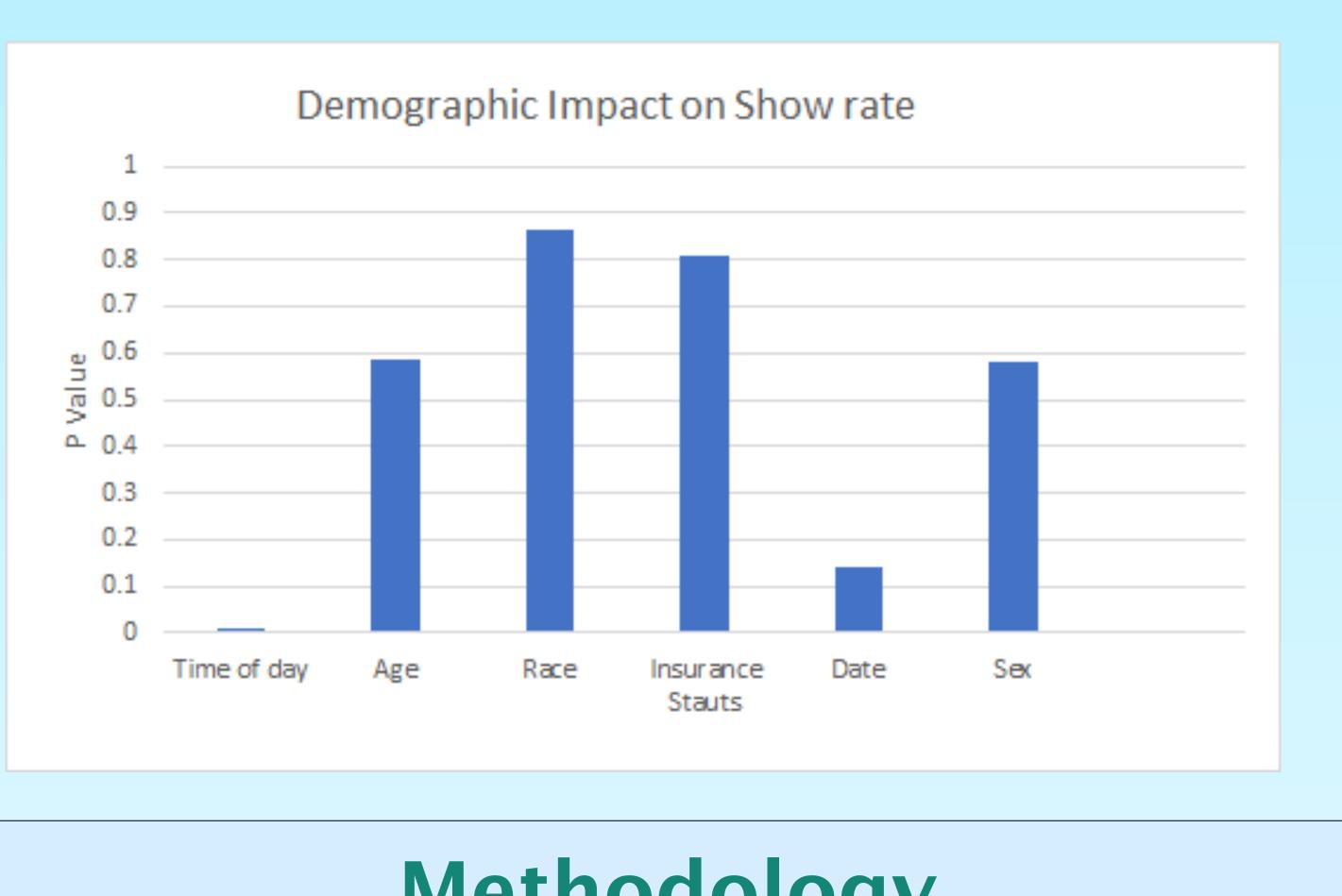
# No Show Rates in Clinic Patients Dana Bowen, MD, Mark Forsberg, MD, and Mukund Tiwari, MD, Dhvani Doshi, MD **Department of Medicine Research Day 2021**

