

Simple online methods increase physician disease reporting

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A study by Temple University's Lawrence Ward, M.D., M.P.H., found that simple methods, including PDA programs, increased physician disease reporting. Credit: Ryan Brandenburg, Temple University

With emerging diseases like the West Nile Virus, and re-emerging diseases such as the pandemic flu and drug-resistant tuberculosis, it's increasingly important to promptly detect a potential infectious outbreak within a community. But public health officials can't act quickly unless physicians report the diseases.

“Quick reporting by several physicians, all acting independently, allows the public health authorities to promptly recognize a pattern and take the necessary action to contain the disease by isolating and treating cases, quarantining affected groups and taking other measures to hopefully

prevent a wider outbreak,” said Temple University physician Dr. Lawrence Ward, MD, MPH, FACP.

Ward led a study published in the January issue of the Journal of Public Health Management and Practice that found simple and cost efficient methods such as e-mail reminders, an informational web site, and a program for handheld devices significantly increased spontaneous reporting by physicians.

“Currently, few physicians report diseases to public health authorities. They either don’t know the methods for reporting, or the specific conditions that are required by law to be reported. Public health officials also do not adequately communicate the vitally important role played by practicing physicians, as frontline agents of public health, in the identification of new disease patterns and the importance of prompt reporting,” Ward said.

The study involved clinicians associated with all hospitals in Philadelphia County, Pa. The study comprised a 24-week baseline period (Jan. 18, 2004–July 3, 2004) and a 24-week intervention period (Jan. 16, 2005–July 2, 2005). Researchers selected five hospitals for the intervention group, while the control group consisted of the 23 other hospitals located within Philadelphia County.

The intervention group received e-mails directing readers to a web site that listed all reportable conditions with instructions on how to report to authorities. The site also allowed doctors to download a program onto their handheld devices that would make this information easily accessible and help facilitate reporting to the Department of Public Health.

During the intervention period, the e-mails were distributed three times, each reaching in excess of 16,500 individuals. There were a total of 886

visits to the web site, 207 downloads of a poster of reportable diseases, 130 downloads of the handheld device reporting program, and 122 downloads of the Philadelphia Department of Public Health case report form. From the baseline to the intervention period, there was a mean increase of 5.6 reports in the intervention group and a mean decrease of 3.0 reports in the control group.

“The difference between the two groups was significant and supported the protocol as a way to increase reporting among clinicians,” Ward said. “Using the internet had not yet been studied. Past studies have examined costly, time-intensive and unsustainable methods to increase reporting such as newsletters and mailed reminders.”

In contrast to other methods studied, Ward and his colleagues believe their method is affordable and sustainable, with a format that’s easily understood by today’s internet-savvy clinician. They estimate that only 26 hours of person-time and \$350 were used in developing the internet page, handheld computer program and e-mail memorandums, not including the cost of establishing and maintaining the underlying hospital web site.

Despite the promising results, more work lies ahead for Ward in educating clinicians about the importance of reporting diseases. A review of the disease coding data strongly suggests significant underreporting, even in the intervention hospitals used for this study, he said.

Reasons for physician underreporting are numerous. Some physicians incorrectly believe that if a laboratory reports a disease, they are not required to do so as well. Many physicians also incorrectly believe that reporting would violate HIPAA, or patient privacy regulations, he added.

Ward encourages clinicians to sign up to use an online reporting system,

already used by labs, from the state of Pennsylvania called PA-NEDSS (<https://www.nedss.state.pa.us/nedss>).

Source: Temple University

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