

Abstract: Bone Mineral Density (BMD) screening is crucial for osteoporosis detection, yet its utilization remains low despite USPSTF recommendations. Quality improvement project at the Family Medicine Clinic aimed to assess and improve BMD screening rates through DEXA scans among women aged 65 and older, particularly in an urban clinic serving a predominantly African American population with multiple comorbidities. A retrospective chart review from September to October 2023 revealed screening rates of 56.0% and 61.8%, respectively. Interventions, including educational sessions on USPSTF guidelines and reminder posters, were implemented. Post-intervention analysis in March and April 2024 showed increased screening rates of 72.7% and 66.5%. This project demonstrates that targeted educational interventions and reminders can significantly enhance osteoporosis screening rates in high-risk populations.

Purpose: Improve screening for osteoporosis and osteopenia with DEXA scans in women age >65 by 10% in the Urban Family Medicine Outpatient Resident Clinic at a large academic hospital (CMC) serving a majority African American population with multiple co-morbidities after 3 months of interventions with poster placement and educational sessions

Methods:

Pre-intervention (Phase I):

Retrospective chart review (9/2023 - 10/2023) for DEXA orders/completions in women ≥ 65 .

Intervention (Phase II):

Education on USPSTF guidelines during didactics.

Placement of reminder posters.

Protocol implementation: Annual physicals include DEXA order for women ≥ 65 without prior screening.

Post-intervention (Phase III):

Chart review (3/2024 - 4/2024) orders/completions in women ≥ 65 .

Improving Osteoporosis Screening in Primary Care Practice at UH CMC

Results:

Pre-Intervention:

- September 2023: 56.0% screened (75/134).

Pre-Intervention				
Month	September 2023	October 2023	Total	
Eligible	134	152	286	
Screening ordered	75	94	169	
Screening not ordered	59	58	117	
%Screened	56.0%	61.8%	59.1%	

Post-Intervention:

Post-Intervention			
Month	March 2023	April 2023	Total
Eligible	165	194	359
Screening ordered	120	129	249
Screening not ordered	45	65	110
%Screened	72.7%	66.5%	69.4%

for DEXA

Rajiev Hallock, M.D.

October 2023: 61.8% screened (94/152).

March 2024: 72.7% screened (120/165). April 2024: 66.5% screened (129/194).

Conclusions:

Osteoporosis: High prevalence requires routine screening to prevent fractures. Interventions: Education reminders and may enhance screening rates.

Standardized Process: Promotes early identification and treatment of at-risk individuals.

Limitations:

Data Gaps: Some external screenings may not appear in EMR.

Population Scope: Excludes postmenopausal women <65, and males at increased risk of Osteoporosis/Osteopenia.

Risk Factors: Screening challenges for certain risk factors (e.g., smoking, alcohol intake, family history of fractures).

Future Directions:

Incorporate FRAX Tool: Integrate into EMR for younger postmenopausal women and males with high risk factors

Management Training: Provide education on DEXA results follow-up and interventions.

Screening completion: Implement measures to ensure ordered DEXA scans are completed and eliminate potential hurdles

> Scan QR Code for a video reviewing the details of this project



