

Identifying Quality Improvement Opportunities in a Vulvar Dermatology Clinic

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BACKGROUND

Vulvar concerns are common health concerns for women to be referred to specialist care¹. In accordance with current literature stating the importance of subspecialized vulvar dermatology clinics and educational gaps in medical training^{2,3}, we have identified a need to further investigate the optimization of efficiency, patient centered care and delivery of physician education.

Objective: Review local vulvar dermatology clinic patient data to identify quality improvement opportunities to further meet the needs of our patients and referring physicians

METHODS

A retrospective chart review of 187 new consultations in the vulvar dermatology clinic from May 2019 to May 2020

Inclusion criteria: new referral for a vulvar condition, any age, ambulatory health status, female sex, diagnosis of any vulvar condition

RESULTS

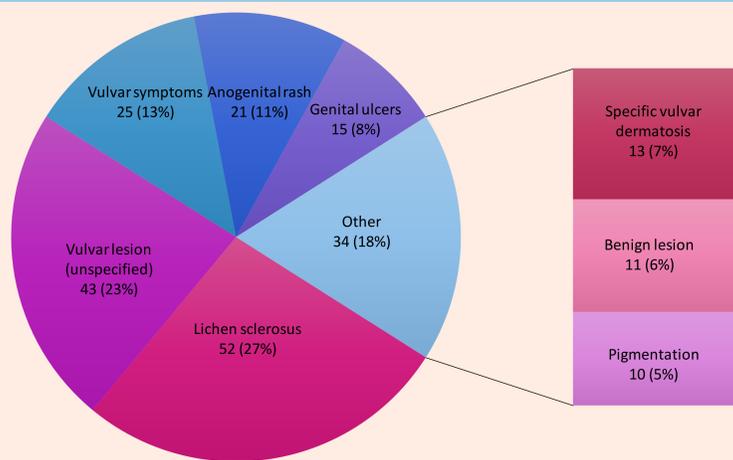


Figure 1A. Reason for Referral to Vulvar Dermatology. Number (% of 190 referral diagnosis)

