
Medical Professional Society Handbook

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Introduction

The Canadian Institute for Health Information indicates that up to 30% of tests, treatments, and procedures performed in Canada are potentially unnecessary. Unnecessary tests, treatments, and procedures do not add value for patients, potentially expose patients to harm, lead to more testing to investigate false positives, contribute to unwarranted stress for patients and their families and consume precious time and resources.

Choosing Wisely Canada is a national campaign to help clinicians and patients engage in conversations about unnecessary tests and treatments, and make smart and effective care choices. The campaign launched on April 2, 2014, at the University of Toronto in partnership with the Canadian Medical Association.

Choosing Wisely Canada inspires and engages health care professionals to take leadership in reducing unnecessary tests, treatments, and procedures, and enables them with simple tools and resources that make it easier to choose wisely. It does so by partnering with professional societies and associations representing different clinical specialties (e.g., cardiology, family medicine, nursing, pharmacy) to come up with lists of “Things Clinicians and Patients Should Question.”

This handbook guides professional societies through the engagement process in Choosing Wisely Canada. It is divided into three primary sections, with a fourth dedicated to useful resources:

1. Developing Choosing Wisely Canada recommendations – describes the operating principles to be followed by societies when developing recommendations; proposes a roadmap for the development process; explains the process for keeping the recommendations up to date with the latest evidence
2. Publicly releasing Choosing Wisely Canada recommendations – outlines campaign key messages; provides communications tools and templates for use by societies when publicizing recommendations
3. Going ‘beyond the list’ of Choosing Wisely Canada recommendations – proposes ideas to ‘put the recommendations in practice’ by: (a) educating members on Choosing Wisely Canada and the recommendations; (b) encouraging implementation of the recommendations in practice; (c) acknowledging champions of Choosing Wisely Canada

We would like to thank you for your interest and participation in Choosing Wisely Canada. Clinician leadership is central to the campaign and that is why partnerships with professional societies are so important and essential to its success.

Developing Choosing Wisely Canada recommendations

This section describes the operating principles to be followed by societies when developing recommendations, proposes a roadmap for the list development process, and outlines the process to keep the lists of recommendations up-to-date with the latest evidence.

Operating principles for developing Choosing Wisely Canada lists of recommendations

The following guidelines outline (1) the expectations of Canadian medical professional societies for engagement in the Choosing Wisely Canada campaign, and (2) the expectations of Choosing Wisely Canada central, which is the core team comprised of staff from the University of Toronto, St. Michael's Hospital (Toronto) and the Canadian Medical Association.

Each medical professional society is expected to:

1. Develop a list of tests, treatments, or procedures in accordance with the following guidelines:
 - Societies are free to determine the process for creating their lists
 - Each item on the list should be within the specialty's scope of practice (i.e., things their own membership should consider in their practice)
 - Appropriate tests, treatments or procedures should be used frequently and/or may expose patients to harm and/or may contribute to stress and avoidable burden for patients and/or create an increased strain on our health care system
 - There should be strong evidence to support each recommendation
 - The development process should be thoroughly documented and publicly available upon request
 - If applicable, societies are asked to keep their provincial (especially Quebec) counterparts informed regarding their list development
 - Consider opportunities to include patient(s) in their Choosing Wisely working group or development process (Choosing Wisely Canada can help with this if required)
 - Each item on the list should begin with "Don't"
 - When possible, use simple and clear language that can be easily understood by a patient or non-medical person
 - If a list item overlaps or is anticipated to overlap with another professional society, work with the other society to ensure all related parties agree

Important note: We ask that societies do NOT include recommendations that are about underuse in their lists (e.g., Don't forget to...). The "Don't" statements are focused on overuse.

2. Disseminate the list as widely as possible through various means (journal articles, newsletters, website, annual meetings, social media, etc.). All lists, along with information about the genesis and purpose of the initiative, will be posted on the shared Choosing Wisely Canada website (www.choosingwiselycanada.org). Translation of the list into French will be done by Choosing Wisely Canada central and hosted at www.choisiravecsoin.org.
3. Designate a staff or board member(s) to act as liaison with Choosing Wisely Canada central for:

- List development, tweaking, and approval
- Coordination of all communications related activities

The individual(s) specified above and others (e.g., researchers/program evaluators) will be encouraged to attend Choosing Wisely Canada's annual national meeting.

