

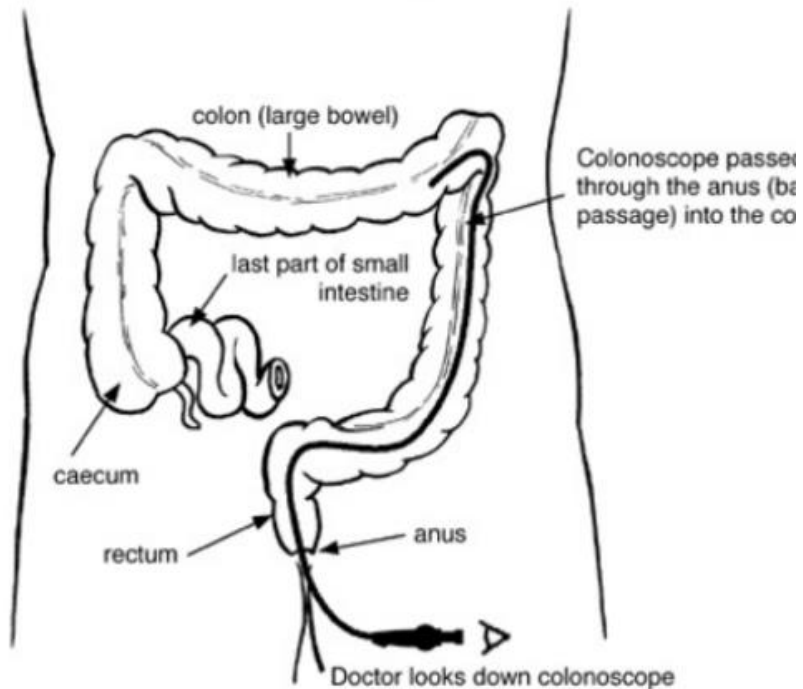
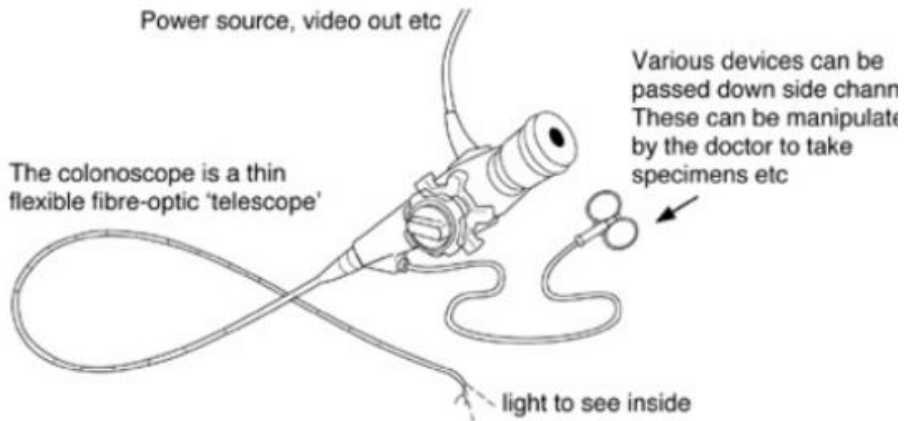
# Process Improvement Project: Patient Barriers to Colonoscopy at EVMS Surgery Dept.

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-MAXWELL WAGNER - EVMS MEDICAL STUDENT

-DR. REBECCA BRITT – PROJECT TEAM LEADER





**Colonoscopy is the examination of the colon (large bowel) using a flexible fibre-optic colonoscope**

# Introduction

- Colorectal cancer is the 3<sup>rd</sup> leading cause of cancer-related death in the United States
- More than 140,000 patients are diagnosed yearly
- Screening colonoscopy:
  1. Can lead to cancer detection at an earlier stage of disease
  2. Can be used to prevent future development of cancer by the detection of polyps that can be removed
- So what is the problem?
  - Despite prevalence of colorectal cancer and screening, approximately 1/3 of patients are not surveilled/screened properly

# Who cares?

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- The National Colorectal Cancer Roundtable Organization
  - Founded by the **American Cancer Society** and the **CDC**
- Why?
  - To address the lack of colorectal cancer screening in the United States.
- Their initiative:
  - **“80% by 2018” = Goal of having 80% of adults aged 50 and older screened by 2018**
- How?
  - Through education and outreach.
- Where we are currently:
  - EVMS ACC Clinic population remains significantly below the 80% goal.

