

The problem list is an integral part of patient management in both primary and consulting services. It allows for the quick reference of active problems by consultants and provides a way to track conditions over time using problem-based charting longitudinally. There is a growing demand for the efficient curation of these lists as problem list bloat can impact patient care. Here we explore patterns of problem list interaction. The highest item removal rates by practice type are seen in internal medicine practices, most likely due to a higher level of problem list ownership. There was not a large difference between clinician educational degree and removal of problem list items. Notably, medical assistants removed problems as much as physicians. As far as removal of problems, the items with the highest frequency of removal were either symptoms, nondescript, or had a surgical resolution. Items that remained on the list for the longest duration had low frequencies of removal, and it was difficult to determine why they were removed without further study.