

Helicobacter Pylori: The Incidence, Prevalence, and Follow up Test Rate in Smyrna, Georgia

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**Abstract**

This study examined a number of questions pertaining to Helicobacter pylori (H. pylori). H. Pylori is a highly widespread bacterium, capable of causing gastrointestinal problems. These questions were, what is the incidence rate of H. pylori, what is the prevalence of H. pylori, and what is the voluntary follow up testing rate of H. pylori. Each question was then further examined in an attempt to isolate the factors that correlate to the questions. The sample was taken from Emory-Adventist Hospital in Smyrna, and was comprised of 388 cases, which contained 347 patients. The outcome of the analysis of the data was that the incidence is 96 cases per 1000 person-years, the prevalence is 28.8%, the follow up test rate after a positive diagnosis is 15%, and the follow up test rate after a negative diagnosis is 6.9%. Of the factors that were examined for correlation, the only correlation which could be shown was between the patient's age and whether they would receive a follow up endoscopy after a negative diagnosis.

*Keywords:* Helicobacter pylori, H. pylori, Emory-Adventist Hospital, follow up test, incidence, prevalence

**Helicobacter Pylori: The Incidence, Prevalence, and Follow up Test Rate in Smyrna,  
Georgia**

Helicobacter Pylori (H. pylori) infection is one of the most prevalent forms of infection in the world, and it is the only known bacteria that can lead to cancer (Vale & Vitor). Although much is known about H. pylori there are still many unanswered questions some of which this research aims to answer. A review of the pertinent literature yields no evidence of an incidence or prevalence study in the United States in recent years. In addition, there have been no major studies made into the follow up patterns of H. pylori patients. It is believed that the majority of treatment failures are due to patient non-compliance. Therefore, it is necessary to understand patients' action patterns with regard to H. pylori in order to develop and implement effective treatments.

**Problem**

H. pylori infection is responsible for gastric problems for millions worldwide. In addition to causing pain for patients, H. pylori infection can result in permanent tissue damage. In addition, H. pylori can, if allowed to progress far enough, cause gastric cancer. H. pylori infects more than half of the human population (Vale & Vitor, n.d.).

**Purpose**

The goal of this study was to examine the nature of H. pylori infections, looking specifically at the patient population of Emory-Adventist Hospital in Smyrna, Ga. The study specifically examined the incidence and prevalence rates of H. pylori infection, and the voluntary follow up endoscopy rate of patients within this patient population. Within these categories, the study examined what factors affect the incidence, prevalence, and follow up rate of testing for H. pylori.

## **Significance of the Study**

Doctors, pharmaceutical companies, and third party payers will find the information, which this study contains useful. Doctors must understand how the patient reacts in order to understand the treatment he or she should administer. Pharmaceutical company researchers must understand how to modify their medications and their prescription information based on the response of patients to treatment, both physically and psychologically. In addition, pharmaceutical company executives must be able to know how much to invest in solving the problem of H. pylori infection, based upon its impact. In addition, third-party payers, within which exist Medicare and Medicaid, as well as private insurance, could find this information useful in helping to make decisions as to what restrictions they need to place on testing and treatment for H. pylori, based on its economic value.

## **Research Question**

The research questions for this study were:

- What percentage of people have follow up endoscopies after a positive H. pylori diagnosis?
  - a. Is there a correlation between who the referring doctor is and whether a patient has a follow up endoscopy after a positive H. pylori diagnosis?
  - b. Is there a correlation between the age of the patient and whether or not they have a follow up endoscopy after a positive H. pylori diagnosis?
  - c. Is there a correlation between the patient's gender and whether or not they have a follow up endoscopy after a positive H. pylori diagnosis?
  - d. Is there a correlation between who the gastroenterologist is and whether or not a patient has a follow up endoscopy after a positive H. pylori diagnosis?

- What percentage of people have a follow up endoscopy after a negative H. pylori Diagnosis?
  - a. Is there a correlation between who the referring doctor is and whether a patient has a follow up endoscopy after a negative H. pylori diagnosis?
  - b. Is there a correlation between the age of the patient and whether or not they have a follow up endoscopy after a negative H. pylori diagnosis?
  - c. Is there a correlation between the patient's gender and whether or not they have a follow up endoscopy after a negative H. pylori diagnosis?
  - d. Is there a correlation between who the gastroenterologist is and whether or not a patient has a follow up endoscopy after a negative H. pylori diagnosis?
- What is the incidence of H. pylori infection within the community?
- What is the prevalence of H. pylori infection within the community?
  - a. Is there a correlation between gender and the prevalence of H. pylori infection within the community?
  - b. Is there a correlation between patient age and the prevalence of H. pylori infection within the community?

## **Background**

### **History**

Since the mid twentieth century, spiral bacteria have been reported to exist in the human stomach. However, none of the scientists proposing the idea were able to isolate and culture the bacteria they claimed existed. As a result, their research never gained acceptance within the scientific community. Then, Barry Marshall and Robin Warren (1984) cultured the bacterium, which was eventually named Helicobacter pylori, which they too believed to exist in the

stomach. Although at first controversial, over time their paper gained acceptance, and is now nearly unanimously accepted within the medical community. For their work, in the discovery of H. pylori, Marshall and Warren won the 2005 Nobel Prize in Physiology or Medicine (*Nobelprize.org*, n.d.). Since the discovery of H. pylori, the bacterium has been highly studied; the literature pertaining to all aspects of the bacterium is extensive.

