Utilizing Visiting Consulting Urologists and Outreach Clinics to Expand Rural Access to Urologic Care

INTRODUCTION

The urologist workforce shortage affects all populations in the United States; however, it disproportionately affects rural patients.

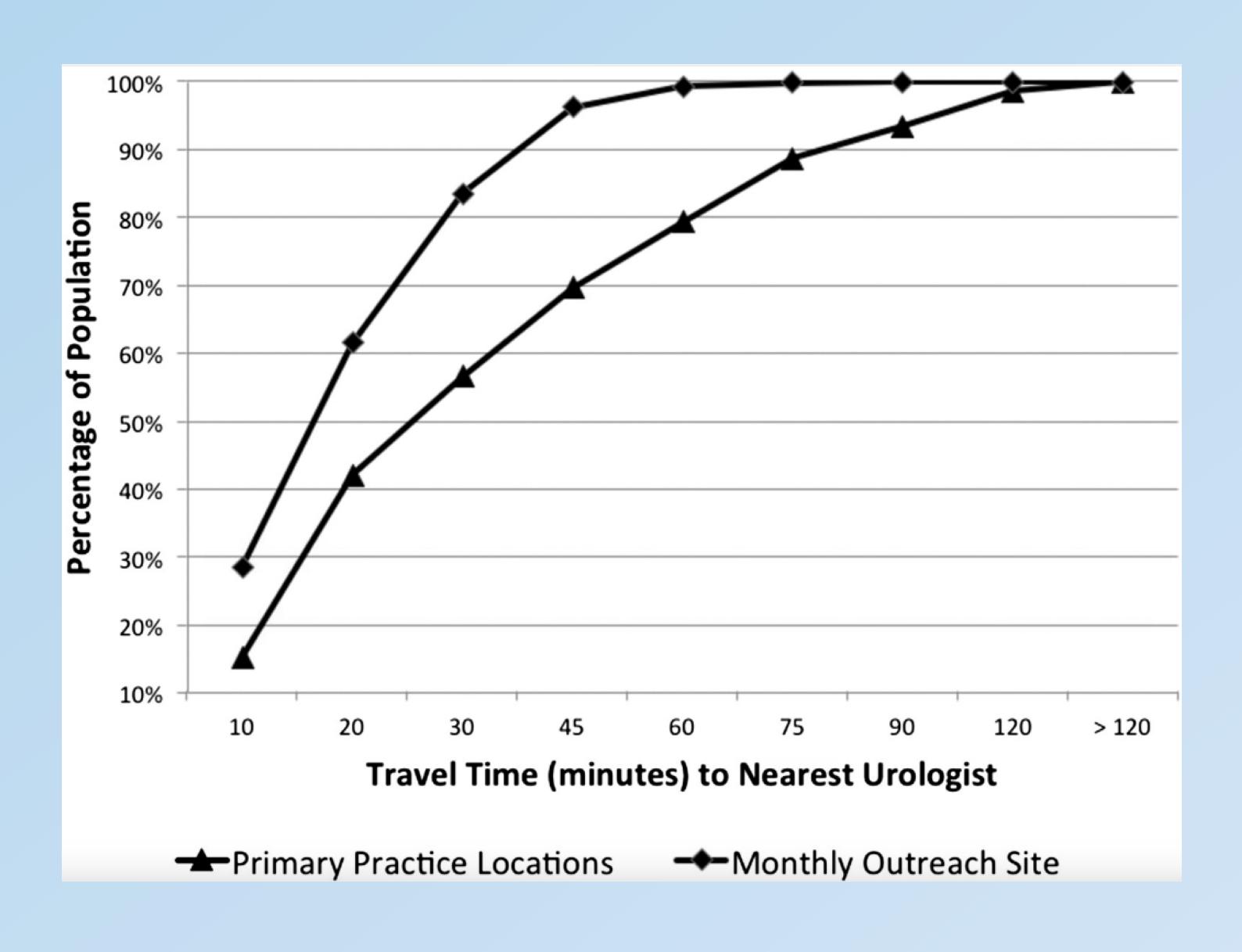
In Iowa, visiting consulting urologists (VCUs) traveling to outreach clinics increased care from 57% to 84% of patients.

This model can be promoted and incentivized for urologists in other states with large rural populations.

Federal and states level grants can be used to establish outreach clinics to partner with academic centers and private practice groups in urban centers.

This would facilitate the participation of urban urologists to fill gaps in care in rural settings.

This program directly addresses the American Urologic Association's legislative goal to address the looming workforce shortage in urology.

