



2018 Workshop on Clinical Decision Making

May 17th and 18th 2018



Program

Sponsored by the University of Göttingen, University Medical Center Göttingen,
European Association for Decision Making, and
Leibnitz Science Campus Göttingen

Contact Information

Registration

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Program

Thursday May 17th - Morning

Begins at	COGITA Research Group Meeting Department of General Practice (Allgemeinmedizin), Humboldtallee 38	CDM Workshop Georg-Elias-Müller Institut für Psychologie, Gosslerstraße 14
8:30		Registration & Welcome
9:00	Chair: Paul Van Royen <ul style="list-style-type: none"> Welcome, introduction, agenda Marie Barais: Short report about the final conclusions of the feasibility study of the Gut Feelings Questionnaire (GFQ). 	Jacinto (Lisbon) The impact of task decomposability in hypothesis testing within the psychotherapy session
9:30	<ul style="list-style-type: none"> Marie Barais: First results of the role of gut feelings in the diagnostic process of pulmonary embolism. Erik Stolper: The child abuse study: ongoing study. 	Druijff (Nijmegen) The influence of positive affect and time pressure on clinical decision making
10:00	Coffee Break	DeKwaadsteniet (Nijmegen) Is it safe? Judging about risks of child maltreatment
10:30	Chair: Marie Barais	Coffee Break
11:00	<ul style="list-style-type: none"> Nydia van den Brink & Paul Van Royen: Hospital specialist gut feelings study: final results. 	Hausmann (Zürich) Process tracing methods and the role of subjective probability
11:30	<ul style="list-style-type: none"> Erik Stolper & Paul van Royen: Gut feelings of patients visiting an out-of-hours office. 	Hagmayer (Göttingen) Causal Explanation based Decision Making - a rational model for clinical reasoning
12:00	<ul style="list-style-type: none"> The future of COGITA: 10 yrs anniversary, key targets, implementing the GFQ in current and future research, discussing possibilities of a multi-centre Gut Feelings study protocol using the GFQ. 	Pieper (Göttingen) Does biomedical knowledge improve diagnostic decisions?
12:30	Lunch Break	Lunch Break
13:00		

Thursday May 17th – Afternoon

Georg-Elias-Müller Institute for Psychology, Gosslerstraße 14,
Room 1.140 First Floor

Begins at	CDM Workshop together with COGITA
13:30	Keynote 1: Norbert Donner-Banzhoff (Marburg): When things seem to go wrong: Diagnostic error in primary care
14:00	
14:30	Coffee Break
15:00	Groenier (Twente) How clinicians think: Changing gear to arrive at the right diagnosis
15:30	Oliva Fanlo (Mallorca) Intuition and cancer diagnosis
16:00	Coffee Break
16:30	Keynote 2: Nancy Kim (Boston): Causal inference and the drive for causal coherence in clinicians' diagnoses, judgments, and memory
17:00	
17:30	
18:00	
18:30	Workshop Dinner

Friday May 18th

**Georg-Elias-Müller Institute for Psychology, Gosslerstraße 14,
Room 1.140 First Floor**

Begins at	CDM Workshop together with COGITA
9:00	Keynote 3: Wolfgang Gaissmaier (Konstanz): An adaptive toolbox for diagnostic decision making: Transparent representations, intuition, and social intelligence
9:30	
10:00	
10:30	Coffee Break
11:00	Douw (Ede) Exploring triggers used by nurses to identify surgical patients at risk for clinical deterioration
11:30	Schuck (Maastricht) Gut feelings in doctors' malpractice trials
12:00	Lambrechts (Antwerp) Gut Feelings in Obstetrics and Midwifery. The role of intuition in deciding to perform a secondary caesarean section during labour
12:30	Lunch Break
13:00	
13:30	Plenary Discussion: Evidence-based decision making in clinical practice Introduction by Margje van der Wiel & Erik Stolper (Maastricht)
14:00	
14:30	
15:00	Farewell

Abstracts in Order of Presentations

The impact of task decomposability in hypothesis testing within the psychotherapy session

Sofia Jacinto – ISCTE-Instituto Universitário de Lisboa/CIS-IUL; Department of Psychological and Brain Sciences, Indiana University

Marina Ferreira – ISCTE-Instituto Universitário de Lisboa/CIS-IUL

João Niza Braga – Católica Lisbon School of Business of Economics, Universidade Católica Portuguesa; Faculty of Human Sciences

Elizabeth Collins – ISCTE-Instituto Universitário de Lisboa/CIS-IUL

In a psychotherapy session it is very difficult to decompose the flux of information in its parts, which favors holistic intuitive judgments (Hammond et al., 1987), and constrains the interpretation of subsequent information according to the initially activated scheme (Eyal et al., 2011). Thus, we hypothesize the clinical session leads to confirmatory hypothesis testing and favors primacy effects (Jacinto et al., 2016). In two studies, we manipulated the decomposability of a clinical judgment to elicit either end-of-sequence (EoS) or step-by-step (SbS) response modes (Hogarth & Einhorn, 1992). In study 1, participants listened to audio excerpts of fictional clients describing, in random order, depression symptoms and non-depression behaviors. The excerpts were presented uninterruptedly followed by a global judgment (EoS) or broken into six shorter segments (SbS). Hypothesis testing strategy was measured through participants' likelihood ratings of three possible diagnoses. Study 2 followed a similar paradigm, additionally testing for the scheme activation by manipulating the order of depression symptoms (beginning vs. end of the excerpt). Results show that understanding the case in a non-decomposable way (EoS mode) leads to more confirmatory hypothesis testing strategy, but only when a scheme is activated (depression symptoms presented in the beginning). Implications to therapy session are discussed.