEIN AM, TAYLOR WC, SEAGE GR III: Effects of patients' socioeconomic status and physicians' training and practice on patient-doctor communication. *Am J Med* 78:101-106, 1985. Suggests that there is a risk of less effective communication between patients of lower socioeconomic status and their physicians, and that physicians may be unaware that less effective communication is occurring.

EVASHWICK C, ROWE G, DIEHR P, BRANCH L: Factors explaining the use of health care services by the elderly. *Health Serv Res* 19:357-382, 1984.

Examines the ability of the Anderson model to prospectively predict utilization of health services by elderly people; reports that the "need" construct was the best predictor of use of various medical services, while "pre-disposing" factors were the best predictors of use of dental services.

FLEMING GV, GIACHELLO AL, ANDERSEN RM, ANDRADE P: Self-care. Substitute, supplement, or stimulus for formal medical care services? *Med Care* 22:950-966, 1984. Reports that self-care activities may be substitutes for, rather than supplements or stimuli to, health services utilization.

GAUMER GL: Regulating health professionals. A review of the empirical literature. *Milbank Mem Fund Q* 62:380-416, 1984. Examines the ability of different systems for regulating health professionals to contain health care costs.

GJORUP T, SAURBREY N, HERMANN N: Clinical estimation of the duration of pregnancy in legal abortion. Are doctors biased by their knowledge of the duration of amenorrhoea? *Methods Inf Med* 23:96-98, 1984. Reports that physicians are influenced by their knowledge of the duration of the amenorrhoea when making their clinical estimate of the duration of pregnancy.

GLASWZIOU P, VERMEIR D: Information analysis for medical expert systems. *Methods Inf Med* 23:126-134, 1984. Shows how a linguistically oriented information analysis can be used for history taking, knowledge acquisition, and diagnosis.

GLEICHER N: Cesarean section rates in the United States. The short-term failure of the national consensus development conference in 1980. *JAMA* 252:3273-3276, 1984. Reports that cesarean section rates are continuing to increase in the United States; suggests that a more efficient peer review process, involving individual physicians and institutions, is needed to reduce the excessively high cesarean section rates.

GOTTINGER HW: Computers in medical care. A review. *Methods Inf Med* 23:63-74, 1984. Provides an overview of major developments on the impact of computers in medical and hospital care over the last 25 years.

GREEN LW: Modifying and developing health behavior. *Annu Rev Public Health* 5:215-236, 1984. Examines recent behavioral science applications used to modify or develop health behavior.

GREENE BF, ROUSE M, GREEN RB, CLAY C: Behavior analysis in consumer affairs. Retail and consumer response to publicizing food price information. *J Appl Behav Anal* 17:3-21, 1984. Reports that shoppers used comparative food price information as a method to reduce the cost of their food purchases and as a basis for store selection.

HERMAN JM: Patients' willingness to take risks in the management of pharyngitis. *J Fam Pract* 19:767-772, 1984. Concludes that some patients with pharyngitis would prefer early antibiotic treatment for the chance of earlier recovery over waiting for throat culture results despite the risk of a penicillin reaction.

HESZEN-KLEMENS I, LABINSKA E: Doctor-patient interaction. Patients' health behavior and effects of treatment. *Soc Sci Med* 19:9-18, 1984. Reports on the effect of doctor-patient interactions on patients' compliance with doctors' instructions, and with patients' decision to undertake additional activities in order to get well.

HOLLANDER RD: Changes in the concept of informed consent in medical encounters. *J Med Educ* 59:783-788, 1984. Examines some difficulties that exist in philosophical justifications for the requirement of informed consent.

HOLZMAN GB, RAVITCH MM, METHENY W, ET AL: Physicians' judgements about estrogen replacement therapy for menopausal women. *Obstet Gynecol* 63:303-311, 1984. Observes that physicians responses to case histories were not consistent with their stated beliefs about estrogen effects.

HORWITZ RI, YU EC: Assessing the reliability of epidemiologic data obtained from medical records. *J Chronic Dis* 37:825-831, 1984. Finds generally high rates of intra- and interextractor agreement; proposes strategies for improving the basic quality of data used in epidemiologic research.

HOWE KR, HOLMES M, ELSTEIN AS: Teaching clinical decision making. *J Med Philos* 9:215-228, 1984. Reports on a three-quarter pre-clinical course that incorporated decision analysis and ethical analysis.