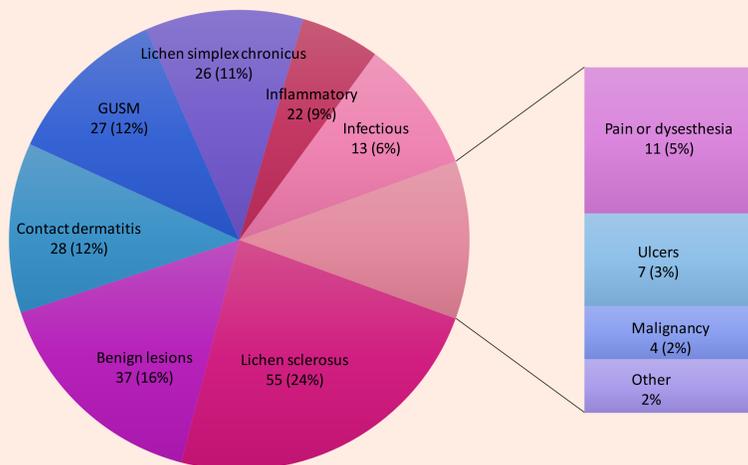
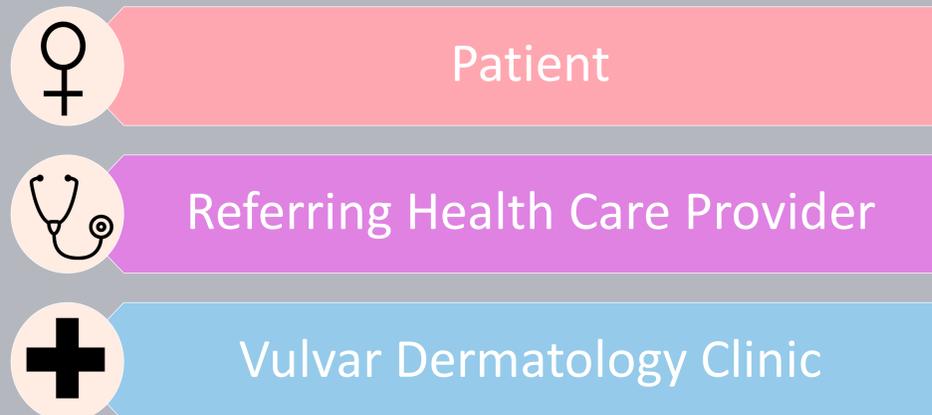
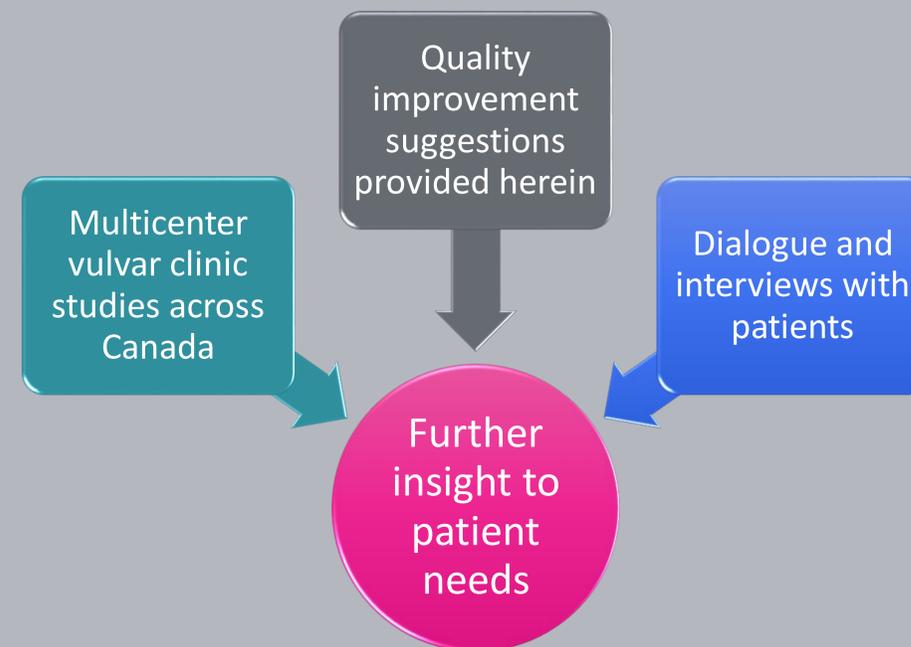


Figure 1B. Vulvar dermatology consultation diagnosis stratified. Number (% of 234 diagnosis)

Areas for Improvement



Areas for Future Research to Improve Vulvar Patient Experience



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INTERVENTIONS

- ✓ **Send information handout regarding gentle vulvar skin care and basic symptom-directed care during referral waiting period**
 - May be mailed with appointment package
- ✓ **Implement electronic handouts**
 - Currently accessible on local dermatology website
 - Requires increased awareness of generalists and non-vulvar dermatology specialists
- ✓ **Develop more local patient information handouts**
 - Specific to most frequently diagnosed conditions and treatments
 - Currently accessible on local dermatology website
 - Make available electronically or readily available in print

INTERVENTIONS

- ✓ **Virtual physician-to-physician consultation process**
 - Minimize patient travel
 - Reduce health care costs¹⁰
 - Allows continued management by patient's local physicians
- ✓ **Education of referring physicians**
 - Give particular attention to common inflammatory conditions and benign vs. malignant lesions
 - Develop electronic learning modules
- ✓ **Provide family medicine trainees opportunity to participate in our vulvar dermatology clinic**
 - Podcasts or recorded webinars for referring physicians
 - Online resources for increased flexibility
 - Develop modules that provide continuing medical education credit

INTERVENTIONS

- ✓ **Add more specific questions related to sexual health in standardized history taking template to prompt opportunity for rapport**
 - Our data suggests impact on sexual function and quality of life was inadequately explored and/or documented
 - Those who were asked about sexual function reported significant impairment, avoidance, fear of intercourse
 - Access to validated tools such as vulvar quality of life (VLQI), developed by Saunderson et al⁸, may be helpful
- ✓ **Further investigation into reasons why patients may not follow up**
 - Review past patient appointment list to determine the number of patients that did not follow up, then conduct a survey to determine why these patients may not have followed up