No Show Rates in Clinic Patients
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Background

In the Academic Internal Medicine Clinic, there have been considerable issues with the no-show rate with no clear source. According to one national study of primary care clinics, in-person appointment no-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. Chi-square and t-test analyses were used to evaluate the 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 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.

References