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**Optimizing patient show rate in the outpatient clinic by implementing a modified reminder system for scheduled appointments****Alvaro J Ramos-Rodriguez, Fernando Vazquez de Lara, Katherine Lopez, Alejandro Lemor, Jayanthi Sethunarayanan, Ahmadreza Moradi, Syed Adeel Ahsan, Seyedhamed Hosseinidehkordi, David Mariuma, Syed Haider, Felix Guerrero and Ranjan Ginde**

Icahn School of Medicine, USA

**Background:** Patient no-shows remain an important challenge in primary care medicine. The no-show rate at Ryan Network was negatively affecting the management and organization of provider schedules. Patients attending appointments as scheduled has been shown to improve healthcare outcomes and reduce emergency department visits. At Thelma-Adair Ryan Center, we implemented a new reminder system for scheduled appointments to give patients autonomy in managing their appointments in advance. We sought to explore if optimizing our appointment reminder system would increase patient show rate.

**Methods:** Prior to our intervention (January 2016–July 2016), patients received a reminder phone call or text two days before their scheduled appointment. In August 2016, we added an additional reminder 7 days prior to scheduled appointments patients received a reminder at two time points – seven and two days prior to their appointment. Reminders were based on previously expressed communication preferences; including language (Spanish or English) and mode of communications (call or text message). On every visit, patient's demographic details were revisited and phone numbers were updated. This allowed the patient to confirm, cancel or reschedule appointments via an automated system. If an appointment was made five or less days prior; patients received only one phone or text reminder at the two-day mark. Appointments made within 48 hours, including same day appointments did not receive any reminders.

**Results:** Results were collected pre- and post-intervention and divided into residents and preceptors. The no-show rate for residents during the pre-intervention and post-intervention were 27% (1,129 out of 4,175) and 26% (883 out of 3,356), respectively. The no-show rate for preceptors during the pre-intervention and post-intervention were 31% (745 out of 2,406) and 29% (454 out of 1564), respectively.

**Conclusion:** Patient no-show is a great burden to healthcare systems and cause worse health outcomes. Our no-show rates are in line with prior studies and our intervention did not impact the pre-intervention rate significantly. We suggest directing our efforts towards improving patient education and communication and exploring the feasibility of implementing patient navigator systems. Finding effective interventions to improve show rates may greatly impact patient outcomes and reduce a healthcare cost which is of utmost importance in vulnerable populations such as ours. Further studies are needed to test other types of interventions that effectively improve show rates in the primary care set-ting.

**Biography**

Alvaro J Ramos-Rodriguez is currently a Medical Resident Physician at the Icahn School of Medicine at Mount Sinai West. He is the author of the recently published textbook *Dermatology for the USMLE*. He has dedicated a major part of his medical career to teaching and helping students prepare for the USMLE, including teaching review courses. His interest in dermatology includes DRESS syndrome, toxic erythema of chemotherapy, atopic dermatitis, hidradenitis suppurativa, dermatomyositis, psoriasis and infectious skin disorders.

Alvaro.Ramos-Rodriguez@mountsinai.org

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