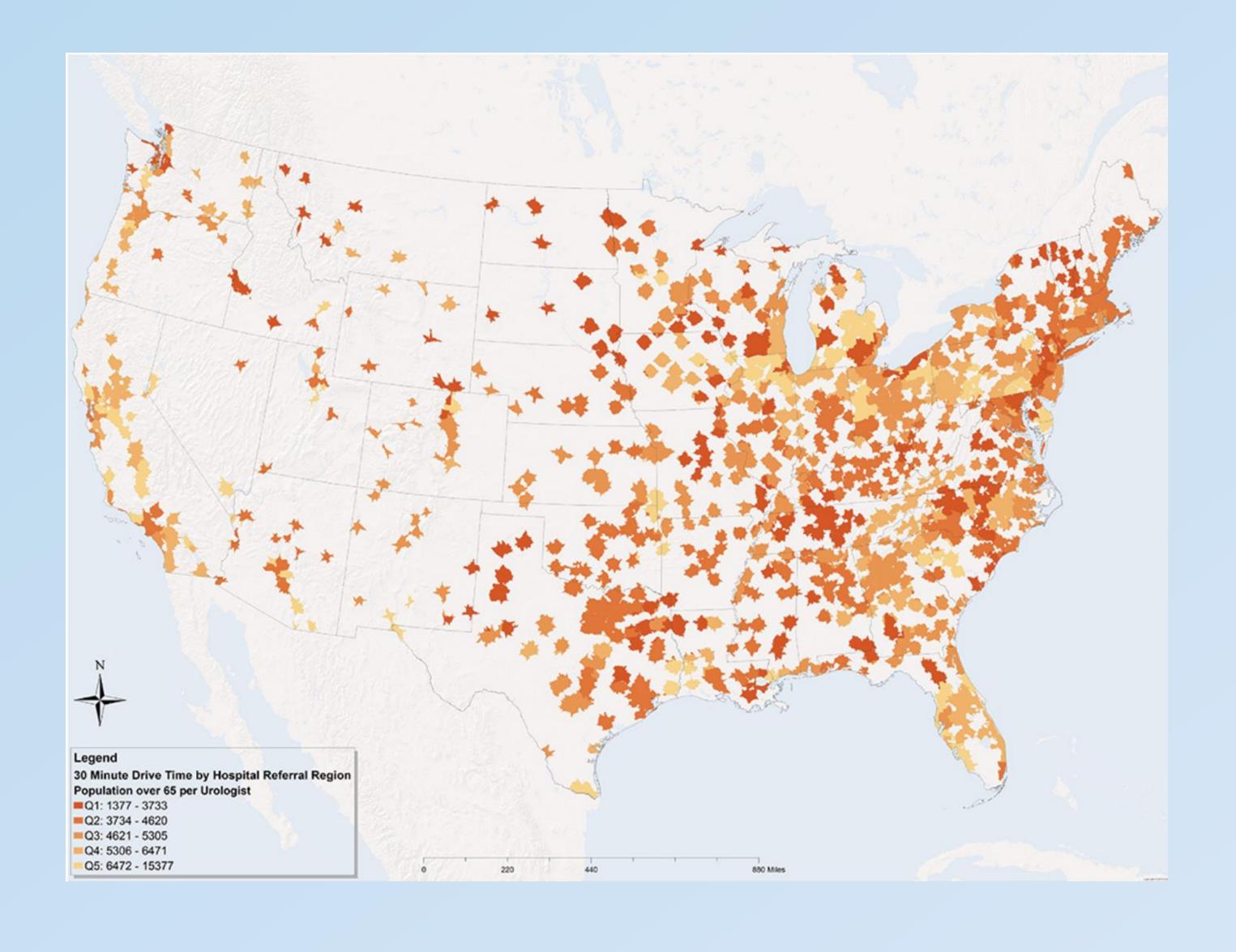


POPULATION AFFECTED

Approximately 19% of Americans currently live in rural areas, and an estimated 13% live further than a 30-minute drive time to urologic care.

These patients are likely to face delays in care for every aspect of urology, from stone disease, to female pelvic floor disorders, to cancer.

Beyond states that are conventionally perceived as rural, states on the Pacific Coast also contain large amounts of rural residents. California, for example, has an estimated 2.3 million residents in rural settings.



REFERENCES

Uhlman MA, Gruca TS, Tracy R, Bing MT, Erickson BA. Improving access to urologic care for rural populations through outreach clinics. Urology. 2013 Dec;82(6):1272-6. doi: 10.1016/j.urology.2013.08.053. PMID: 24295242.

Leiser CL, Anderson RE, Martin C, Hanson HA, O'Neil B. Combining Drive Time and Urologist Density to Understand Access to Urologic Care. Urology. 2020 May;139:78-83. doi: 10.1016/j.urology.2020.02.004. Epub 2020 Feb 17. PMID: 32081672; PMCID: PMC7237283.

55 urban urologists practicing an average of 3.6 days per month in rural communities were able to provide care to an estimated 800,000 additional patients.

Through this program, a similar effect can be achieved in other states on a larger scale.

Grant funding to establish outreach clinics for VCUs would lessen the burden on urologists interested in traveling to provide care and amplify the effect that VCUs can have on rural populations.

Facilitating the work of VCUs would deliver care to a greater number of patients and reduce delays in necessary urologic interventions.

Funding the establishment of outreach clinics increases the likelihood of urologists providing care to underserved rural populations, eliminating major obstacles to their care.





IMPACT OF THE WORK

CONCLUSIONS