



Introduction

- Open access colonoscopy (OAC) refers to screening colonoscopies ordered by primary care providers (PCP) without a specialist's evaluation.
- In our institution, referral candidacy is based on specific parameters including a PCP visit within 6 months, controlled chronic conditions, normal laboratory values, and no gastrointestinal (GI) complaints.
- All referred patients are reviewed by a nurse, and patients that do not meet these criteria are considered rejected from OAC.
- OAC is currently challenged by inappropriateness of referrals and low follow-up rates.

Aim

- Assess the rate of inappropriate OAC referrals, effectiveness of OAC, and identify most common reasons for rejection.

Methods

- Retrospective study, conducted at a large tertiary care center.
- All patients referred to OAC in October 2020 were included and a random sample of 200 patients was selected for chart review.
- Data collected includes demographics, comorbidities, date of approval/rejection, reasons for rejection, and rates of colonoscopy completion.

Results

- Of the 200 patients reviewed, 1 was removed due to incomplete data. A total of 199 patients were included in final analysis.
- 114 (57%) patients were approved for OAC, of which 63 (55%) completed their colonoscopies with a mean of 121 days post approval (SD=107, range 5-498 days).
- A total of 85 (43%) were rejected from OAC. The most common reasons for rejection are listed in Figure 2.
- Among the 85 rejected patients, only 31 (36.5%) followed up with GI/PCP, of whom 21 (24.7%) underwent a colonoscopy.
- There were no significant differences between the accepted and rejected groups regarding age, gender, ethnicity, or insurance.

Results

Figure 1. OAC referral workflow

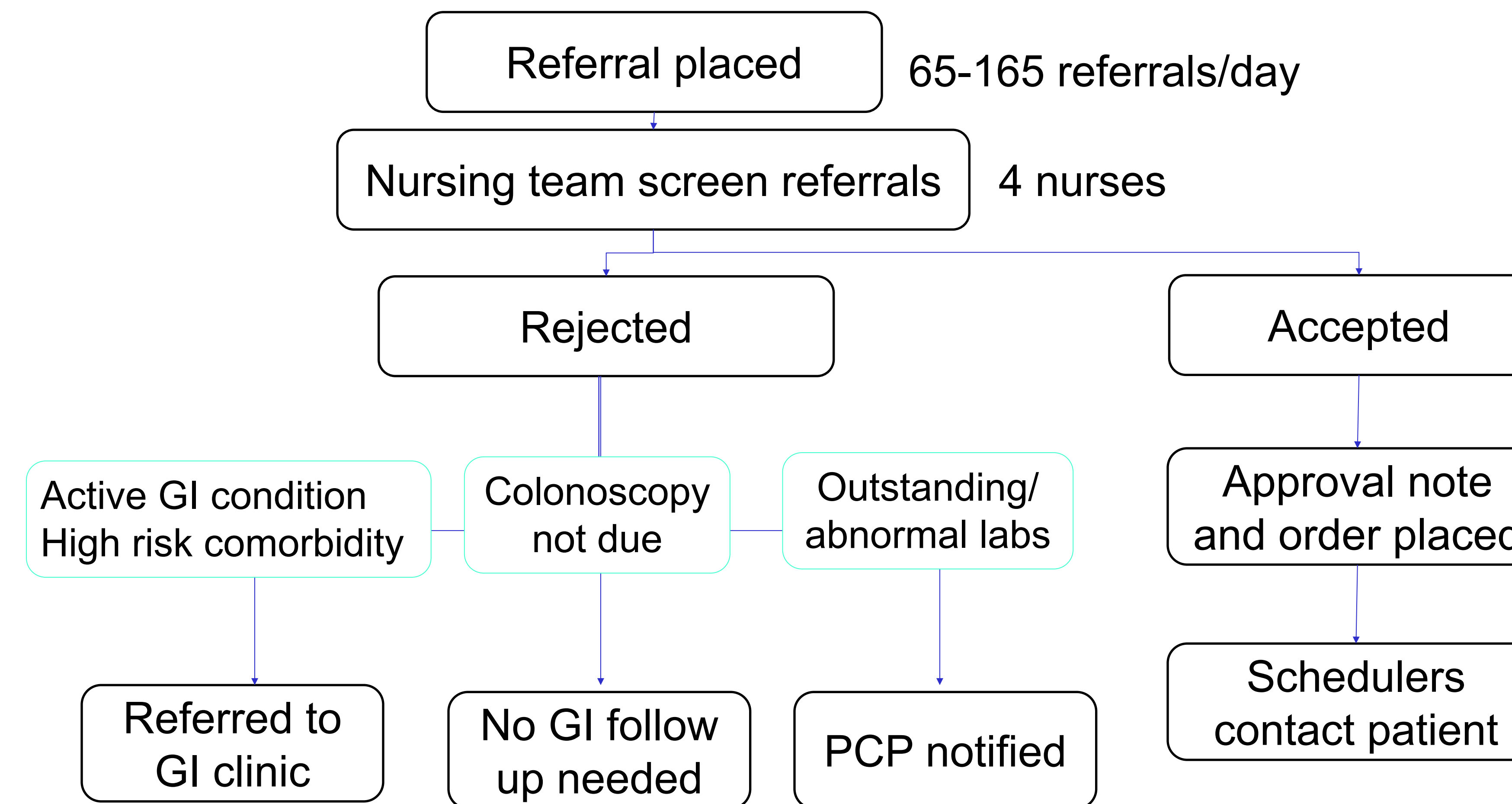
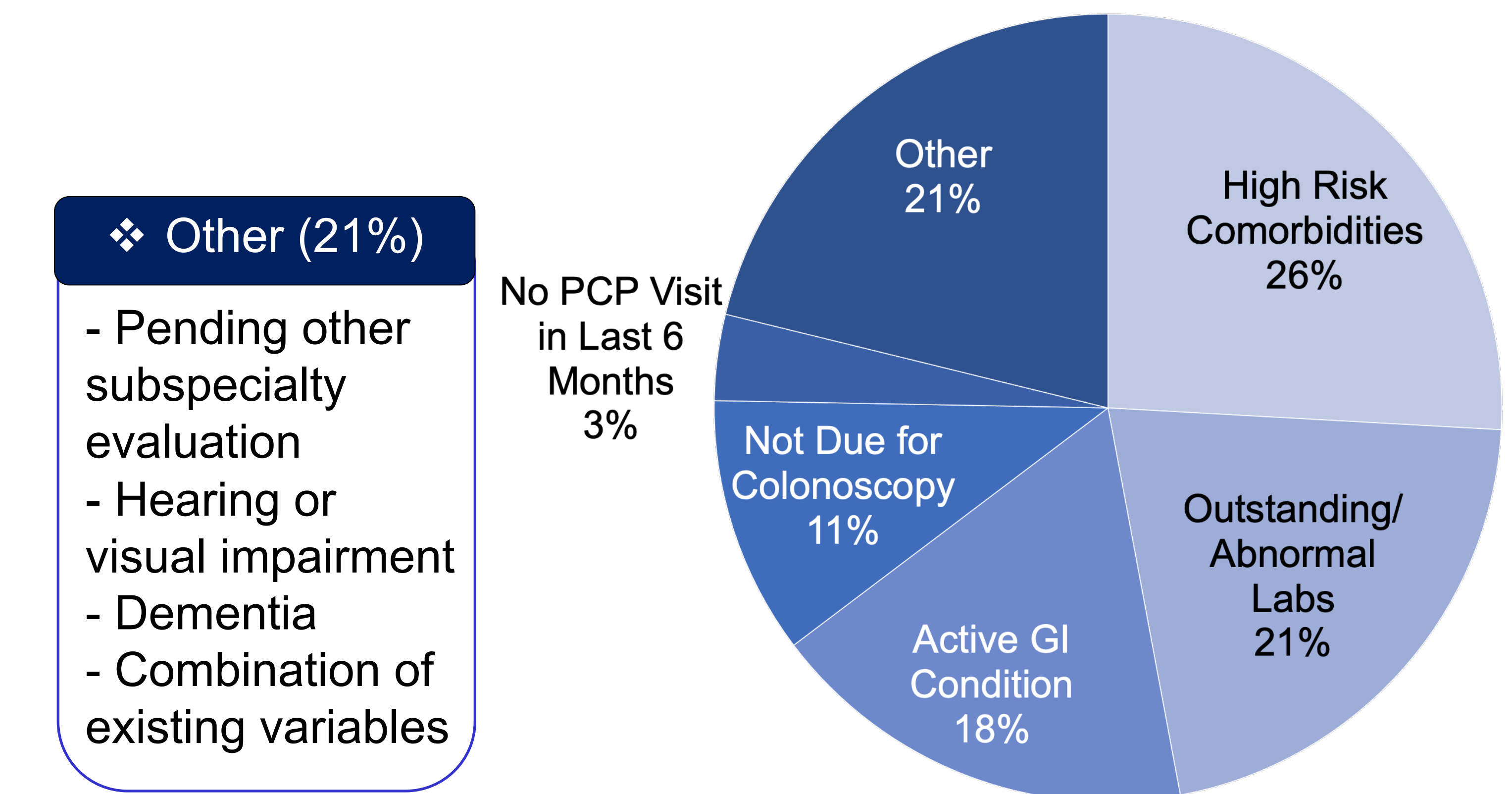


