

# Distress screening tied to fewer ER visits for cancer patients

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(HealthDay)—Adherence to distress screening protocols by cancer

programs is associated with lower rates of medical service utilization, according to a study published in the July issue of the *Journal of the National Comprehensive Cancer Network*.

Brad Zebrack, Ph.D., M.P.H., from the University of Michigan School of Social Work in Ann Arbor, and colleagues reviewed [electronic health records](#) (EHRs) at Commission on Cancer-accredited [cancer](#) programs during a two-month period. They assessed rates of overall [adherence](#) to a prescribed distress screening protocol based on EHR documentation of screening adherence and an appropriate clinical response.

Based on review of 8,409 EHRs across 55 cancer centers, the researchers found that the overall adherence rate to screening protocols was 62.7 percent. Community Cancer Programs had the highest rates of adherence (76.3 percent), while the lowest rates were in National Cancer Institute-designated Cancer Centers (43.3 percent). When overall protocol adherence was lacking, the rates of medical service utilization were significantly higher than expected. Risk ratios were lower for emergency department use and hospitalization (0.82 and 0.81, respectively) when overall protocol adherence was documented, after controlling for patient and institutional characteristics.

"The observed associations between a mandated psychosocial care protocol and medical service utilization suggest opportunities for operational efficiencies and costs savings. Further investigations of [protocol](#) integrity, as well as the clinical care models by which psychosocial care is delivered, are warranted," the authors write.

**More information:** [Abstract](#)  
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