

ACCURACY OF WEB-BASED TRIAGE IN A COLLEGE HEALTH SETTING

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Key Words: triage, college health, web-based

Purpose. A web-based triage system for healthcare of students who seek care in a university health service (SHS) was implemented in February, 2004. The purposes of the study were to generate a profile of university students who actually made appointments after using the triage system, and to examine the accuracy of web-based triage diagnoses versus the diagnoses made in the clinic.

Methods. A descriptive comparative design was used to conduct this pilot study. The study was approved by the University's Institutional Review Board. The sample consisted of aggregate data from students who accessed the web-based triage system over a four month period from February through May, 2004. A listing of those students who requested an appointment after using the system was generated. For those students that actually came in for an appointment, data related to chief complaint and final diagnoses were compared for congruency by an experienced nurse practitioner. Findings were validated by a SHS physician experienced in college health. All data were de-identified to ensure anonymity of subjects.

Findings. During the four month period, 1290 students accessed the system. Of these, 143 students (11%) requested an appointment by electronic mail, and 59 students were actually seen at the SHS after requesting the appointment. The average age of students who came in for an appointment was 22 years. More women (54%) came in for an appointment than men (46%). Those who were advised to call "911" or instructed in self-care did not request appointments at the SHS. Diagnosis generated by the computerized triage algorithm correlated with those made by a SHS provider in 85% of cases.

Discussion. Initiation of web-based triage in a college health setting provides a way to assist students in decision making about seeking care. Over three-fourths of those using the system received an accurate and reliable diagnosis. Clinicians as well as students can feel confident of the system's ability to provide accurate web-based diagnoses and information regarding self-care based on the findings of this research. Knowledge of frequent inquiries can provide cues as to healthcare and educational needs for the college population. Additional research is needed to determine health-seeking behaviors of those who were recommended to seek treatment but did not request an appointment via electronic mail. Students may have sought care on a walk-in or phone appointment basis. Student satisfaction with the system also needs to be assessed.

EVALUATION OF ACCURACY WEB-BASED TRIAGE IN A COLLEGE HEALTH SETTING

Purpose. A web-based triage system for healthcare of students who seek care in a university health service (SHS) was implemented in February, 2004. The purposes of the study were to generate a profile of university students who actually made appointments after using the triage system, and to examine the accuracy of web-based triage diagnoses versus the diagnoses made in the clinic.

Methods. A descriptive comparative design was used to conduct this pilot study. The study was approved by the University's Institutional Review Board. The sample consisted of aggregate data from students who accessed the web-based triage system over a four month period from February through May, 2004. A listing of those students who requested an appointment after using the system was generated. For those students that actually came in for an appointment, data related to chief complaint and final diagnoses were compared for congruency by an experienced nurse practitioner. Findings were validated by a SHS physician experienced in college health. All data were de-identified to ensure anonymity of subjects.

Findings. During the four month period, 1290 students accessed the system. Of these, 143 students (11%) requested an appointment, and 59 (5%) students were actually seen at the SHS. The average age of students who came in for an appointment was 22 years. More women (54%) came in for an appointment than men (46%). Those who were advised to call "911" or seek immediate care, or instructed in self-care were not seen at the SHS. Diagnosis generated by the computerized triage algorithm correlated in 76% of cases.

Discussion. Initiation of web-based triage in a college health setting provides a way to assist students in decision making about seeking care. Over three-fourths of those using the system received an accurate and reliable diagnosis. Clinicians as well as students can feel confident of the system's ability to provide accurate web-based diagnoses and information regarding self-care based on the findings of this research. Knowledge of frequent inquiries can provide cues as to healthcare and educational needs for the college population. Additional research is needed to determine health-seeking behaviors of those who were recommended to seek treatment but did not make an appointment with SHS, as well as student satisfaction with the system.