



# Navigated Intake for Pelvic Pain: Improved Care for the Patient ... and Provider (602)



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## Objectives

Patients with **complex pelvic pain** experience multiple barriers to care given the know-how, individualized coordination, and time required to truly address their needs. From the provider perspective, these complex patients often need time out-of-proportion to reimbursement, thereby crowding the remainder of the day or spilling into personal time. **Burnout may impact willingness to treat this population** (1,2).

## METHODS

In 2015 Albany Medical Center launched a low-budget, **multidisciplinary pelvic pain program involving 11 specialties**. Pelvic pain referrals were intercepted by a shared nurse navigator. She 1) screened need for concurrent consults 2) stewarded completion of extensive intake data (presenting symptoms, medical history, validated measures, and trials of therapy), and 3) acquired medical records. All data was input into a custom extractable EMR build by a scribe prior to provider contact. To evaluate the program, we sent an **IRB-approved non-anonymous provider questionnaire regarding improved ease of management, time saved, and perceived patient benefit**.

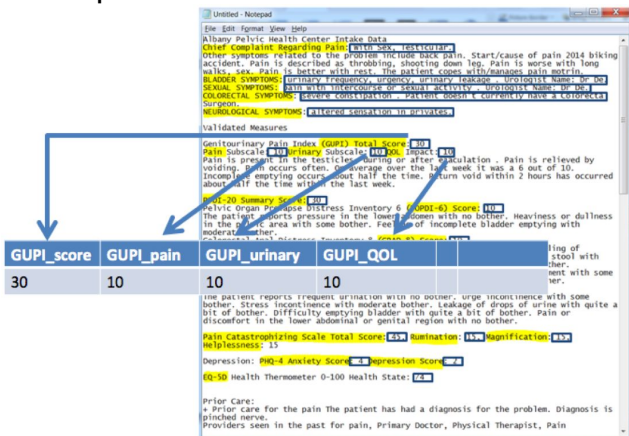


Figure 1: Pre-populated clinical note containing extractable data for research is provided to all providers in line of care.

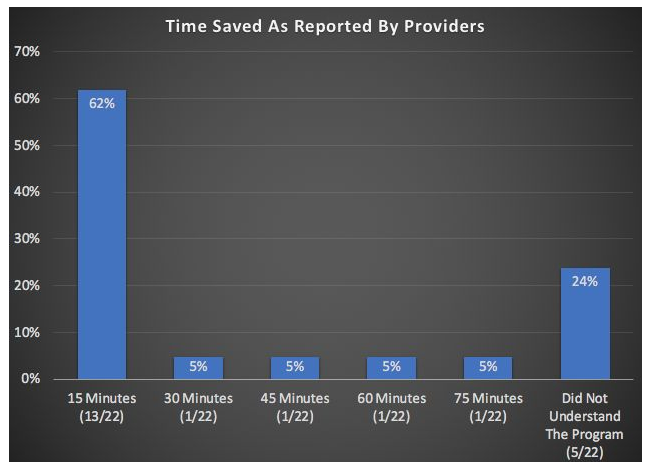
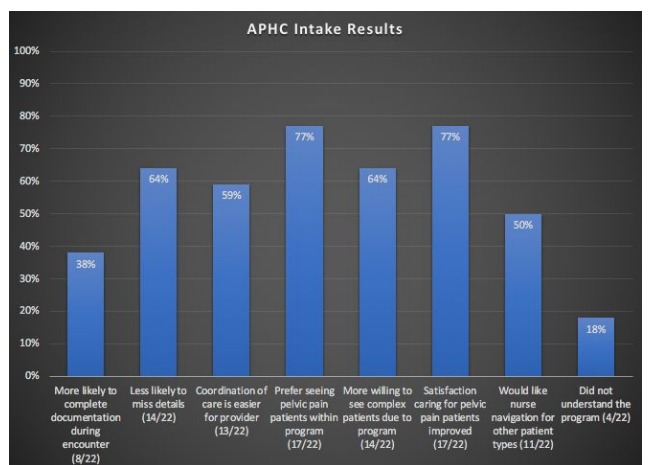
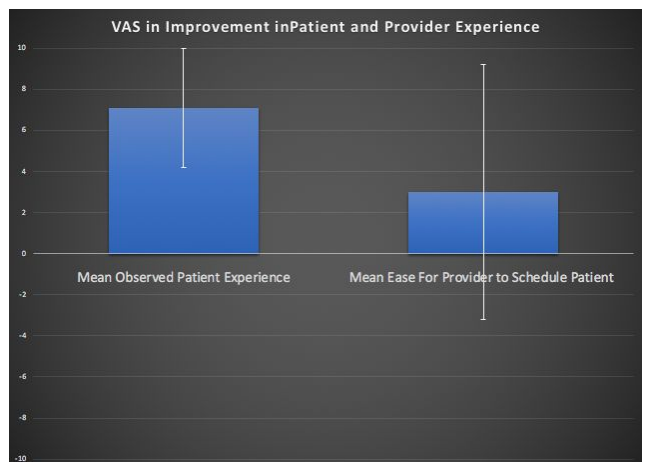
## BUDGET

Table 1: 2017 Financial Balance Sheets	
<b>Salaries and Consumables</b>	
Physical Therapist Salaries (3)	207,167
Administrative Support (1.5 FTE) + Nurse navigator (0.5FTE)	100,696
Benefits (19.16%)	58,986
Transcriptionist	1,200
Annual Medical Supplies	8,400
Continued Medical Education 2017	6,000
Rent and Heat	20,000
<b>Total Annual Expenses 2017</b>	<b>\$402,449</b>
<b>Startup Costs, Amortized over 3 years</b>	
Information Technology Build (\$9,000)	3,000
Startup expenses 2015 (mat, equip, computer, etc. = \$22,500)	7,500
Capital Purchase 2015 (Biofeedback Machine – 22,000)	7,333
<b>Amortized startup costs 2017</b>	<b>\$17,833</b>
<b>Revenue</b>	
Billable Volume 2017 of Physical Therapists	2,170,431
<b>Estimated Revenue Collected</b>	<b>\$455,791</b>
<b>Estimated Profit/Loss</b>	
<b>Direct Costs Plus Amortized Startup 2017</b>	<b>+\$35,509</b>

## REFERENCES

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- Shanafelt TD, Balch CM, Bechamps G, Russell T, Dyrbye L, Satele D, Collicott P, Novotny PJ, Sloan J, Freischlag J. Burnout and medical errors among American surgeons. Ann Surg. 2010;251(6):995-1000.
- Clark TS. Interdisciplinary treatment for chronic pain: is it worth the money? Proceedings (Baylor University Medical Center). 2000;13(3):240-243.

## RESULTS



## CONCLUSIONS

The program presented in this report is an outside-the-box, low capital, budget neutral, common-sense program designed to address two major issues impacting provider satisfaction: 1) provider fatigue and 2) the ability to take pride in high quality care. In addition, an academic database was built inherent to the clinical data. Overall, the majority of providers reported improved ease, time saved, thoroughness, satisfaction, and willingness to see these complex patients, as well as the perception that the program improved care of the patients. Comprehensive financial analysis of the program and patient reported outcomes are underway and will be reported in the subsequent analyses.

## ACKNOWLEDGMENTS

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