



A Different Approach to the “No-Show”

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How do you feel when a patient or family does not arrive for their scheduled appointment?

Most places call this a “no-show.”

Some practices and hospitals even have policies that state that a patient can be dismissed from care if they “no-show” too many times. A patient “no-show” is considered both disrespectful of the clinician’s time and financially costly for the clinician.

How many times do we ask why the patient or family did not arrive for their appointment? Do we think about the barriers that make it difficult for a patient or family to get to our practice?

This week in *Pediatrics*, we are early releasing a thoughtful Pediatrics Perspectives entitled, “Reimagining No-Shows as a Symptom and Not a Diagnosis: A Strength-Based, Trauma-Sensitive Approach” ([10.1542/peds.2022-057590](#)). In this article, Drs. Daniela Brissett and Shelby Davies from Children’s Hospital of Philadelphia and Dr. Lydia Sit from Covenant House of Philadelphia, suggest that we take a different approach that is patient-centered rather than clinician-centered and consider the “no-show” as a symptom that the family needs assistance.

When I read this article, it brought to mind a family whom I cared for during residency. They had a child who had a tracheostomy and was dependent on oxygen. All of the interns in my program had to do at least one home visit to one of our continuity patients with one of our social workers. Because this family had missed 2 appointments with me, we arranged a home visit with them. It turns out that the family lived on the 10th floor of an apartment building in a neighborhood with few resources. When we arrived, none of the elevators were

working. We had to climb the 10 flights of stairs to see the family. I still remember the mother telling me, “Most days, the elevator doesn’t work. I can’t carry her with all of her breathing equipment up and down the stairs.”

I felt badly that it had never occurred to me to ask why this family did not come to their appointment. Drs. Brissett, Davies, and Sit suggest that we ask why and document that in the chart.

Families want the best for their child. That includes medical care. When a family does not arrive for their appointment, we should not make any assumptions but rather use this as a sign or symptom that the family may need financial or logistical assistance.

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