

## Improving Bone Health Screening and Treatment in an Urban FQHC Setting

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Osteoporotic fractures are a major cause of morbidity and mortality among elderly patients. Hip fractures in particular are a frequent cause of institutionalization for elderly patients and are associated with reported one-year mortality rates ranging from 14 to 58%. Though less commonly lethal, vertebral and forearm fractures are common causes of chronic pain and impaired ability to perform activities of daily living. Screening tools, including clinical risk assessments and radiographic measurements of bone density, are available to assess individuals' risk of osteoporotic fractures. The USPSTF recommends universal screening for osteoporosis among women greater than 65 years of age using DXA measurement of bone density. Chart review at an urban FQHC revealed that just 37% (41/110) of female patients aged 65-85 had either a bone density diagnosis in their chart or had completed DXA screening. Interventions to improve screening compliance are underway, including provider education, systematic chart review, and the use of EMR pop-up notifications to increase the rates of bone density screening and appropriate interventions for this patient population. Data collection to assess the impact of these interventions revealed a significant increase in rates of screening over the studied timeframe; however, these results are confounded by the impact of COVID-19 on provider habits and screening accessibility.