4. Review and update the list of recommendations based on new evidence or changes to clinical guidelines annually. Choosing Wisely Canada central will remind participating medical professional societies to review their lists on an annual basis. Lists of recommendations will include a 'last updated' date.
5. Each medical professional society is encouraged to survey its membership about knowledge and attitudes regarding unnecessary tests/treatments, as well as exposure to the Choosing Wisely Canada campaign, using a standard questionnaire developed by Choosing Wisely Canada central.

Choosing Wisely Canada central is expected to:

1. Communicate regularly with medical professional societies regarding list development, campaign initiatives, and member relations.
2. Provide additional resources as requested and required to assist with list development (e.g., literature searches). Choosing Wisely Canada central will work with societies to assess these needs on a case-by-case basis.
3. Review the lists developed by medical professional societies to ensure consistency and coordination across the different lists.
4. Circulate soon to be released recommendations to all societies participating in Choosing Wisely Canada prior to publication to create awareness and allow for major feedback or areas requiring clarity.
5. Translate the lists into French and mock up all materials into PDF format.
6. Provide communications support and advice to professional societies.
7. Develop and circulate communications tools and resources including template press releases, blog posts, and social media language.
8. Develop Choosing Wisely Canada branding and identity tools including logo, overview materials, generic PowerPoint slides on the campaign, etc.
9. Develop and maintain Choosing Wisely Canada websites and social media accounts, English and French. Each specialty will have its own page on Choosing Wisely Canada's website where the list will be featured, along with other relevant materials.
10. Enable societies to encourage implementation of the recommendations in practice by members. This is primarily achieved by sharing of strategies among participating societies.
11. License "Choosing Wisely Canada" trademarks for use in Canada by campaign partners.

List components and sample

Hematology

Five Things Physicians and Patients Should Question
by
Canadian Hematology Society
Last updated: June 2017



In partnership with the
Canadian Hematology Association

- 1 Don't give IVIG as first line treatment for patients with asymptomatic immune thrombocytopenia (ITP).**
Treatment for ITP is recommended for a platelet count less than 30x10⁹/L. Corticosteroids are considered first-line treatment, with the addition of IVIG reserved for severe ITP and bleeding, when a rapid rise in platelets is required, or when corticosteroids are contraindicated. There is no evidence of benefit of IVIG in combination with corticosteroids for first-line treatment of asymptomatic ITP. Unnecessary IVIG infusions can result in multiple adverse effects, including acute hemolytic or anaphylactic reactions, infections, thromboembolic events, and aseptic meningitis.
- 2 During interruption of warfarin anticoagulation for procedures, don't 'bridge' with full-dose low molecular weight heparin (LMWH) or unfractionated heparin (UFH) unless the risk of thrombosis is high.**
Patients on warfarin with a low-risk for thrombotic events do not require bridging anticoagulation. If interruption is necessary, warfarin can be stopped 5 days prior to a planned procedure and resumed when it is felt to be safe to do so afterwards. Bridging with LMWH or UFH has been shown to cause excess bleeding when compared with no bridging and may ultimately delay resumption of warfarin. High-risk patients (e.g. mechanical mitral valve, venous thromboembolism within the last 3 months or atrial fibrillation with recent stroke/TIA) should be considered for bridging if the risk of thrombosis is higher than the risk of peri-procedural bleeding.
- 3 Don't order thrombophilia testing in women with early pregnancy loss.**
Early pregnancy losses are common amongst healthy women. Current guidelines do not support the routine screening of women with pregnancy loss for inherited thrombophilias. Moreover, there are recommendations against instituting thromboprophylaxis in women with inherited thrombophilias wishing to achieve a successful term pregnancy. By performing testing for inherited thrombophilias, patients may be unnecessarily exposed to the harms of thromboprophylaxis, inappropriately labeled with a disease-state, and may unnecessarily modify future plans for travel, pregnancy or surgery based on detection of an "asymptomatic" thrombophilia. Further, patients with negative testing may receive false reassurance.
- 4 Don't request a fine-needle aspirate (FNA) for the evaluation of suspected lymphoma.**
The diagnosis of lymphoma requires specimens with intact cellular architecture for accurate histopathologic and immunophenotypic classification. FNA is associated with a low sensitivity and potentially results in delays in lymphoma diagnosis. Although excisional biopsy is the gold standard for lymphoma diagnosis, depending on the lymph node location, excisional biopsy may be associated with complications and the need for general anesthesia. At a minimum, an imaging-guided core biopsy should be obtained to improve the accuracy and timeliness of lymphoma diagnosis.
- 5 Don't transfuse patients based solely on an arbitrary hemoglobin threshold.**
Decisions to transfuse should be based on assessment of an individual patient including their underlying cause of anemia. There is high quality evidence that demonstrates a lack of benefit and, in some cases, harm to patients transfused to achieve an arbitrary transfusion threshold. If necessary, transfuse only the minimum number of units required instead of a liberal transfusion strategy. Risks of red blood cell transfusions include allergy, fever, infections, volume overload and hemolysis.

