Proper documentation of patient country of origin (pCOO) during new patient encounters by Internal Medicine Residents at the UH Ambulatory Care Center (ACC)
Jorge Robledo, Paul Delle Donna, Chris Jerome, Suzanne Atkin

Background: We propose that the documentation of Patient Country of Origin (pCOO) on initial patient encounters at the ACC is underreported, as this variable is not present on the "Demographics" tab on Epic nor is it included on the template for History & Physical Note for new patients. Proper documentation of pCOO can help us understand cultural determinants of health in our population and provide better patient-centered care.

Methods: Descriptive study from secondary data. Charts were randomly selected from a population of adult patients who presented as new patients to the ACC over the course of one and a half years (07/2019 – 12/2020). A sample size of 272 charts was calculated to ensure of 95% level of confidence.

Results: We reviewed 274 charts. The pCOO was documented in 35% (n=95) of the H&P notes from initial encounters. This percentage increased to 58% (n=159) on further chart review of notes written outside by healthcare providers outside the Internal Medicine ACC. Being a non-English speaker was associated with a higher chance of having the pCOO documented (76% vs 38%, p < 0.000). Ninety six percent (n=153) of the patients with pCOO documented were foreign-born. The most frequent regions of origin were Latin America (73%), Africa (11%) and the Caribbean (9%). The most frequent country of origin were Ecuador, Brazil, El Salvador, Mexico and Dominican Republic. It is also worth noting that almost a third (32%) of the patients without documentation pCOO did not label English as their primary language.

Conclusion: Our data show that a significant number of patients seen at the ACC as a new patient are foreign-born and their pCOO is underreported during first encounters. Possible interventions include the creation of an Epic smartphrase, pCOO inclusion in clinic H&P templates and the addition of this data into the Epic chart.