JANZ NK, BECKER MH: The health belief model. A decade later. *Health Educ Q* 11:1-47, 1984. Examines the relative importance of different components of the health belief model to the understanding of preventive-health and sick-role behaviors.

JENSEN G, KRONICK R: The cyclical behavior of hospital utilization and staffing. *Health Serv Res* 19:161-180, 1984. Shows that regular seasonal patterns exist in both utilization and staffing levels, but that the patterns are independent of each other.

JOHNSTON ME, GIBSON ES, TERRY CW, ET AL: Effects of labelling on income, work, and social function among hypertensive employees. *J Chronic Dis* 37:417-423, 1984. Reports on several adverse effects of hypertension upon steelworkers' behavior and economic status.

KEMENY ME, HARGREAVES WA, GERBERT B, ET AL: Measuring adequacy of physician performance. A preliminary comparison of four methods in

ambulatory care of chronic obstructive pulmonary disease. *Med Care* 22:620-631, 1984. Reports that no single method was best at capturing all aspects of the management of COPD.

KLEINMUNTZ B: Diagnostic problem solving by computer. A historical review and the current state of the science. *Comput Biol Med* 14:255-270, 1984. Examines the origins of the present state of research in computer-assisted diagnosis.

KNAUS WA, WAGNER DP, DRAPER EA: The value of measuring severity of disease in clinical research on acutely ill patients. *J Chronic Dis* 37:455-463, 1984. Suggests that researchers have not been able to measure adequately severity of disease to control for individual differences among patients.

KOTARBA JA, SEIDEL JV: Managing the problem pain patient. Compliance or social control? *Soc Sci Med* 19:1393-1400, 1984. Explores the usefulness of a social control perspective for the analysis of the everyday medical management of problem pain patients.

KUNZ JC, SHORTLIFFE EH, BUCHANAN BG, FEIGENBAUM EA: Computer-assisted decision making in medicine. *J Med Philos* 9:135-160, 1984. Reviews the strengths and limitations of five major paradigms of medical computer-assisted decision making.

LIDDELL A, MAY B: Patients' perception of dentists' positive and negative attributes. *Soc Sci Med* 19:839-842, 1984. Relates different characteristics of patients' to their perceptions of dentists' positive and negative attributes.

LINN LS, DiMATTEO MR, CHANG BL, COPE DW: Consumer values and subsequent satisfaction ratings of physician behavior. *Med Care* 22:804-812, 1984. Examines the effect that different value preferences can have upon patients' satisfaction with medical care.

LUFT FC, SLOAN RS, LANG CL, ET AL: Influence of home monitoring on compliance with a reduced sodium intake diet. *Arch Intern Med* 144:1963-1965, 1984. Reports on the successful use of chloride titrator strips to facilitate compliance with a reduced sodium intake diet.

MAKADON HJ, GERSON S, RYBACK R: Managing the care of the difficult patient in the emergency unit. *JAMA* 252:2585-2588, 1984. Discusses both theoretical and practical approaches to managing the care of "difficult" patients.

MANSBACH IK, PALT H, PEVSNER B, ET AL: Advice from the obstetrician and other sources. Do they affect women's breast feeding practices? A study among Jewish groups in Jerusalem. *Soc Sci Med* 19:157-162, 1984. Shows that obstetrician's advice and mother's social status were associated with duration of breast feeding.

MCCUSKER J, STODDARD AM: Use of a surrogate for the sickness impact profile. *Med Care* 22:789-795, 1984. Reports that a closely involved family member may provide reliable data for measuring a patient's sickness impact profile.

MCGUIRE WJ: Public communication as a strategy for inducing health-promoting behavioral change. *Prev Med* 13:299-319, 1984. Discusses techniques for manipulating society's elites and governmental institutions to persuade individuals to maintain their own health better.

MCNEIL BJ, PAUKER SG: Decision analysis for public health. Principles and illustrations. *Annu Rev Public Health* 5:135-161, 1984. Presents basic principles of decision analysis and illustrates their application to several recent controversies.

MCPHEE SJ, CHAPMAN SA, MYERS LP, ET AL: Lessons for teaching cost containment. *J Med Educ* 59:722-729, 1984. Reports on the failure of an educational program to make physicians reduce the cost of medical care.

MENDENHALL RC, MOYNIHAN CJ, RADECKI SE: The relative complexity of primary care provided by medical specialists. *Med Care* 22:987-1001, 1984. Concludes that on a disease-specific basis hospital care is more expensive than ambulatory care.

