

## **The Monetary Impact of Outpatient No-Shows in the Nuclear Medicine Department of a Pediatric Hospital**

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Outpatient no-shows are going to be a regular occurrence for any nuclear medicine department. Hospitals lose thousands of dollars each year from non-attendance. Determining the overall monetary impact of the no-shows and uncovering which procedures contribute most in terms total no-shows and total financial impact is a first step in alleviating some of this loss.

Method: From a Nuclear Medicine children's hospital, six months of data were collected retrospectively from December 2012 through May 2013. This included: procedure, current procedural terminology codes, total number of scans, total number of no-shows, as well as total hospital cost, and total revenue lost. The percentage for each procedure contributing to the total financial impact was calculated by dividing the cost for each procedure by the total loss in revenue. This was done for the total hospital cost (radiopharmaceuticals) and the total revenue loss (technical component).

Results: From December 2012 through May 2013 the financial impact for this nuclear medicine department was \$17,512.32. The procedures contributing to the most hospital cost were renal dynamic imaging, renal morphology imaging, and gastric emptying, resulting in 54%, 19.2%, 13.4% respectively. The procedures contributing to the most revenue loss were gastric emptying, renal dynamic imaging, and hepatobiliary imaging, resulting in 30.7%, 17.0%, and 13.4% respectively.

Conclusion: Outpatient no-shows are going to be a regular occurrence for any nuclear medicine department, but losing money does not have to be. Nuclear medicine departments need to discover ways of eliminating no-shows and identify which procedures contribute to the most financial impact. This is imperative in reducing the amount of revenue lost from wasted radiopharmaceuticals, technologist's time, and the technical components in a department.