Increasing Cancer Screening: Provider Reminders - Cervical Cancer

Summary Evidence Table - Economic Review

Study	Study Characteristics	Costs	Summary Measures Cost per additional screen (in 2003 U.S. \$)
Author (Year): McDowell (1989) Analytic Method: Cost-effectiveness analysis	Experimental: Physician group: Computer printed a message to the physician to recommend cervical screening to overdue patients (n=255) (2.4 pct pt) Control: No reminder	Costs included: Physician time to consult with patient Intervention cost: (assume physician salary=\$90.27/hour): \$106.07	\$17.33
Author (Year): Hyndman et al. (1996) Analytic Method: Cost-effectiveness analysis	Experimental: A tagged group-files tagged to remind doctor to offer pap smear during consultation (n=198) (3.5 pct pt) Control: Received opportunistic screening	Costs included: Material costs (tagging notes, contact, reminder, smear-taking supplies), nurse's time (discuss results and enter results), reception staff (retrieve files for consultation), doctor's time (consulting rooms), fixed costs (cost of office space and facilities used e.g., phone rental costs, furniture cost, computer usage, etc. and use of consulting room space) Intervention cost: \$135.96	\$19.62
Author (Year): Binstock et al. (1997) Analytic Method: Cost-effectiveness analysis	Experimental: 1. Memo to primary provider (9.2 pct pt) 2. Chart reminder affixed outside members medical records (7.6 pct pt) Control: No intervention *n=1526 for all groups	Costs included: Chart room charges for affixing chart reminders, chart room charges and time for provider to respond to memos Intervention cost: 1. \$10,241 2. \$1,250	1. \$72.95 2. \$10.78