



Developing an Incontinence Care Pathway: Environmental Scan of MCW Primary Care Clinics

Marie C Luebke MHS¹, Joan M Neuner MD¹, Sarah Marowski BS¹, Emily RW Davidson MD¹,
R Corey O'Connor MD¹, Kathryn E Flynn PhD¹

¹Medical College of Wisconsin

BACKGROUND

- 50% of adult women report at least one episode of urinary incontinence (UI)
- Only 25% of affected patients seek care and less than half receive treatment
- There are no primary care society guidelines for diagnosis of UI
- Urology and urogynecology professional guidelines include urinalysis and post void residual tests in their diagnostic workup
- Both urology/urogyn and an AHRQ systematic review recommend behavioral treatment be 1st line

METHODS

- Interviews conducted by two trained medical students with clinic managers from 21 of the 24 primary care clinics within the MCW network (established female patients n =157,000)
- Interview guide developed by the multidisciplinary team
- Interview guide covered clinic structure, availability of diagnostic tools (screening questionnaires, bladder ultrasound, urinalysis), and clinic resources
- In the event the clinic manager did not know the answer to a question, a lead RN, MA, or other clinic staff was consulted
- Copies of patient physical and new patient questionnaire forms were collected

PURPOSE

We aim to develop a guideline-based UI care pathway that integrates primary and specialty care. To understand the context for this intervention, we conducted an environmental scan to assess the practice availability of technology and other key pathway resources in the primary care setting

INTERVIEW RESULTS

Incontinence Screening



66% of clinics interviewed used a patient intake form which included one question that screened for urinary frequency or UI



33% of clinics interviewed didn't use any intake forms and thus had no standardized UI screening

Diagnostic Tools

66% of clinics interviewed did not have working bladder ultrasound located in clinic



19% of clinics interviewed did not have point of care urinalysis



Treatment Availability



86% of clinics interviewed did not have on-site pelvic floor physical therapy

CONCLUSIONS

- A third of clinics do not routinely screen for UI
- Most clinics have point of care urinalysis
- Most clinics do not have bladder ultrasound so physicians wouldn't be able to meet guidelines that require a post void residual
- Few clinics have pelvic floor physical therapists on-site

NEXT STEPS

- Conduct semi-structured interviews with primary care providers to further inform implementation of a UI care pathway
- Clear primary care screening and diagnostic guidelines could add clarity to primary care clinic needs and capacity to initiate UI management
- Access to specialty services and other ways to deliver behavioral treatment needs continuing study

ACKNOWLEDGMENTS

This research was funded by
NIDDK P20 DK127511

Icons from Justin Blake, Lina, Ralf Schmitzer, Eucalypt, and gzz
from the Noun Project