RECOMMENDATIONS

Simple declarative statements about a test, treatment or procedure that is overused.

RATIONALES

Concise evidentiary information to support the recommendation. A rationale should provide the evidence and thinking behind the recommendation, and should also specify when the highlighted intervention is appropriate. If there are any conditional clauses or stipulations that clinicians might need to consider in implementing be sure to address them. If possible, keep rationales to less than 150 words.

HOW THE LIST WAS CREATED DESCRIPTION

A paragraph describing the methodology used in creating the list of recommendations.

How the list was created
The entire membership of the Canadian Hematology Society (CHS) was asked to submit potential Choosing Wisely Canada list items. A steering committee consisting of 8 self-nominated CHS members was then formed. Next, the committee identified items for potential inclusion in the final list based on principles from the American Society of Hematology Choosing Wisely campaign and Choosing Wisely Canada. These principles included that the recommendations should aim to reduce harm, be evidence-based, reduce strain on the health care system, focus on common tests, procedures or treatments and be within the clinical domain of members of the CHS. Items that were felt to be at least 5 of the 7 committee members the chairperson remained neutral for potential inclusion were selected for evidence review. Members could opt out of voting on a particular item if they felt it was outside of their scope of practice. Thirty-eight items were suggested by the membership-at-large and 12 items were selected for evidence review. Health Quality Ontario and the Canadian Agency for Drugs and Technologies in Health performed the literature searches. It was determined that expert recommendations could be a suitable evidence base if the other principles were maintained. If a relevant clinical practice guideline was identified, it was reviewed to ensure congruence with the final recommendations. If disagreements were found, the input of relevant Canadian experts was sought. The agencies performing the literature reviews generated an evidence summary for each potential list item. Using the evidence summaries, a review of critical practice guidelines and application of our principles, the 12-item list was then narrowed to the final 5-item list based on the committee's ranking.

Sources

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About the Canadian Hematology Society

CHS is a professional association founded in 1971, whose membership includes most of the hematologists in Canada. The main goals of CHS are to maintain the integrity and visibility of the specialty of hematology, by participating with the Royal College of Physicians and Surgeons of Canada in designing training programs for our successors, encouraging and rewarding scholarly research, and providing a forum for communication and mutual support for all of our colleagues in both community and academic settings.



About Choosing Wisely Canada

Choosing Wisely Canada is a campaign to help physicians and patients engage in conversations about unnecessary tests, treatments and procedures, and to help physicians and patients make smart and effective choices to ensure high-quality care.

ChoosingWiselyCanada.org | info@ChoosingWiselyCanada.org | @ChooseWiselyCA | #ChoosingWiselyCanada

SOURCES

Key references, generally academic publications, which support each recommendation.

Roadmap for list development

APPROXIMATE TIMELINE: 6 - 8 MONTHS

1. Initial contact
 - Choosing Wisely Canada will offer a teleconference to describe society engagement
 - Society handbook is shared
2. Formal commitment
 - Society will be added to list of [partners on Choosing Wisely Canada website](#)
 - Society leads will be added to Choosing Wisely Canada society email distribution list
3. List development
 - A common process for list development used by societies includes:
 - Form task force
 - Review evidence
 - Look at [US Choosing Wisely](#) list (if available) - recommendations can be adopted or adapted with permission
 - Compile list of recommendations (10 – 15)
 - Narrow down to five by small group discussion or by sending to members to vote on
 - Choosing Wisely Canada central can help with literature review where needed
 - Many societies have assessed the importance of potential topics with regard to: harm avoidance, evidence, aggregate cost, relevance, frequency and impact
4. List submission
 - Submitted by email; should include all list components; Choosing Wisely Canada is happy to review early drafts
5. Review
 - Internal review is completed by campaign staff and physician experts in relevant specialty
 - Draft recommendations are circulated to all societies participating in Choosing Wisely Canada, giving them one week to provide areas of major concern or feedback. Feedback is compiled by Choosing Wisely Canada and shared with the authoring society for consideration.
6. Translation and formatting
 - Translation to French is undertaken by the Canadian Medical Association; translation generally takes two weeks; societies will be asked to sign off on the translation
 - Choosing Wisely Canada will mock up the lists in both languages. Societies will provide final sign off on their mocked-up lists.
7. List release

Keeping the lists up to date

Societies who have published recommendations over 12 months ago will be contacted by Choosing Wisely Canada and asked to review their recommendations to ensure they are still relevant and reflect the latest evidence.

