



Effectiveness of Inflammatory Arthritides Educational Modules and Potential for Improved Referral Times

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Background

- Early diagnosis and treatment of inflammatory arthritides are associated with improved patient outcomes
- Primary care physicians and other referring providers express low levels of confidence in recognizing early inflammatory arthritides which can result in delayed rheumatology referrals
- Educational modules in rheumatoid arthritis (RA), psoriatic arthritis (PsA), and ankylosing spondylitis (AS) were created to address this knowledge gap, with the aim of improving the referral process and decreasing wait times to be seen by a rheumatologist

Methods

- Ongoing single-center quality improvement project at the University of Rochester Medical Center (URMC)
- Panel of experts, including two rheumatologists, one nurse practitioner, and two primary care physicians, created the educational modules
- Educational modules had the following goals:
 - How to identify early manifestations of RA, PsA, and AS
 - Benefits of early diagnosis and treatment
 - Early clinical care and treatment strategies
 - Contact information for rheumatology referrals
- Online surveys after each module to evaluate whether the modules increased the provider’s knowledge and competence and perceptions of improvement in provider’s performance and patient outcomes

Figure 1: Survey Example

Activity Evaluation Form

Inflammatory Arthritis: Psoriatic Arthritis Essentials for the PCP

How would you rate the overall quality of this activity?

Excellent

Good

Fair

Poor

☐ 4

☐ 3

☐ 2

☐ 1

Please rate the impact of the following course objectives:

As a result of attending this activity, I am better able to:

Strongly Agree

Agree

Disagree

Strongly Disagree

Define the epidemiology and disease characteristics of Psoriatic arthritis.

☐ 4

☐ 3

☐ 2

☐ 1

Recognize the signs and symptoms of Psoriatic arthritis.

☐ 4

☐ 3

☐ 2

☐ 1

Identify when to refer a suspected Psoriatic arthritis patient to a rheumatologist.

☐ 4

☐ 3

☐ 2

☐ 1

Explain how to initiate a work-up for Psoriatic arthritis.

☐ 4

☐ 3

☐ 2

☐ 1

Please rate the projected impact of this activity on your knowledge, competence, performance and patient outcomes

* Competence is defined as the ability to apply knowledge, skills, and judgment in practice (knowing how to do something)

Yes

No

No Change

This activity increased my knowledge.

☐ 3

☐ 2

☐ 1

This activity increased my competence.

☐ 3

☐ 2

☐ 1

This activity improved/will improve my performance.

☐ 3

☐ 2

☐ 1

This activity will improve my patient outcomes.

☐ 3

☐ 2

☐ 1

Results

Figure 2: Inflammatory Arthritides Educational Modules

| Module Topic | Number of Participants |
|------------------------|------------------------|
| Rheumatoid Arthritis | 27 |
| Psoriatic Arthritis | 17 |
| Ankylosing Spondylitis | 17 |
| Total | 61 |

