



Diabetes Health Care Utilization

1. **In the past 6 months**, how many times did you visit a physician?
Do **NOT** include visits while in the hospital or the hospital emergency room..... _____ visits

2. In the past 6 months, how many times did you go to a **hospital** emergency room? _____ times

3. How many total NIGHTS did you spend in the hospital **in the past 6 months**? _____ nights

4. When was the last time you had your eyes examined?
(example: for glaucoma or any other problem) _____

Month Year

5. How many **times** did the doctor or nurse examine your feet in the last 6 months? _____ times

Scoring

These are single items. We have found that we often have to follow up with telephone clarification for these items, no matter how they are written. We always do telephone clarification for people that have more than 1 MD visit per month and for all hospitalizations and ER visits. You will need to figure out how stringent you want to be in your own research. For example, do you want to count an ER visit that resulted in an in-patient admission? Do you want to distinguish between acute and SNF nights in _____ hospital (patients often can't distinguish)? Do you want to clarify whether the physician visits include infusions, allergy shots, dialysis, or diagnostic tests?

Characteristics

Tested on 123 subjects with a high frequency of diabetes.

Item Name	Observed Range	Mean	Standard Deviation	Internal Consistency Reliability	Test-Retest Reliability
Physician visits	0-12	2.62	2.36	—	NA
Emergency dept visits	0-2	0.122	0.375	—	NA
Nights hospitalized	0-40	0.691	4.12	—	NA

Source of Psychometric Data

English speaking diabetics in the Stanford/El Paso Border Diabetes Project. Report for publication in process. The last two items (eyes and feet) have not been tested in English.

Comments

There is no gold standard - self-report is not perfect. Especially when one has many visits, there tends to be an under-reporting of visits. At the same time there are significant problems with both chart audits and electronic medical records. The article below discusses these and makes a strong case of the use of self-report, at least for community-based studies. These items available in Spanish.

References

Ritter PL, Kaymaz H, Stewart A, Sobel DS, Lorig KR, Self-reports of health care utilization compared to provider records. *Journal of Clinical Epidemiology*, 2001, 54, pp.136-141.

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