Societies will identify one representative to complete a survey to confirm whether their recommendations are up to date. If the recommendations are up to date, the society representative will simply check boxes to confirm and their list will be revised to reflect the new 'last updated' date.

Any changes that do need to be made can be returned to Choosing Wisely Canada by email or tracked on a Word document of the list that will be provided with the initial email. Revisions would then be translated into French and revised on all Choosing Wisely Canada platforms (website and PDF lists).

Publicly releasing Choosing Wisely Canada recommendations

This section outlines campaign key messages and provides communications tools and templates for use by societies when releasing recommendations.

Campaign overview (Q&A)

- Q: Is unnecessary testing and treatment a problem in Canada?
- A: Yes, the Canadian Institute for Health Information indicates that up to 30% of tests, treatments, and procedures performed in Canada are potentially unnecessary.

- Q: What are the drivers of unnecessary tests, treatments, and procedures?
- A: There are multiple drivers of unnecessary tests, treatments, and procedures, including:
 - Practice habits are traditionally difficult to change, even in the face of new evidence
 - Patients sometimes request tests and treatments that may not be useful
 - Lack of time for shared decision-making between clinicians and patients
 - Outdated decision-support systems encourage over-ordering
 - Defensive medicine and fear of malpractice lawsuits drive over-investigations
 - Payment systems reward doing more

- Q: What is Choosing Wisely Canada's mission?
- A: Choosing Wisely Canada is a national campaign to help clinicians and patients engage in conversations about unnecessary tests and treatments, and make smart and effective care choices.

- Q: When did Choosing Wisely Canada launch?
- A: The campaign launched on April 2, 2014, at the University of Toronto in partnership with the Canadian Medical Association.

- Q: Who leads Choosing Wisely Canada?
- A: Choosing Wisely Canada is led by Dr. Wendy Levinson and a small team of physicians and staff from the University of Toronto, St. Michael's Hospital (Toronto), and the Canadian Medical Association. Choosing Wisely Canada relies heavily on partnerships to fulfill its mandate.

- Q: Who funds Choosing Wisely Canada?
- A: Funding for Choosing Wisely Canada comes from multiple sources including the Canadian Medical Association, federal, provincial and territorial governments, and granting agencies.

- Q: How does Choosing Wisely Canada engage clinicians?
- A: Choosing Wisely Canada inspires and engages health care professionals to take leadership in reducing unnecessary tests, treatments, and procedures, and enables them with simple tools and resources that make it easier to choose wisely. It does so by partnering with professional societies and associations representing different clinical specialties (e.g., cardiology, family medicine, nursing) to come up with lists of "Things

Clinicians and Patients Should Question.” Examples of Choosing Wisely Canada recommendations for family physicians, developed by the College of Family Physicians of Canada, include:

- Don't use antibiotics for upper respiratory infections that are likely viral in origin, such as influenza-like illness, or self-limiting, such as sinus infections of less than seven days of duration.
 - Don't do annual screening blood tests unless directly indicated by the risk profile of the patient.
 - Don't do imaging for lower-back pain unless red flags are present.
-
- Q: How does Choosing Wisely Canada educate and engage patients?
 - A: As each patient situation is unique, Choosing Wisely Canada encourages clinicians and patients to have conversations about what is and isn't necessary and to determine an appropriate treatment plan together. To support these conversations, Choosing Wisely Canada has a library of patient materials designed to educate the Canadian public that when it comes to medical tests, treatments and procedures, more is not always better, and that sometimes the risks are greater than the benefits. Through its 'More Is Not Always Better' campaign, Choosing Wisely Canada has shared this message with millions of Canadians through mainstream media, social media, and health care facilities.
-
- Q: Are medical students and trainees involved in Choosing Wisely Canada?
 - A: Physician behaviours that lead to unnecessary tests, treatments, and procedures can develop early during medical training, and the medical education environment can foster such behaviours. Students and Trainees Advocating for Resource Stewardship (STARS) is a grassroots, student-led campaign that seeks to change the culture of medical education by addressing the behaviours that can lead to unnecessary testing and treatment. Residents and fellows are engaged in Choosing Wisely Canada as local leaders in practice, implementation, and research associated with the campaign.
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- Q: What do clinicians do with the recommendations?
 - A: Choosing Wisely Canada also works with health care delivery organizations across Canada to re-engineer the clinical and administrative processes that lead to over-testing and over-treatment. Leads from many of the successful implementation projects have shared their work by publishing toolkits that contain practical tools, tips, and templates for other organizations to emulate.
-
- Q: Is Choosing Wisely present in Canada only?
 - A: Choosing Wisely Canada is part of a global movement that began in the United States in 2012, which now spans 20 countries across 5 continents.
 - Choosing Wisely Canada recently launched several provincial and territorial campaigns (e.g., Choosing Wisely Northwest Territories, Choosing Wisely Yukon) to deepen its work in different regions of Canada.