# About the EVMS Ambulatory Care Clinic

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- What does it do?
  - Serves as a safety net clinic for the uninsured population
  - EVMS General Surgery clinic sees patients who are referred for screening and diagnostic colonoscopies from a variety of sources and referrals
- How does it work?
  - Patients are scheduled for colonoscopy at Sentara Norfolk General Hospital by EVMS Surgery
  - However, many of the patients do not show up the day of the procedure

# Project Plan and Objectives

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1. Review the scheduled colonoscopy patients for the EVMS Surgery physicians from 2013 to present
2. Identify and review the patients who did not show or cancel their appointments
3. Contact the patients who did not show for the appointment to ask the reason for their no-show
4. The patients contacted will be offered a follow up visit in the ACC Surgery clinic to attempt to reschedule the colonoscopy.
5. The data obtained will be used to better understand the limitations and barriers preventing our patient population from achieving the desired test.
6. Results will be used to streamline processes to better serve the patient population.

# Project Methods

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- ✓ Identify and review patients who cancelled or did not show for their colonoscopy
- ✓ Record and Analyze patients' data – specifically:
  - ✓ Gender
  - ✓ Age
  - ✓ Race
  - ✓ Insurance status
  - ✓ City of residence
  - ✓ Reasons for cancellation/no-show
  - ✓ Duration until next Colonoscopy (if rescheduled)
  - ✓ Previous CT status
  - ✓ Colonoscopy findings
  - ✓ BMI
  - ✓ Comorbidities
  - ✓ Smoking, Alcohol, and Drug Use History
  - ✓ Family History
  - ✓ PCP Status
  - ✓ Last ED Visit

# Demographics

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- Initial review of **25 EVMS ACC patients** with cancelled or no-show colonoscopies
- **Demographics**

<b>Age</b>	
< 50	4
50-64	18
> 65	3
<b>Avg Age</b>	54.68

<b>Gender</b>	
Female	8
Male	17

<b>Race</b>	
Black/African American	20
White	5

<b>City</b>	
Chesapeake	1
Norfolk	21
Portsmouth	1
VB	2

<b>Uninsured</b>	6
<b>Insured</b>	19

<b>PCP</b>	
Y	15
EVMS ACC	5
N	5

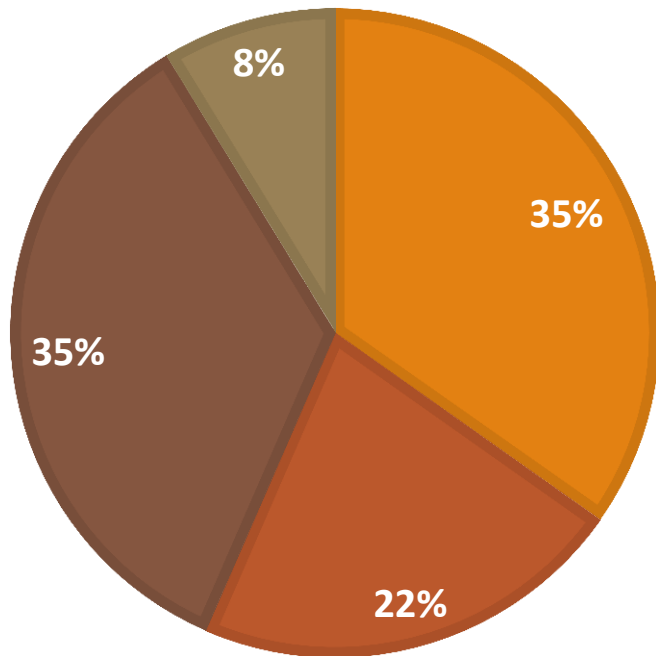
<b>Last ED</b>	
< 1-mo.	6
2-6 Mo.	9
> 6 mo.	10

# Demographics Cont'd

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## BMI

- Normal (18.5-24.9)
- Overweight (25-29.9)
- Obese (30-39.9)
- Morbidly Obese (>40)