MINKLER M: Health promotion in long-term care. A contradiction in terms? *Health Educ Q* 11:77-89, 1984. Suggests that several changes in the concept of health promotion are necessary to make it relevant to improving the health and quality of life of the institutionalized elderly.

MIR MA, MARSHALL RJ, EVANS R, ET AL: Comparison between videotape and personal teaching as methods of communicating clinical skills to medical students. *Br Med J* 289:31-34, 1984. Reports that videotaped demonstrations were as effective as personal teaching of clinical methods.

MISHEL MH: Perceived uncertainty and stress in illness. *Res Nurse Health* 7:163-171, 1984. Suggests that uncertainty about symptoms, treatment, and outcome was a major predictor of stress resulting from hospitalization for a medical problem.

NAGY VT, WOLFE GR: Cognitive predictors of compliance in chronic disease patients. *Med Care* 22:912-921, 1984. Observes that patient satisfaction was a significant predictor of medical compliance; discusses limitations of cognitive variables in predicting compliance in chronic disease patients.

NAJMAN JM, ARNOLD L: An initial explanatory model of medical students' preferences for patient types. *Med Educ* 18:249-254, 1984. Examines the relationship of different social backgrounds and social values on medical students' attitudes towards different types of patients.

NEUGUT AI, NEUGUT RH: How accurate are patient histories? *J Community Health* 9:294-301, 1984. Reports that 62% of patients were able to respond correctly when asked why they had previously been admitted to the hospital; suggests that disease category is a relevant factor in predicting the accuracy of the response.

NUTT PC: Decision-modeling methods used to design decision support systems for staffing. *Med Care* 22:1002-1013, 1984. Suggests that universal protocols for nurse staffing currently do not exist.

OLDER J: Teaching touch at medical school. *JAMA* 252:931-933, 1984. Reports that less than 7% of medical schools in the English-speaking world give any formal instruction in the uses and meaning of therapeutic touch in medicine.

PARKHOUSE J, CAMPBELL MG: What do young doctors think of their training and themselves? *Br Med J* 288:1976-1977, 1984. Reports on the attitudes of physicians in different specialties.

PAYNE BC, LYONS TF, NEUHAUS E: Relationships of physician characteristics to performance, quality and improvement. *Health Serv Res* 19:307-332, 1984. Examines the relationship of different physician characteristics to performance on several process criteria.

PEDERSON LL, WANKLIN JM, BASKERVILLE JC: The role of health beliefs in compliance with physician advice to quit smoking. *Soc Sci Med* 19:573-580, 1984. Shows that the probability of cessation of smoking was positively related to strength of health beliefs, and that reason for smoking accounts for discrepancies between health beliefs and compliance.

PELLEGRINO ED, HART RJ JR, HENDERSON SR, ET AL: Relevance and utility of courses in medical ethics. *JAMA* 253:49-53, 1985. Reports that physicians who had courses in medical ethics perceived them to be of substantial benefit in confronting actual ethical issues in daily practice.

PIERCE JP, WATSON DS, KNIGHTS S, ET AL: A controlled trial of health education in the physician's office. *Prev Med* 13:185-194, 1984. Reports on the beneficial effect of a health education program in a general practice clinic on the reduction of patients' blood pressure.

RICE JM, LUTZKER JR: Reducing noncompliance to follow-up appointment keeping at a family practice center. *J Appl Behav Anal* 17:303-311, 1984. Shows that a reduction in the cost of follow-up appointments was effective at improving follow-up appointment compliance.

ROBERTSON LS: Insurance incentives and seat belt use. *Am J Public Health* 74:1157-1158, 1984. Reports that a financial incentive had no effect on people's use of seat belts.

ROMM FJ: Patients' expectations of periodic health examinations. *J Fam Pract* 19:191-195, 1984. Reports that preventative exams neither met the patients' expectations nor were consistent with recommended care patterns.

RUBERMAN W, WEINBLATT E, GOLDBERG JD, CHAUDHARY BS: Psychosocial influences on mortality after myocardial infarction. *N Engl J Med* 311:552-559, 1984. Reports that high levels of stress and social isolation were strongly associated with three-year mortality risk.

SCHNEIDER B: Bayesian models for clinical studies. *Methods Inf Med* 23:147-153, 1984. Examines the effect of "relaxing" various assumptions about the a priori distributions upon the clinical usefulness of Bayesian models.