Press release template

A press release is an easy way to announce your participation in Choosing Wisely Canada, release your list, provide updates on the work or promote an event. While the primary audience of a press release is the media, they can also be used to provide content for your website, repurposed for newsletter articles or member communications, and help with search engine traffic to your site. The key messages from this toolkit can help you construct your release, and below are some ideas and a draft to help you get started.

- Download our press release template
- Please share all press releases with us (info@choosingwiselycanada.org) prior to distribution

Format: Press releases are typically no more than two pages, and follow a standard format that includes the following:

- Contact person for the media
- Date of release

- A short headline, which can be followed by a slightly longer sub-headline
- At least one quote from an organizational leader (Choosing Wisely Canada is happy to provide quotes or connections to national leaders)
- Your organization's boilerplate, or mission statement at the end

Ideas: Below are some ideas to help you get started with your press release:

- Announcing your organization's participation in Choosing Wisely Canada
- The release of your list
- Promotion of an upcoming event or meeting
- Update at key milestones

Dissemination: An important part of any press release is your distribution strategy to ensure it reaches your target audiences. Key distribution channels include:

- Your organization's website
- Twitter and Facebook accounts, with links back to your release
- A press release distribution service, such as Canada Newswire
- Pitching to local/ reporters. A good way to get your release picked up is to identify reporters who cover topics related to your specialty or list, and reference a recent story they covered and how your release relates to it.

Op-ed publication

An op-ed is an opinion piece, typically published in a newspaper or magazine. Choosing Wisely Canada often partners with medical professional society leads to publish an op-ed related to the release of their list – specifically when their list includes a recommendation that is of interest to the public. If you are interested in the possibility of co-authoring an op-ed, please contact info@choosingwiselycanada.org.

Examples of op-eds that have been published with societies include:

- Nursing: [When more is not always better: choosing nursing interventions wisely](#). Longwoods, December 2016.
- Obstetrics and gynecology: [Too many medical procedures on women aren't necessary](#). Toronto Star, June 2017.
- Long term care: [Choosing wisely: Up to 30 percent of healthcare offers no clinical value to patients](#). Hospital News, August 2017.

Mass email template

Subject: [Medical professional society name] Releases List Unnecessary Tests, Treatments or Procedures as Part of Choosing Wisely Canada Campaign

Dear [medical professional society name] members and partners,

Today [medical professional society name] released a list of “[number of recommendations] Things Clinicians and Patients Should Question” in [specialty] as part of the Choosing Wisely Canada campaign. Many of you played a part in the creation of these recommendations and for that we thank you.

Choosing Wisely Canada is a campaign to help clinicians and patients engage in conversations about unnecessary tests and treatments and make smart and effective choices to ensure high-quality care.

The list identifies [number] targeted, evidence-based recommendations that can support clinicians and patients in making wise choices about their care and includes:

- [recommendation]
- [recommendation]
- [recommendation]
- [recommendation]
- [recommendation]

For more information on Choosing Wisely Canada, please visit www.choosingwiselycanada.org. Join the conversation on Twitter [@ChooseWiselyCA](https://twitter.com/ChooseWiselyCA).

Sample tweets

Choosing Wisely Canada uses Twitter to support the conversation and spread the word. Here are some ways to tie your Twitter communications to the campaign:

- If you have not already, follow Choosing Wisely Canada on Twitter [@ChooseWiselyCA](https://twitter.com/ChooseWiselyCA)
- Also, follow partners who have joined the campaign and are present on Twitter
- Re-tweet (RT) tweets on Choosing Wisely Canada through your Twitter account(s)
- Use the hashtag #choosingwisely when tweeting about the campaign
- With each tweet, include a link to your specialty's webpage on the [Choosing Wisely Canada website](http://www.choosingwiselycanada.org)

To help you get started with Twitter, below is a collection of sample template tweets your team can utilize to talk about your Choosing Wisely Canada work.