<b>Hx Smoke</b>	18
<b>Non-smoke</b>	7

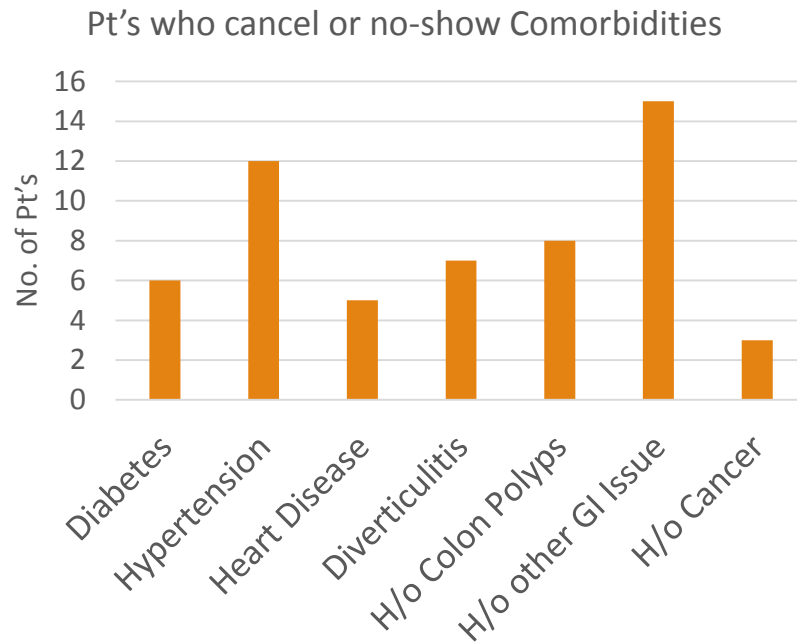
<b>Hx Alc</b>	15
<b>Non-Alc</b>	10

<b>Hx Drug Use</b>	7
<b>No Drug</b>	18

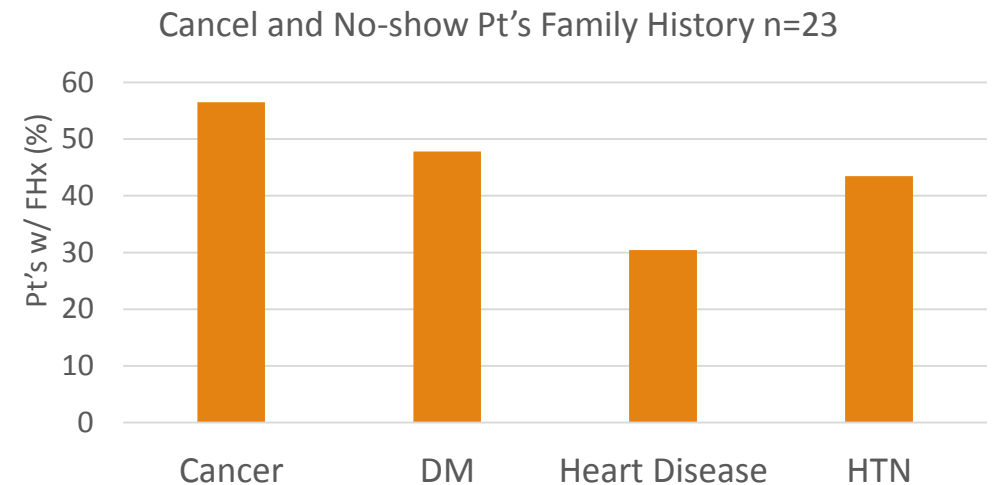


# Pt Demographics Cont'd

Comorbidities	
Diabetes	6
Hypertension	12
Heart Disease	5
Diverticulitis	7
H/o Colon Polyps	8
H/o other GI Issue	15
H/o Cancer	3



Family Hx	
Cancer	56.5%
Colon Cancer	4.3%
DM	47.8%
CAD	30.4%
HTN	43.5%



# Preliminary Results Cont'd

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## Colonoscopy Cancellations & No-Shows (N=25)

<b>Cx Pre-op</b>	11	<b>44%</b>
	Poor Bowel Prep	6
	Pt Issue (Chest Pain, etc.)	3
<b>No-Show</b>	6	<b>24%</b>
<b>Cx by Pt</b>	3	<b>12%</b>
<b>Other</b>	5	<b>20%</b>

## Time to Rescheduled Colonoscopy (N=11)

<b>Total</b>	11
< 1-mo.	5
1-6 mo.	2
< 6-mo.	2

# Preliminary Results from Remaining Pt's

- **Number of Encounters: 176**
- **Number of Pt's: 153**
- **20 Patients had >1 cancellation**

Reason	Number	Percent of Encounters
Patient No Show Day Of Surgery	31	18%
No Reason Provided	21	12%
Patient Illness	21	12%
No Prep	18	10%
No Ride Home	17	10%
Inadequate Prep	9	5%
Scheduling Error	9	5%
Weather/Traffic	8	5%
Date/Time/Location Inconvenient	7	4%
Insurance Wait Listed	7	4%
Patient Cancelled Case	6	3%
Patient No Show Pre-Op Workup	6	3%
Other	6	3%
Work	3	2%
Not NPO	2	1%
Court Date/Jury Duty	1	1%
Family Emergency	1	1%
Move to Another Day	1	1%
No Childcare	1	1%
Pregnancy	1	1%

# Preliminary Conclusions

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- EVMS ACC Surgery Clinic is well below the 80% goal for colorectal cancer screening by colonoscopy.
- Since 2013, the clinic has had over 200 scheduled colonoscopy procedures that were cancellations or no-shows for 178 patients.
- Initial chart review of 25 patients with an average age of 54.7, 8 females, 17 males was completed.
- Of these 200+ encounters, over 65% of the colonoscopies were no-shows (18%), no reason provided (12%), patient illness (12%), no prep (10%), no ride home (10%), and inadequate prep (5%).
- Chart review, phone interviews, and statistical analysis of the remaining 176 patients will shed more light on the patient population that have had a cancellation or no-show for their colonoscopy.