SCHROEDER SA, MYERS LP, MCPHEE SJ, ET AL: The failure of physician education as a cost containment strategy. Report of a prospective controlled trial at a university hospital. *JAMA* 252:225-230, 1984. Reports that physician education reduced the cost of care for certain medical services, but that the impact was not great enough to affect total hospital charges.

SMITH JE: Non-accidental injury to children - I. A review of behavioural interventions. *Behav Res Ther* 22:331-347, 1984. Cites the need for multiple outcome measures, in terms of quality of life for the abused child, and for long-term follow-up.

SHAPIRO MF, HATCH RL, GREENFIELD S: Cost containment and labor-intensive tests. The case of the leukocyte differential count. *JAMA* 252:231-234, 1984. Concludes that the leukocyte differential is over-used, only occasionally useful, and amenable to real cost reduction.

SHEPS SB, SCHECHTER MT: The assessment of diagnostic tests. A survey of current medical research. *JAMA* 252:2418-2422, 1984. Cites several problems with the current manner in which diagnostic tests are evaluated in the medical literature.

STANLEY B, GUIDO J, STANLEY M, SHORTELL D: The elderly patient and informed consent. Empirical findings. *JAMA* 252:1302-1306, 1984. Indicates that elderly patients' choices about projects in which participation is "reasonable" do not differ from younger patients; reports that elderly patients show poorer comprehension of consent information.

STEWART MA: What is a successful doctor-patient interview? A study of interactions and outcomes. *Soc Sci Med* 19:167-175, 1984. Cites several desirable effects of a patient-centered approach in the setting of family practice.

STRULL WM, LO B, CHARLES G: Do patients want to participate in medical decision making. *JAMA* 252:2990-2994, 1984. Concludes that physicians

underestimate patients' desire for information and discussion but overestimate patients' desire to make management decisions.

SUSSER M: Causal thinking in practice. Strengths and weaknesses of the clinical vantage point. *Pediatrics* 74:842-849, 1984. Examines features of clinical practice that contribute strengths or weaknesses to causal inference.

THEODOSSI A, SPIEGELHALTER DJ, MCFARLANE IG, WILLIAMS R: Doctors' attitudes to risk in difficult clinical decisions. Applications of decision analysis in hepatobiliary disease. *Br Med J* 289:213-216, 1984. Reports on physicians' perceptions of the worth of different medical outcomes.

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Dear J/DM Colleagues:

12/85

Listed below are some available reprints, preprints, working papers, etc., on judgment and decision making. Published papers and other papers in their final form are indicated by numbers. Manuscripts still subject to revision are indicated by letters. If you would like to receive any of these, please circle the appropriate numbers or letters below and return to us.

46 48 50 52 53 54 55 56 59 60 61
62 63 66 68 69 70 73 G I J K

Name and Address:

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- I. Dino, G.A., Shanteau, J., Binkley, M., & Spenser, A. (1984). The detrimental effects of environmental stress on creativity. (Tech. Rep. 84-2). Dept of Psychology, Kansas State Univ.
66. Dino, G.A., & Shanteau, J. (1984). What skills do managers consider important for effective decision making? Psychonomic Society meeting.
68. Shanteau, J. (1984). Functional measurement computer programs. J/DM Newsletter, 6, 3-4. (Four programs are described which perform analyses associated with functional measurement. These programs are written both in FORTRAN for a mainframe computer and BASIC for the Apple II series of microcomputers; an IBM PC version will be available shortly.)
69. Shanteau, J. (1985). Some unasked questions about the psychology of expert decision makers. Proceedings of the IEEE international conference on systems, man, and cybernetics. New York: IEEE.
70. Shanteau, J. (1985). Application of information integration theory to methodology of theory development. American Psychological Association meeting.
- L. Shanteau, J. (1985). Psychological characteristics of expert decision makers. (Tech. Rep. 85-2). Dept of Psychology, Kansas State Univ.
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- K. Shanteau, J. (available spring, 1986). Consumer integration theory: The five processes of information integration in consumer judgment. (Tech. Rep. 86-1). Dept of Psychology, Kansas State Univ.

IN SEARCH OF. . .

I'm tired of my intro psych subjects telling me that my decision making tasks are about as interesting as the 48 paired associate lists that they memorized for the so called "cognitive" experiment last week. I'm sick of hearing my social psychology colleagues say that my decision making tasks lack "ecological validity." (This is particularly annoying, because I have to spend 25 minutes arguing about the original "Brunswikian" definition of the term and convince them that Neisser and others have been using the term inappropriately.) I'm getting irritated by my cognitive colleagues who give me contemptuous looks whenever I mention my decision making studies on "higher level cognition." I've decided to do something about it. I'm going to search for the ideal decision making task.

