



The RAPP Sheet

Newsletter of the Research Association of Practicing Physicians

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Preliminary Results of the "Oh by the way" Study Are In!

Earlier this year, eighteen clinicians in northeast Ohio took part in a unique practice-based study.

Proposed by Jay Williamson, M.D. of Rootstown, the study looked at characteristics of outpatient visits which included an "oh by the way" problem, i.e., a problem or issue brought up by the patient after the clinician thought the encounter had ended.

Data were collected in March and April, 1999, using a card study methodology. Clinicians collected data about their "oh by the way" visits on brief data collection cards during three consecutive patient care days.

Preliminary results offer a number of insights into the nature of "oh by the way" visits (see table, page 4). "Oh by the way" problems arose in more than 10% of total visits to participating physicians. They were much more likely to arise during visits for acute and chronic illnesses, than in well care visits. The problems raised were more frequently related to chronic illness (44.4%) than to acute illness (21.3%), another family member's

problem (21.3%) or a psychosocial issue (13%).

Patients and physicians appear to have differing perceptions of the seriousness of the "oh by the way" problem, with patients demonstrating higher levels of concern. Physicians were highly likely to handle "oh by the way" problems themselves and to upcode the visit's charges to reflect the additional problem addressed.

Further analyses of the data are being conducted. Dr. Williamson will be lead author on an upcoming report of study findings.

The "oh by the way" study is RAPP's first using the card study methodology. It has been used in other practice-based networks as an easy and effective data gathering tool for patient-level studies requiring more than one practice.

If you have an idea for a card study, or for a more in-depth project, we encourage you to share it with us. Just complete the research prospectus on page 3 and return it to the RAPP office. ❖

Research Networks Join Forces

Twenty-four research networks from across the country, including RAPP, have come together to form The Federation of Practice-Based Research Networks. The group's goals are to:

- Help develop new and established networks;
- Serve as a communication link for networks, in order to encourage scientific and organizational collaboration;
- Provide a common voice for networks at the national level and increase support for practice-based research.

The Federation is currently working with the AAFP and the North American Primary Care Research Group (NAPCRG) to strengthen the support structure for practice-based primary care research in the United States. The Federation's Steering Committee, which includes Kurt Stange, MD, PhD, of Case Western Reserve University, will meet in November to address the Federation's future role in encouraging research in real-world practice. ❖

Making the Most of the World Wide Web

The World Wide Web can be a great source of information for both physicians and their patients. But, as many of us have discovered, the quality of medical web sites is highly variable.

At drkoop.com, a web site developed by former Surgeon General C. Everett Koop, sites devoted to medical and health care topics are rated according to criteria from the Health Information Technology Institute. These criteria, listed below, can be helpful to clinicians in recommending sites to patients or in selecting sites for their own use:

- *How credible is the content?* Look at sources used and context, currency, and relevance/utility of information. Also consider the credibility of the editorial review process.
- *How accurate and timely is the content?* Is there a hierarchy of evidence? Are original sources stated, disclaimers used, omissions noted?
- *Are the site's purposes and goals intuitive and clearly disclosed?*
- *How easily can the site be navigated?* Look at the architecture and content of links, back linkages and descriptions.
- *How is the overall design of the site?* Is it accessible and logically organized? Does it have an internal search engine?
- *How effective and intuitive are*

the user participation aspects of the site? This includes feedback mechanisms, chat rooms and other tailored interactive features.

With these criteria in mind, here are some sites to visit next time you're "surfing" the web:

General Resources

www.griffin.vcu.edu/~dimlist - "Primary Care Resources on the Internet" offers a wide range of medical links for patients and clinicians, including links for CME, medical informatics and evidence-based medicine.

www.medscape.com - A practice-oriented site for clinicians, includes journal article updates, medical meeting summaries and clinical management modules.

www.mayohealth.org - A patient-oriented site directed by physicians, scientists, writers and educators.

Research Information

www.ahcpr.gov - Agency for Health Care Policy and Research, offers information on research findings, funding opportunities, quality assessment, clinical information and more.

www.aafp.org - Learn about research grants and training offered by the American Academy of Family Physicians

www.nlm.nih - The National

Library of Medicine provides access to library services, databases (including Medline) and medical informatics.

Clinical Information

www.wonder.cdc.gov - CDC Wonder is a single point of access to a wide variety of CDC reports, guidelines and data.

www.headachecare.com - Information from a network of primary care providers about types of headaches, their treatment and prevention. ❖

JFP Seeks Tips from Practice

Do you have a special way to make a diagnosis? Or a unique method to accomplish a procedure? Have you found a different treatment that works well for your patients?

If so, *The Journal of Family Practice* wants to hear from you! *JFP* is looking for brief items from clinicians for its "Tips from Practice" section. Send your submissions, 100-500 words, double-spaced, to:

Jo Ann Rosenfeld, MD, Section Editor, *Journal of Family Practice*, Franklin Square Hospital Family Practice, 9101 Franklin Square Dr., Baltimore, MD, 21237, or e-mail to: joannero@helix.org .

Share Your Research Ideas!

RAPP studies range from large, NIH-funded projects to smaller, clinician-initiated studies. If you have an idea for a study of any size, and would like a research consultation, please complete the worksheet below and return to:

RAPP, c/o Family Medicine Research, 11001 Cedar Ave., #306, Cleveland, OH 44106, fax: 216-368-4348.

If you would like to discuss your study idea, call Kurt Stange, MD, PhD, at (216) 368-6297.

Research Association of Practicing Physicians (RAPP) Research Prospectus Worksheet

Name _____ Phone _____ E-mail _____

1. What is your research question?
2. What is already known (in the literature) on this question?
3. Who would be the subjects for the study (e.g., patients in your practice)?
4. What is the outcome variable for the study? How would it be measured?
5. How feasible is the study, in terms of money, time, effort, skills, etc?
6. Why is the study worth doing?

Research Association of Practicing Physicians
 Department of Family Medicine
 Case Western Reserve University
 10900 Euclid Avenue
 Cleveland, OH 44106-7136

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Editor:
 Kurt C. Stange, MD, PhD
Managing Editor:
 Robin S. Gotler, MA

Selected Characteristics of Outpatient Visits Involving an "Oh by the Way" (OBW) Patient Problem
 (n=105 visits to 18 physicians)

(See article, page 1)

	<u>Mean (sd) or %</u>		<u>Mean (sd) or %</u>
Patient age (years)	44.6 (22.0)	Seriousness of the OBW problem (%)	
Patient sex (%)		Very serious	0.0
Male	42.6	Serious	8.3
Female	57.4	Somewhat serious	43.5
# of problems addressed in visit	3.3 (5.9)	Not at all serious	48.1
Main reason for visit (%)		Patient's level of concern about the OBW problem (%)	
Acute illness	43.4	Very concerned	7.4
Chronic illness	42.5	Concerned	29.6
Well care	10.4	Somewhat concerned	56.5
Other	3.8	Not at all concerned	6.5
Nature of the OBW problem (%)		Billing of the OBW problem	
Acute illness	21.3	No charge	15.7
Chronic illness	44.4	Upcode charges for current visit	81.5
Psychosocial	13.0	Charge for a separate visit	2.8
Other family member's problem	21.3	Handling of the OBW problem	
Duration of direct patient contact	16.5 mins (6.0)	Scheduled another visit	14.8
Time spent on OBW problem	4.0 mins (3.1)	Referred to office staff	3.7
		Referred to another physician	5.6
		Handled directly	72.2
		Other	3.7