## 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 time 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.

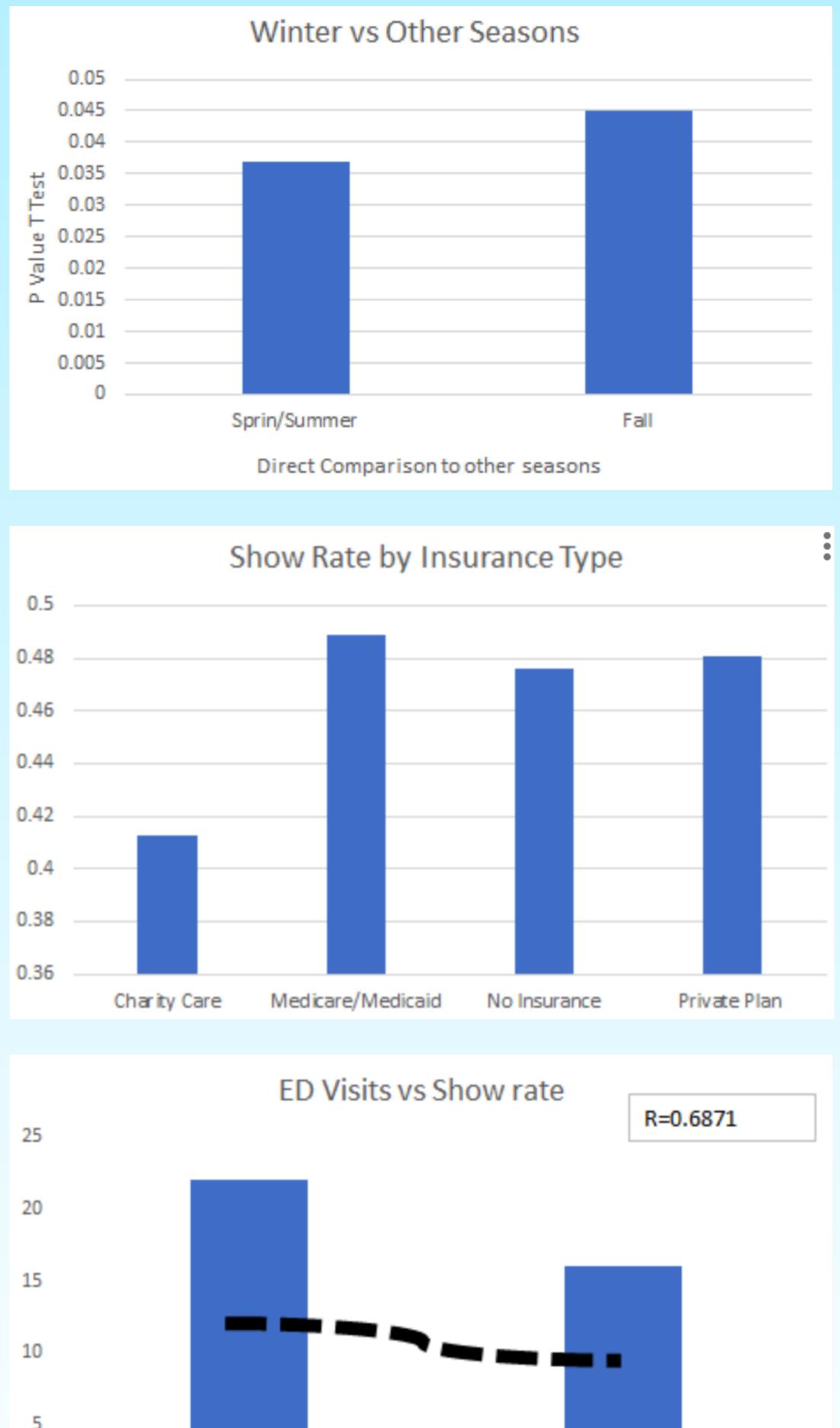


## Methodology

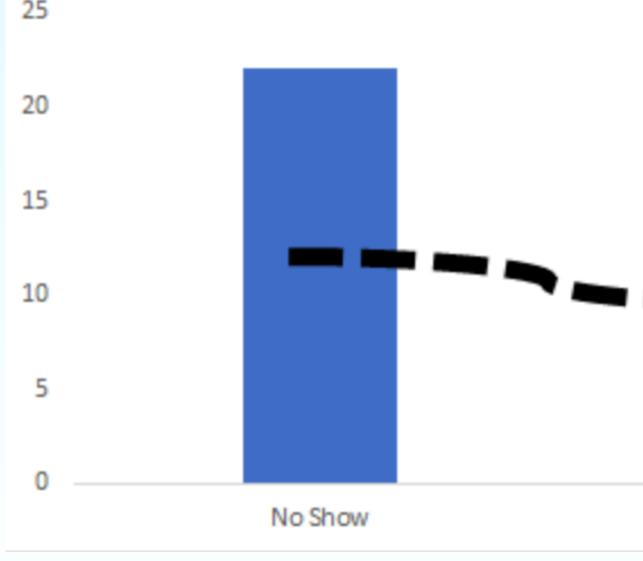
Using a random number generator, a day in January, April, and July 2020 were chosen to collect demographic data on all patients, including age, sex, race, and insurance status. Chisquare and t-test analyses were used to evaluate distribution of the data for categorical and continuous variables, respectively. 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.



Show



- more

- significant

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.



Rao A, Zhuo Shi, Ray KN, Mehrotra A, Ganguli I, Shi Z. National Trends in Primary Care Visit Use and Practice Capabilities, 2008-2015. Annals of Family Medicine. 2019;17(6): 538-544. doi:10.1370/afm.2474

• am pm chi-square statistic is 6.4787. The p-value is . 010917. The result is significant at p < .05. pm no show

• age The chi-square statistic is 1.0752. The p-value is . 584154. The result is not significant at p < .05. • race The chi-square statistic is 1.2883. The p-value is . 86335. The result is not significant at p < .05. • Insurance The chi-square statistic is 0.9803. The p-value is .806012. The result is not significant at p < .05. Insurance charity care has 0.068 almost statistically

• Date The chi-square statistic is 3.92. The p-value is . 14086. The result is not significant at p < .05 but 4/6/2020has a t value of 0.037 and 0.045 to other two • For sex The chi-square statistic is 0.3072. The p-value is .579429. The result is not significant at p < .05. • There is a regression R value of 0.78 for show rate and ed visits, this drops to 0.62 when outliers were removed

### Discussion