- We're working with @ChooseWiselyCA to determine tests, treatments, procedures pts and providers should talk about
- Do you really need that test? We're working with @ChooseWiselyCA to get pts & providers talking about appropriate care #choosingwisely
- [Medical professional society name] unveils #ChoosingWisely list as part of @ChooseWiselyCA campaign
- What common, but not always needed, tests & treatments should providers and pts talk about? #choosingwisely
- Are there test/treatments/procedures providers should talk about with pts at their next visit? #choosingwisely

Sample Facebook posts

Choosing Wisely Canada uses Facebook to support the conversation and spread the word. Here are some ways to tie your Facebook communications to the campaign:

- If you have not already, "friend" or "like" the Choosing Wisely Canada fan page: <https://www.facebook.com/ChoosingWiselyCanada>
- Tag Choosing Wisely Canada in your posts about Choosing Wisely Canada (by adding @choosingwiselycanada and #choosingwisely in posts)
- Share the short, template Facebook posts included below on your organization's Facebook page about your work on the campaign
- Link back to www.choosingwiselycanada.org for more information

To help you get started with Facebook, below is a collection of sample template posts your team can utilize to talk about your Choosing Wisely Canada work.

- We've partnered with @choosingwiselycanada to help patients and their providers talk about what tests and treatments are really necessary. Learn more at www.choosingwiselycanada.org #choosingwisely
- We're working with the @choosingwiselycanada campaign to help clinicians and their patients have conversations about their health care and what tests, treatments, and procedures may not be necessary (and could even cause harm). Find out more at www.choosingwiselycanada.org #choosingwisely
- Are there things you should be talking with your patients about? Check out what we're doing with the

@choosingwiselycanada campaign to help you talk with your patients about tests, treatments, and procedures that may not be necessary. Learn more at www.choosingwiselycanada.org #choosingwisely

- As part of the @choosingwiselycanada campaign, we are proud to release our list of [number of recommendations] tests, treatments or procedures that are sometimes practiced in [specialty], which research shows may not always be necessary. Are there things you should be talking with your patients about? Learn more at www.choosingwiselycanada.org #choosingwisely
- The @choosingwiselycanada lists encourage clinician and patient conversations about using the most appropriate tests and treatments. What do you think about the lists? #choosingwisely www.choosingwiselycanada.org/recommendations/

Going ‘beyond the list’ of Choosing Wisely Canada recommendations

This section identifies options for societies to further their Choosing Wisely work once their list of recommendations has been released.

Identify champions of Choosing Wisely

Since launching in 2014, numerous individuals, working independently or as part of a team, have made a significant contribution to advancing Choosing Wisely Canada through implementation, education or awareness-building projects. Societies have a unique role to play in identifying and recognizing such individuals – who we call ‘champions’. Societies can: (a) recognize individual clinicians or teams for their contributions to the campaign; (b) inspire clinicians seeking to implement Choosing Wisely Canada in their own practice; (c) provide an opportunity to celebrate their members’ contributions to the campaign; (d) demonstrate how the campaign is driving change in health care; (e) help clinicians learn from one another by highlighting exemplars. Once champions have been identified in each specialty, it will be easier for societies to carry out further Choosing Wisely work.

Embed Choosing Wisely into your national meeting

A national meeting provides an opportune time to connect with members and educate them on new initiatives or priorities. Many societies use their annual meeting as an outlet to release their list of recommendations. But once the recommendations have been released, an annual meeting is also an opportunity to showcase Choosing Wisely implementation projects underway in your specialty. Many societies have introduced a Choosing Wisely track or series of sessions at their annual meeting, where they feature projects led by members related to resource stewardship. For example, the [Canadian Association of Emergency Physicians](#) has a Choosing Wisely track embedded in their meeting. Some societies may choose to develop a new call or broaden an existing call for abstracts at their annual meeting to include trainee submissions that feature resource stewardship work.