Table 1. Summary of patient demographics and OAC data

Variables		All Patients (N=199)
Age	(Mean)	61
Gender	Female	98 (49%)
	Male	101 (51%)
Race	White	N (%) 79 (44%)
	African American	86 (48%)
	Other	16 (9%)
Approved OAC referrals	Approval rate	114 (57%)
	Colonoscopy completion rate	N (%) 63 (55.3%)
	Duration between OAC approval and colonoscopy completion	(Mean Days) 121
Rejected OAC referrals	Rejection rate	85 (43%)
	Colonoscopy completion rate	N (%) 21 (25%)
	Duration between OAC rejection and colonoscopy completion	(Mean days) 130

Results

Figure 2. Reasons for referral rejection



Conclusion

- Our study revealed that OAC continues to be significantly burdened by the high rate of inappropriate referrals that lead to delays in patient care and increased resource utilization.
- Rejected patients have low follow up rates and lower colonoscopy completion rates. The duration to procedure completion also remains significantly delayed regardless of approval status with a mean of 121 and 130 days for approved and rejected referrals respectively.
- Potential factors burdening the referral system besides inappropriate referrals may include the Covid pandemic as well as the change in screening guidelines to age 45.
- Utilizing those findings, we have initiated a quality improvement project involving a best practice alert that notifies providers if a patient meets any of the following parameters.
- As OAC use continues, future studies should assess the efficacy of various interventions targeting current flaws in the referral process.

References

1. Glenn M. Eisen, M., Todd H. Baron, MD, Jason A. Dominitz, MD, Douglas O. Faigel, MD; Jay L. Goldstein, MD; John F. Johanson, MD; J. Shawn Mallery, MD; Hareth M. Raddawi, MD and M.J.P.W. John J. Vargo, MD; Robert D. Fanelli, MD, SAGES Representative; Jo Wheeler; Harbaugh, RN, SGNA Representative, Open access endoscopy, standards of practice. American Society For Ga.