Figure 3: Inflammatory Arthritides Educational Module Survey Responses

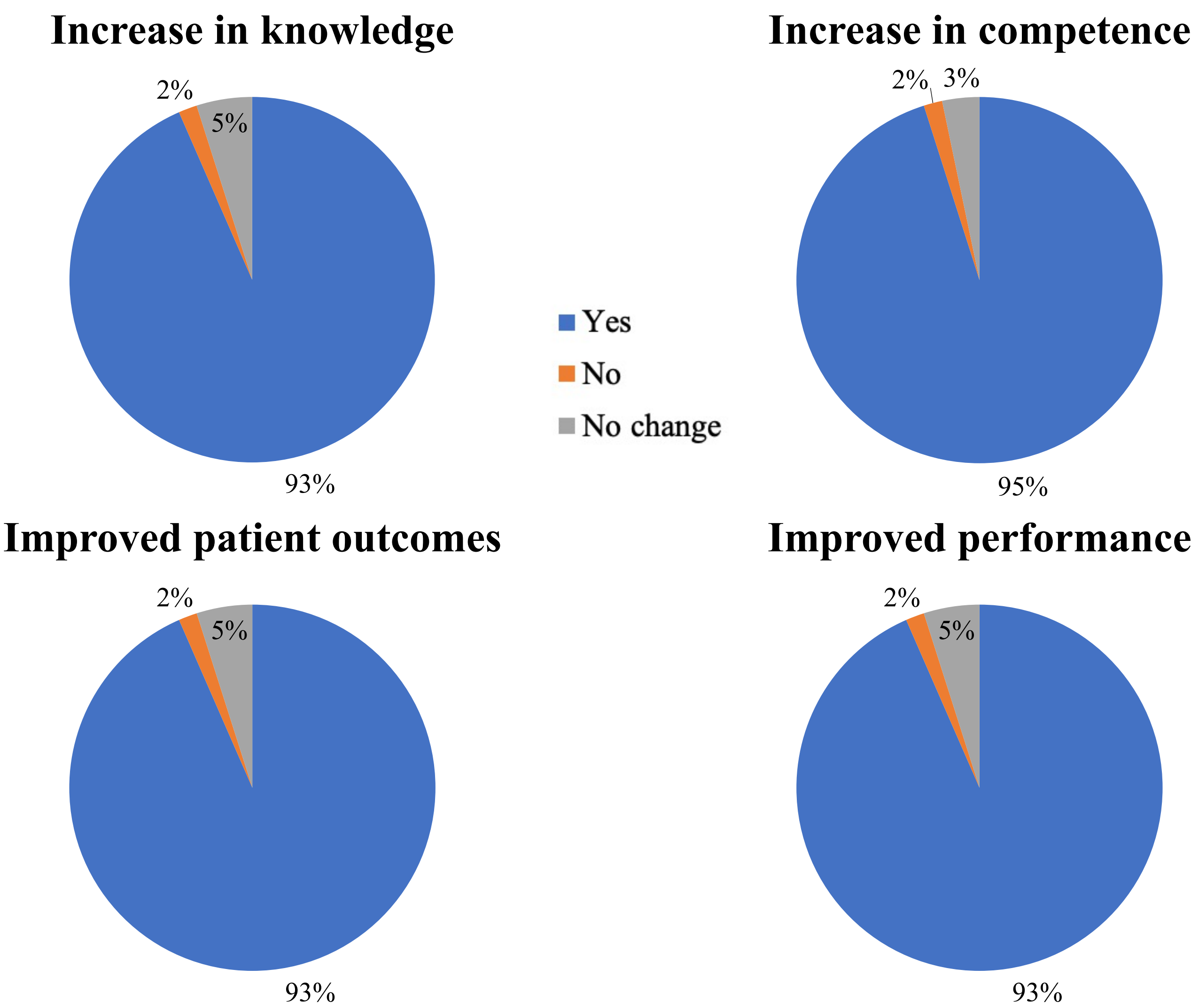


Figure 4: Average Annual Number of Rheumatology Referrals

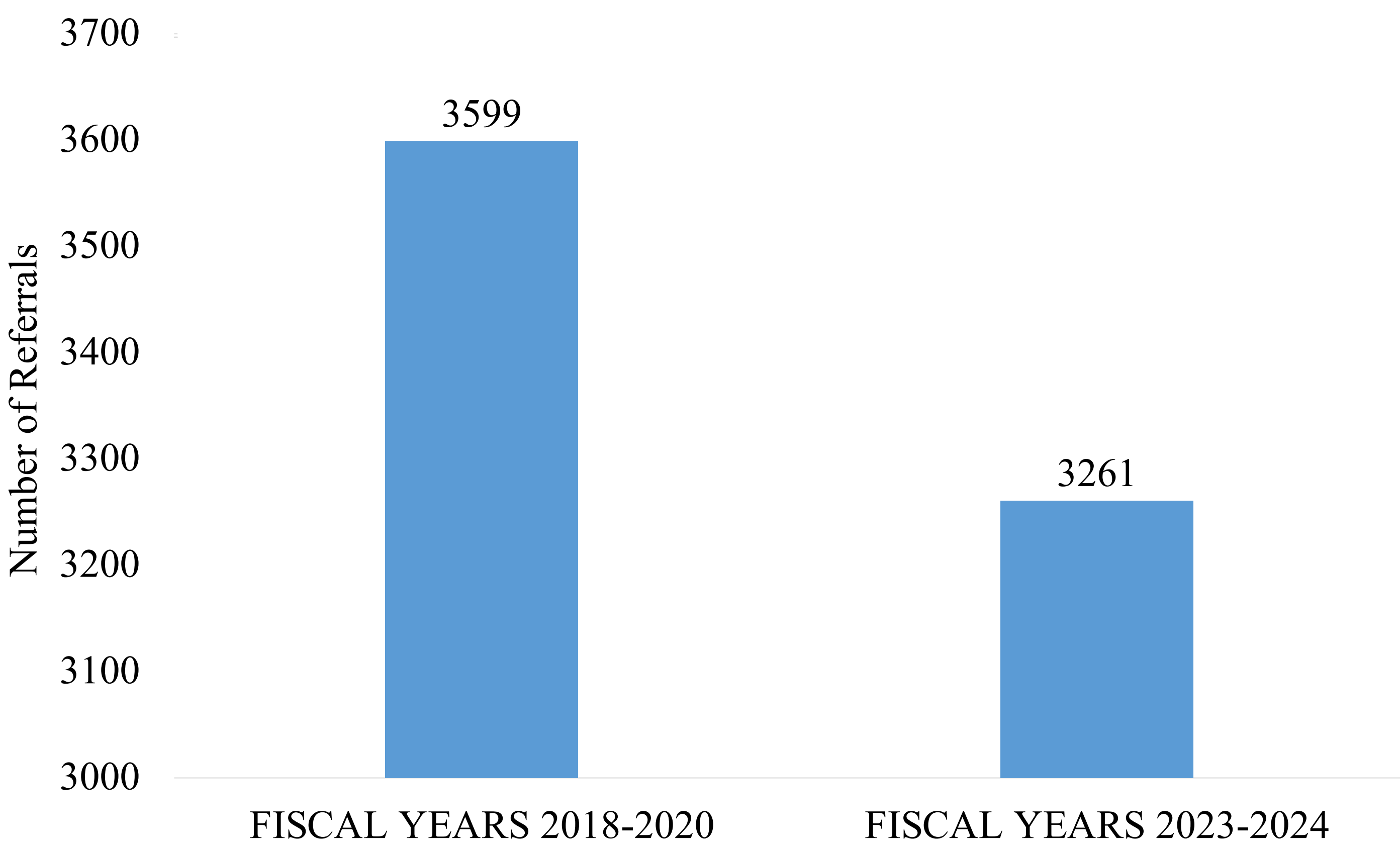


Figure 5: Average Annual Wait Times for Rheumatology Evaluation

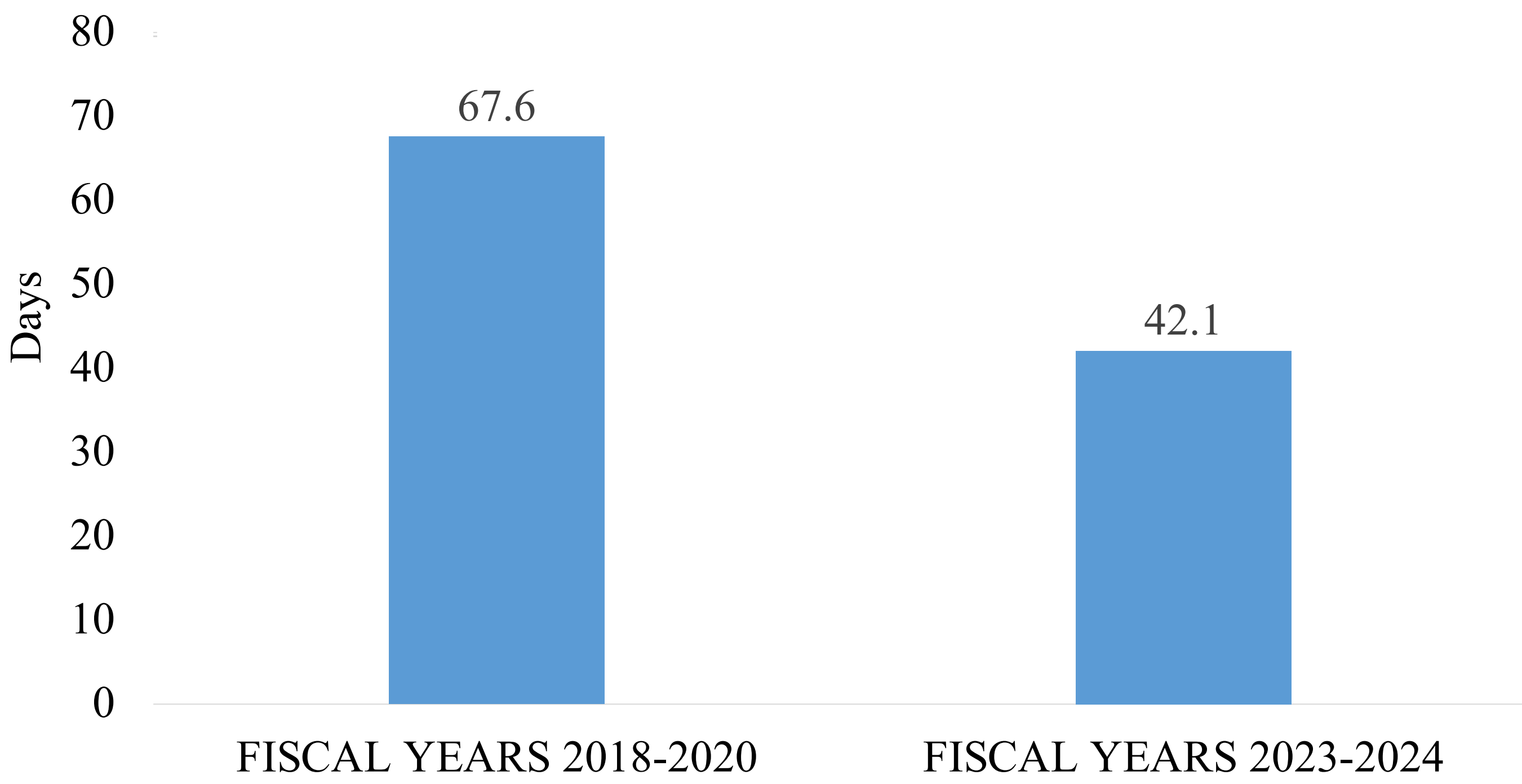


Figure 6: Survey Responses on Learning Objectives

| As a result of attending this activity, I am better able to: | Strongly Agree | Agree | Disagree | Strongly Disagree |
|---|----------------|-------|----------|-------------------|
| Define the epidemiology and disease characteristics of inflammatory arthritides | 41 | 22 | 0 | 0 |
| Recognize the signs and symptoms of inflammatory arthritides | 43 | 20 | 0 | 0 |
| Identify when to refer to a rheumatologist | 41 | 22 | 0 | 0 |
| Explain how to initiate a work-up | 42 | 18 | 0 | 0 |

Discussion & Conclusion

- Specifically tailored, easily accessible educational modules improve knowledge and competence of primary care providers on inflammatory arthritides
- Educational sessions may help reduce the number of referrals and decrease the wait times for rheumatology evaluation
- Future steps include continuing to disseminate the educational modules and to monitor the average number of rheumatology referrals and average wait times

References

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