Publish an article (academic or not) on your list development process

Publishing an article on the process followed to develop your recommendations can be a great way to educate members about your list. Examples of articles published by societies participating in Choosing Wisely Canada include:

- Medical genetics: Goh E, et al. Choosing Wisely Canada: The Canadian College of Medical Geneticists’ (CCMG) list of five items physicians and patients should question. *J Med Genet.* 2017 Aug 19. [PMID: 28822975](#).
- Nguyen GC, et al. Modified Delphi Process for the Development of Choosing Wisely for Inflammatory Bowel Disease. *Inflammatory bowel disease: Inflamm Bowel Dis.* 2017 Jun;23(6):858-865. [PMID: 28509817](#).
- Chan E, et al. Choosing Wisely: The Canadian Society of Nephrology’s List of 5 Items Physicians and Patients Should Question. *Can J Kidney Health Dis.* 2017 Feb 28;4:2054358117695570. [PMID: 28321324](#).
- Cheng AHY, et al. Choosing Wisely Canada®: Five tests, procedures and treatments to question in Emergency Medicine. *CJEM.* 2017 Jul;19(S2):S9-S17. [PMID: 28251880](#).

Introduce a Choosing Wisely series in your journal

The Canadian Medical Association Journal (CMAJ) published a series of articles on the Choosing Wisely Canada campaign and its recommendations. The articles were released over a 12-month period, and then combined in a special [Focus on Choosing Wisely Canada](#) issue, alongside quizzes and commentaries.

Canadian Family Physician (CFP) partnered with Choosing Wisely Canada in 2016 to publish a 14-article series that profiled family physicians from across the country who have implemented the recommendations in their practice (e.g., Crosby J. Choosing Wisely Canada recommendations. *Can Fam Physician*. 2016 Jul;62(7):568. [PMID: 27412210](#)). In 2018, a new quarterly interview series was introduced in CFP that focuses on shared decision-making. The interviews highlight, where possible, relevant point-of-care tools family physicians use when engaging patients about Choosing Wisely related topics.

Initiate a resource stewardship award for trainees or clinicians

Recognizing trainees or clinicians in your specialty that are advancing the science of resource stewardship is an effective way to promote Choosing Wisely. Goals of such awards are not only to celebrate the work of those already involved in resource stewardship, but to promote engagement of all trainees and clinicians in Choosing Wisely Canada. The terms for such awards or recognition strategies would be at the society's discretion. But, Choosing Wisely Canada would be pleased to assist in promotion of the award and recognition of the award winners through our communication channels including social media or by [profiling them on our website](#).

Some societies, like the College of Family Physicians of Canada, have introduced an award to recognize residents who have integrated the principles of Choosing Wisely into their work.

Suggested terms for a trainee recognition and reward program include:

- The terms of the strategy to recognize resident achievements in resource stewardship fall within the discretion of the professional society.
- Awards should be for post-graduate medical trainees but may include other levels of training.
- At a minimum, the recipient's program director and post-graduate dean should be notified about receipt of the award.
- It is not expected that the recognition strategies include a monetary award.
- All awards will be announced on Choosing Wisely Canada's website and social media.
- A partnership between Resident Doctors of Canada and Choosing Wisely Canada will also encourage further dissemination of the recognition strategy.

Develop corresponding clinician or patient materials

Many societies have developed assets to elaborate on their recommendations. For example:

- The Canadian Society for Transfusion Medicine, in partnership and with funding from Canadian Blood Services' BloodTechNet program, developed [five one-minute animated videos that elaborate on five of their Choosing Wisely recommendations](#).
- The College of Family Physicians of Canada developed a [toolkit related to their annual physical recommendation](#) with videos and posters for their clinics to facilitate informed discussions.
- The Canadian Nurses Association integrated Choosing Wisely into their webinar series, [Self-monitoring of blood glucose: Choosing wisely for those with Type 2 Diabetes not using insulin](#).

Survey members re: attitudes and awareness

Once the list has been released, some societies are interested in measuring uptake and gathering feedback from their members. Choosing Wisely Canada has developed an attitudes and awareness survey template which is available to all societies. The Choosing Wisely Canada central team works with society leads to customize the survey for your specialty. We will produce a survey link that you can then share with your members. All data collected will be shared with society leads. If you are interested in administering a survey of this kind, please contact info@choosingwiselycanada.org.

Participate in Choosing Wisely Canada sub-campaigns

Choosing Wisely Canada has launched sub-campaigns, like [Antibiotic Wisely](#) and [Opioid Wisely](#), in partnership with medical professional societies. Participating societies work with Choosing Wisely Canada to develop sub-campaign content and communicate sub-campaign principles and assets to their members.

