

No Show Rates in Clinic Patients

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Background

In the Academic Internal Medicine Clinic there have been considerable issues with the show rate with no clear source. According to one national study of primary care clinics, in-person appointment show rates have declined even though providers are more comprehensive. To improve show rates, we examined the appointment and de-identified patient data to assess for trends. The secondary end point of this project was whether there was a correlation between show rate and number of hospital visits.

Methodology:

Using a random number generator, a day in January, April, and July 2020 were chosen to collect demographic data on all patients, including age, sex, race, and insurance status. Chi-square and t-test analyses were used to evaluate distribution of the data for categorical and continuous variables, respectively. Correlation between categories and outcomes were analyzed using a binomial regression model.

Results

The p values for age, ethnicity, race, and sex were not statistically significant. The p value for morning vs afternoon was 0.010917, favoring morning clinic. For insurance and season, the overall difference was not significant. There is a correlation coefficient of 0.78 for show rate and ED visits, dropping to 0.62 when outliers were removed.

Discussion

Show rate in this sample was 53% which is well below the national average of 80%. No significant association was found between show rates and demographics like age, gender, ethnicity and race. However, there was a correlation between show rate and ED visits similar to the literature that shows primary care helps to reduce ED visits and hospital admissions. Higher no show rates occurred in the afternoon clinics and in the winter time, which may be an area to focus on improving through more investigation of what the causes are.