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Title

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Comprehensive Interpretation Service Use for Patients who are Non-English Primary Language Speakers undergoing Surgery for NSCLC

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Introduction

- Language barriers make it difficult for surgical teams to engage in the discussion of important aspects of pre- and post-operative patient care with patients who are non-English speakers.

Objectives

- Determine if there were language interpreting resource utilization differences in the ambulatory setting compared to the inpatient setting for non-English as primary language (N-EPL) speaking patients undergoing surgery for NSCLC, and whether N-EPL was a risk factor for prolonged length of stay.

Methods

- This is a single institution retrospective cohort analysis comparing N-EPL patients to all EPL patients undergoing resection for primary lung cancer from January 2021 to September 2023.
- Variables analyzed were at least a one-time use of Martti (tablet based telehealth) and other comprehensive (institutional, non-family or friend) interpreter services in the ambulatory and inpatient settings and post-operative length of stay (LOS).

Results

- 242 patients were identified, and patient demographics are shown in Table 1.
- 227 patients (94%) had English as a primary language and 15 patients (6%) had a non-English primary language (242 total).
- Non-English languages spoken are shown in Figure 1.
- At least one incidence of comprehensive interpreter use was documented 66.7% and 73.3% of the time in inpatient and outpatient settings, respectively for N-EPL patients.
- The average LOS among EPL was 3.16 days, compared to the N-EPL group cohort who had an average LOS of 2.73 days. [$t(120)=0.62, p>0.05$]

Table 1: Demographics of Patients undergoing Primary Lobectomy for NSCLC

Characteristic	No.	%
Age, years (mean, SD)	69 ± 10	
Age Range		
18-39	5	2.07%
40-64	60	24.79%
65-80	155	64.05%
>80	22	9.09%
Gender		
Female	143	59.09%
Male	99	40.91%
Race and Ethnicity		
White	164	67.77%
Black/African American	18	7.44%
Asian	12	11.43%
American Indian/Alaskan Native	2	0.83%
Native Hawaiian/Pacific Islander	1	0.41%
Other	31	12.81%
Hispanic/Latino	16	6.61%
Length of Stay, days (mean, SD)	3 ± 3	

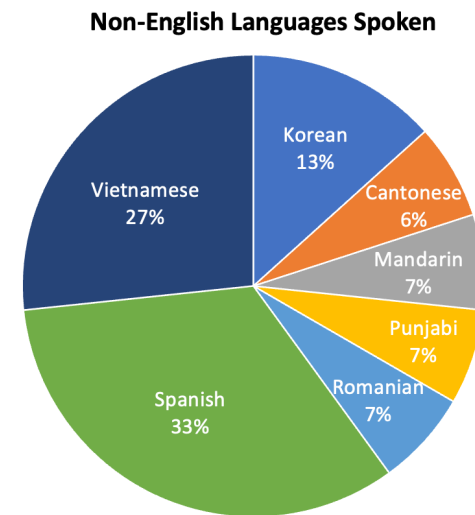


Figure 1: Non-English Primary Languages spoken

Conclusions

- Over 30% of inpatient episodes and 25% of outpatient episodes for patients with a non-English primary language went without documented interpreter services during their surgical lung cancer care journey.
- These data identified a distinct area of improvement for patient-centered care, and/or improved documentation.
- A matched-cohort analysis will be conducted to further assess the influence of language barriers on patient outcomes, though N-EPL was non-inferior to EPL as it relates to LOS.