
TOP 5 LIST IN INTERNAL MEDICINE

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1. Don't do imaging for low back pain within the first six weeks unless red flags* are present.

- Imaging of the lumbar spine before six weeks does not improve outcomes but does increase costs
- Low back pain is the fifth most common reason for all physician visits

* *Red flags include, but are not limited to, severe or progressive neurological deficits or when serious underlying conditions such as osteomyelitis are suspected.*

Sources: AHCPR and Cochrane

2. Don't obtain blood chemistry panels (e.g. CMP, SMA-7, BMP) or urinalyses for screening in asymptomatic, healthy adults.

- Only lipid screening yielded significant numbers of positive results among asymptomatic patients
- Screen for type 2 diabetes mellitus in asymptomatic adults with hypertension

Source: USPSTF

3. Don't order annual ECGs or any other cardiac screening for asymptomatic, low-risk patients.

- Little evidence that detection of coronary artery stenosis in asymptomatic patients at low risk for coronary heart disease improves health outcomes
- False-positive tests are likely to lead to harm through unnecessary invasive procedures, over-treatment, and misdiagnosis
- Potential harms of this routine annual screening exceed the potential benefit

Source: USPSTF

4. Use only generic statins when initiating lipid-lowering drug therapy.

- All statins are effective in decreasing mortality, heart attacks, and strokes when dose is titrated to effect appropriate LDL-cholesterol reduction
- Switch to more expensive brand-name statins (atorvastatin [Lipitor] or rosuvastatin [Crestor]) only if generic statins cause clinical reactions or do not achieve LDL-cholesterol goals

Sources: CURVES and MERCURY trials and metaanalyses

5. Don't use DEXA screening for osteoporosis in women under age 65 or men under 70 with no risk factors.*

- Not cost effective in younger, low-risk patients, but cost effective in older patients

* *Risk factors include, but are not limited to: fractures after age 50, prolonged exposure to corticosteroids, diet deficient in calcium or vitamin D, cigarette smoking, alcoholism, thin and small build.*

Sources: NOF, USPSTF, AACE, ACPM

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Abbreviations: ACOG (American College of Obstetrics & Gynecology), ACPM (American College of Preventive Medicine), AHCPR (Agency for Health Care Research and Quality), AACE (American Association of Clinical Endocrinology), DEXA (Dual Energy X-ray Absorptiometry), ECG (electrocardiogram), NOF (National Osteoporosis Foundation), USPSTF (U.S. Preventive Services Task Force)

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