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Differences in care for e-visits, office visits for sinusitis, UTI

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For patients with sinusitis or urinary tract infection, follow-up is similar following office visits or e-visits, but antibiotics are more likely to be prescribed and preventive care is less likely with e-visits, according to a research letter published in the Jan. 14 issue of *JAMA Internal Medicine*.

(HealthDay)—For patients with sinusitis or urinary tract infection (UTI), follow-up is similar following office visits or e-visits, but antibiotics are more likely to be prescribed and preventive care is less likely with e-visits, according to a research letter published in the Jan. 14 issue of *JAMA Internal Medicine*.

Ateev Mehrotra, M.D., of the University of Pittsburgh School of Medicine, and colleagues compared the care at e-visits and office visits for sinusitis and UTI using data from all office and e-visits for these two conditions at four primary care practices within the University of

Pittsburg between January 2010 and May 2011.

The researchers found that e-visits comprised 9 percent of the 5,165 visits for sinusitis and 3 percent of the 2,954 visits for UTI. At e-visits, physicians were significantly less likely to order a UTI-related test (8 versus 51 percent), while few sinusitis-relevant tests were ordered at office visits or e-visits. There was no significant difference in follow-up for office visits or e-visits, for either condition. For both conditions, physicians were more likely to prescribe an antibiotic at an e-visit, but they were less likely to order preventive care. Of the patients who had an e-visit, 50 percent of those with subsequent episodes of sinusitis or UTI had an e-visit.

"Our results highlight key differences between office visits and e-visits and emphasize the need to assess the clinical impact of e-visits as their popularity grows," the authors write.

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