Co-host a Choosing Wisely Talk

[Choosing Wisely Talks](#) is a monthly webinar series hosted by Choosing Wisely Canada and led by an inspiring guest speaker or speakers, usually someone who has made significant gains in implementing the Choosing Wisely recommendations. Participants leave each webinar with inspiration for their own Choosing Wisely projects and a better understanding of potential barriers and opportunities for successful implementation. We encourage societies to put forward the names of Choosing Wisely champions who are implementing the recommendations. If the project is suitable for a Choosing Wisely Talk, societies can co-host the webinar, much like the Canadian Society for Internal Medicine did for [Tackling Overuse in Hospitals, Sinai Health System, Toronto](#).

Co-brand a Choosing Wisely Canada implementation toolkit

Choosing Wisely Canada works with clinician leads who have successfully implemented Choosing Wisely projects to publish [toolkits](#) that contain practical tools, tips, and templates for other organizations to emulate. Societies are encouraged to publicize toolkits relevant to their specialty and bring forward successful projects that might make a good toolkit. Some societies, like the Canadian Society for Internal Medicine, have co-branded and disseminated an implementation toolkit (see: [Less Sedatives For Your Older Relatives: A toolkit for reducing inappropriate use of benzodiazepines and sedative-hypnotics among older adults in hospitals](#)). If you are aware of implementation projects that might make a suitable toolkit, please contact info@choosingwiselycanada.org.

Useful resources

Generic PowerPoint slides

We have comprehensive slide sets that you can use as you see fit to educate your members on the campaign. Our generic slides are always being updated, so please email us at info@choosingwiselycanada.org for the latest version.

Campaign website

Choosing Wisely Canada's website, available in both [English](#) and [French](#), provides a user-friendly experience on both desktop and mobile platforms. A strength of the site is a powerful search function which provides instant access to campaign materials.

Summary of key content:

- [Recommendations](#): Each specialty that has released recommendations has its own webpage on Choosing Wisely Canada's site. The recommendations are central, but related patient materials, toolkits, events, articles can be conveniently accessed.
- [Campaigns](#): In addition to the main campaign to develop lists of specialty-specific recommendations, the Choosing Wisely community has organized offshoot campaigns of various kinds and in different jurisdictions ([international](#), regional and territorial, for [trainees](#) (medical students and residents), for [patients](#)).
- [Events](#): This section provides details on all campaign-related events. For example, Choosing Wisely Canada hosts a monthly webinar for implementers called, Choosing Wisely Talks. Choosing Wisely Canada also hosts an annual national meeting.
- [Perspectives](#): This section represents Choosing Wisely Canada's digital magazine that explores the unnecessary care phenomenon and what people are doing about it. Perspectives is comprised of six sections: [News](#), [Viewpoints](#) (op-eds), [Profiles](#), [How Tos](#) (toolkits), [Patient Stories](#) and [Around the World](#) (articles related to Choosing Wisely campaigns in 20+ other countries).

Choosing Wisely Canada toolkits

Choosing Wisely Canada works with health care delivery organizations across Canada to re-engineer the clinical and administrative processes that lead to over-testing and over-treatment. Over 100 health care delivery organizations are currently working on quality improvement projects to ensure that their practices are in line with the Choosing Wisely Canada recommendations. Many of the successful projects have shared their work by publishing [toolkits](#) that contain practical tools, tips and templates for other organizations to emulate.

Choosing Wisely Canada has partnered with the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada to develop three new toolkits to help physicians learn about and teach resource stewardship. The '[CanMEDS Resource Stewardship Curriculum Toolkit Series](#)' can help to meet requirements for resource stewardship competencies as set out in CanMEDS 2015. The toolkits are designed to use with as much or as little adaptation as you choose, and include content like modifiable PowerPoint slide decks, annotated bibliographies and how to guides.

Choosing Wisely Canada patient pamphlets

Choosing Wisely Canada patient pamphlets are meant to help patients learn about the tests, treatments, and procedures to question, when they are necessary and when they are not, and what patients can do to improve their health. Over 35 patient pamphlets have been published by Choosing Wisely Canada in partnership with medical professional societies.

Campaign branding guidelines

The name “Choosing Wisely Canada” and associated logos are trademarks of the ABIM Foundation, licensed for use in Canada by the University of Toronto.

The French equivalent “Choisir avec soin” and associated logos are trademarks of the University of Toronto.

Individuals and organizations whose primary purpose is the delivery of patient care may use the Choosing Wisely Canada brand if the conditions in this document are adhered to. Improper use of the Choosing Wisely Canada brand will result in the revocation of these privileges.

To use the Choosing Wisely Canada brand, please review the information contained in our [Brand Book](#).

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