

# Screening rates down with increasing patient panel size

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(HealthDay)—The number of patients under a primary care physician's

care (panel size) correlates with cancer screening, continuity, and comprehensiveness dimensions of care, according to a study published in the January/February issue of the *Annals of Family Medicine*.

Simone Dahrouge, Ph.D., from the University of Ottawa in Canada, and colleagues conducted a cross-sectional, population-based study encompassing 4,195 physicians with panel sizes  $\geq 1,200$  serving 8.3 million patients. Data covered 16 quality indicators spanning five dimensions of care.

The researchers found that as panel size increased (from 1,200 to 3,900), the likelihood of being up-to-date on cervical, colorectal, and breast cancer screening showed relative decreases of 7.9, 5.9, and 4.6 percent, respectively. No significant associations with panel size were seen for eight chronic care indicators (four medication-based and four screening-based). Higher panel size was associated with a relative increase of 8.1 percent in the likelihood of individuals with a new diagnosis of [congestive heart failure](#) having an echocardiogram (P

"Increasing panel size was associated with small decreases in [cancer screening](#), continuity, and comprehensiveness," the authors write.

**More information:** [Full Text \(subscription or payment may be required\)](#)

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