

# Electronic tracking system can improve follow-up after an abnormal Pap test

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Researchers from Boston University School of Medicine (BUSM) report that physicians who use an automated, electronic medical record (EMR) tracking system to follow-up on patients with an abnormal Pap test could increase the number of women who achieved diagnostic resolution and have women achieve resolution in less time than using traditional methods. These findings appear in the *Journal of General Internal Medicine*.

Screening for [cervical cancer](#) with a Pap test is only as successful as the follow-up rate for an abnormal result. If a patient has a Pap test, yet does not receive appropriate follow-up for an abnormal result, then the opportunity to prevent or treat pre-cancerous lesions or cervical cancer is missed and the Pap test is ineffective.

The advent of tracking systems provides great potential to address inadequate follow-up on a systemic level. "We developed a tracking system for our internal EMR, and evaluated this tracking system as an intervention to improve adequate follow-up of abnormal Pap tests," said lead author Elizabeth Dupuis, MD, from the Section of General Internal Medicine in the Department of Medicine, and the Women's Health Interdisciplinary Research Center at BUSM.

The BUSM researchers compared abnormal Pap test follow-up rates for the 24 months prior to implementing the tracking system with rates 12 months after its implementation. The evaluation monitored all subjects for 12 months from the date of their abnormal Pap test through

diagnostic resolution. Controlling for type of abnormality and practice location, the adjusted time to resolution decreased significantly from 108 days prior to implementing the tracking system to 86 days after implementation.

"Although our study could not demonstrate that with this system we directly avoided cases of invasive cervical cancer, we did show that in an at-risk urban population, an automated, EMR-based tracking system reduced the time to resolution, and increased the number of women who achieved diagnostic resolution," added Dupuis. "Most EMRs in use today do not have such tracking systems developed. Our data suggests that such systems can improve patient safety and patient care."

The researchers believe a combination of both systems and patient barriers impede adequate abnormal Pap test follow-up. Patient barriers include difficulty in keeping follow-up appointments, limited understanding of the significance of the abnormality and other life-issues taking priority. Systems barriers include failure of the provider to be aware of an abnormal result, and limited capability to systematically track patients who do not keep follow-up appointments. "Our program addressed the systems barriers by giving providers tools to allow them to more easily track subjects after an abnormal [Pap test](#). Our higher baseline follow-up rates may already reflect some of the benefits of an EMR system; however, delays persisted without a [tracking system](#)," said Dupuis.

Provided by Boston University Medical Center

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