Being aware of my lack of creative ability, I asked my wife where to start. (This is where I get most of my ideas.) Jokingly, she suggested putting an ad in the J/DM Newsletter! I thought it was a great idea, especially since it's free. So, below is the ad, and it will be appreciated if you send your best ideas to this newsletter in PHS 398 format.

Wanted: Ideal Decision Making Task. This task should be able to compete with other video and computer games in its ability to engage the participant's attention and interest in an exciting and intellectually challenging multi-modal mind-boggling experience. On the one hand, the task should capture all of the essential features of real life decisions including such things as

- lack of problem structure,
- ~~the need to search for alternatives and information,~~
- uncertainty about the environment,
- meaningful, serious consequences,
- sequences of interdependent decisions, and
- planning for future consequences.

On the other hand, the task should be informative about the nature of decision making. In other words, it should help the experimenter to

- identify fundamental concepts,
- directly measure all psychological processes,
- control and manipulate all relevant factors, and
- discover general empirical laws, which would produce a powerful new theory.

Obviously, this rules out some tasks that might immediately come to mind such as gambles and lotteries that are never actually played, MCPL tasks where hundreds of predictions are made without knowing why, judgments of contingencies between lights and buttons, inferences about bags of poker chips, problems about accidents with blue and green cabs, stories about a woman named Linda, MAUT tables providing sketchy descriptions of apartments, personality impressions based on arbitrary collections of adjectives, and other worn out favorites. I will be eagerly looking forward to your ideas.

R. E. Yemesub
John Eudrup University

JUDGMENT ANALYSIS ON THE IBM PC. . .

A BASIC program now is available that can perform judgment analysis ("policy capturing") on the IBM personal computer. The program has the capacity to analyze the judgment policies for up to 8 individuals using up to 8 cues for up to 50 cases. Statistics are computed for each task (cue means, standard deviations, and intercorrelations), for each judge (judgment mean, standard deviation, and correlations between judgments and cues), and for each policy (regression coefficients, multiple R, and predicted judgments). Relative weights and function forms are graphically displayed for each judge. Up to 8 judgment policies can be statistically compared, and graphic comparisons can be made for up to 3 policies at a time.

For more information write to John Rohrbaugh, Post Office Box 2213, Clifton Park, New York 12065.

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Copies of this page may be given to interested colleagues for their use.

Page 14 February 1986 J/DM Newsletter
FORTHCOMING MEETING. . .

FOUNDATIONS AND APPLICATIONS OF UTILITY, RISK, AND DECISION THEORIES
3rd International Conference on the Foundations and Applications of Utility, Risk and Decision Theories.
Aix-En-Provence - FRANCE, JUNE 10-13, 1986

The experience of the last 10 years has cast a veil of doubt concerning the validity of the standard models of decision in an uncertain environment. Several "paradoxes" still wait for widely accepted solutions. The aim of this conference is to foster new progress in this area. Research done by organization theorists has been moving on a parallel path. Another aim will thus be to bring the two currents of thought closer to each other and to encourage exchanges between the scientific community and those who take decisions in practice.

1. CONCEPTS AND MODELS

1.1 Representation of agents preferences.

- Utility and expected utility. Other possible rules.
- Multicriteria choices. Other representations of preferences.
- Shaping of preferences: Learning, revisions, reassessment.

1.2 Representation of agents' environment.

- Concepts of hazard, of uncertainty, or risk, of probability.
- Pseudo-probabilities. Other representations of agents' future environment and uncertainty.

1.3 -- Algorithms and procedures of individual choice with search of information.

- Algorithms and procedures of negotiation.
- Dynamic decisions and games under complete or incomplete information.

2. APPLICATION TECHNIQUES

2.1 Decisions in organizations with an unstable environment. Private investment choices. Public program choices.

2.2 Applications to sectors: Banking, Energy, Insurance, Oil exploration, Transportation.

2.3 Decision support systems. Negotiation support systems.

For information write to Secretariat du Colloque FUR-III, c/o Pr. Bertrand MUNIER, G.R.A.S.C.E. - Faculte d'Economie Appliquee, 5 avenue Victor Hugo, 13100 AIX-EN-PROVENCE, FRANCE.

J/DM NEWSLETTER

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