### **Microbiology**

H. pylori is a Gram-negative microaerophilic bacterium which has seven genome variants sequenced (Vale & Vitor, n.d.). It is an S shaped bacterium, which is on average  $3 \mu\text{m} \times 0.5 \mu\text{m}$ , with smooth coats, and an average of four sheathed flagella on one end of the bacterium (Marshall & Warren, 1984). Optimal growth occurs at 2% to 5%  $\text{O}_2$ , 5% to 10%  $\text{CO}_2$ , and at neutral pH (Vale & Vitor, n.d.).

Even though H. pylori exists in the highly acidic stomach, it maintains a periplasmic and cytoplasmic pH at a neutral level. The bacterium does this by synthesizing a urease enzyme, which converts urea in the stomach into  $2\text{NH}_3$  and  $\text{CO}_2$ . It is believed that the  $\text{CO}_2$ , along with water, is used to produce  $\text{HCO}_3^-$ , which has a pKa of 6.1, allowing it to buffer the cytoplasm and area around the cell to neutral pH level (Vale & Vitor, n.d.).

It is believed that this urease enzyme may be responsible for cell damage, due to its production of ammonia (Suerbaum & Josenhans, 1999). H. pylori uses its flagella to bury itself in the mucus which lines the stomach and binds itself to the gastric epithelial cells in the mucosa; H. pylori does this using adhesins, which are bacterial proteins that bind the bacterium to a cellular receptor in a host cell (Suerbaum & Josenhans, 1999).

## Prevalence

More than half of the human population is believed to be infected with *H. pylori*; however, rates of infection are not uniform. Areas with a lower socioeconomic status tend to have higher rates of infection than areas with a higher socioeconomic status. Rural areas have an infection rate greater than 80% and urban areas less than 40% (Vale & Vitor, n.d.). *H. pylori* is one of, if not the most prevalent infectious disease amongst humans (Suerbaum & Josenhans, 1999).

## Symptoms

The major side effects, which are due to *H. pylori*, are gastritis, peptic ulcers, and gastric cancer. However, more than 70% of the infected population remains asymptomatic (Vale & Vitor, n.d.). In most cases, symptoms do not appear until late adulthood in those who are infected (Robinson, Argent, & Atherton, 2007).

Symptoms are caused by the immune system response to *H. pylori*. This immune response consists mostly of lymphocytic inflammation, and is ineffective at killing the bacteria (Robinson, Argent, & Atherton, 2007). Certain strains of *H. pylori* have the cytotoxin-associated gene pathogenicity island abbreviated cag Pal. The cag Pal group of genes causes the production of the protein CagA and the production of a type 4-secretion system, which inserts CagA into the gastric epithelial cells, which then produce cytokine causing local inflammation within the mucosa. Most of CagA along with a number of other proteins that are injected into the gastric epithelial cells cause cellular changes, which can result in permanent cellular damage (Robinson, Argent, & Atherton, 2007).

Determination of which of the possible symptoms arise depends greatly on the combination of the characteristics of the host organism and the strain of *H. pylori* with which the

host is infected (Me'graud & Lehours, 2007). Some people show no symptoms at all. As a result, the state of *H. pylori* within a large population is difficult to ascertain.

## **Evolution**

The genetic variability of *H. pylori* has similarities to that of the genetic variability in the human genome. This suggests that *H. pylori* evolved under the same environmental changes as the humans that it inhabits. This indicates that humans have been infected with *H. pylori* since they left eastern Africa tens of thousands of years ago (Vale & Vitor, n.d.). This wide variety of genetic variability results in increased difficulty in the creation of a vaccine, which has yet to be successfully accomplished.

## **Transmission**

There is no definitive evidence to define the means of transmission of *H. pylori*, but it is known that most people are infected as children (Robinson, Argent, & Atherton, 2007). The prevailing theories as to how *H. pylori* is transmitted are gastro-oral (meaning through vomit which is ingested), oral-oral (meaning through saliva, which may be infused with gastric juices which is then ingested), and fecal-oral (meaning through the ingestion of feces; whether direct, through food or water, or through homosexual practices). At this time, it is believed that all of these are viable means of transmission, but fecal-oral transmission is considered the most prevalent (Vale & Vitor, n.d.).

## **Diagnosis**

Because of its prevalence, a large number of methods of diagnosing *H. pylori* have been developed. Some require an invasive endoscopy, and others do not. If an endoscopy is performed and samples are obtained from the upper gastrointestinal system, multiple tests can be performed on the biopsies. The biopsy may be cultured and analyzed for bacterial growth. This

also allows susceptibility testing. Histologic assessment may be performed using slide sections stained with a Hematoxylin and Eosin (H and E), Warthin-Starry Silver, or Giemsa stain. These are relatively inexpensive, however and they require a trained pathologist to read them. Urease testing may also be performed; this is performed by looking for urease activity, by noting the change in pH due to the Urease enzyme's activity in a culture (Lubbers, Mahlke, Lankisch, & Stolte, 2010).

The methods which do not require an endoscopy include antibody detection, which identifies antibodies in blood serum, which develop as a result of *H. pylori* infection. And urea breath tests, in which the patient ingests Urea, which if *H. pylori* is present, is then metabolized by Urease in the *H. pylori*, releasing CO<sub>2</sub>, CO<sub>2</sub> levels exiting the esophagus are then measured (Lubbers, Mahlke, Lankisch, & Stolte, 2010).

### **Treatment**

The first-line treatment for *H. pylori* is generally a Proton Pump Inhibitor, combined with clarithromycin or a bismuth and either amoxicillin or metronidazole. Dosage depends on which combination is used. Typically, treatment extends for seven days. Should first-line treatment fail, then generally second line treatment includes a Proton Pump Inhibitor, bismuth, metronidazole, and tetracycline. Second Line treatment is also recommended for a minimum of seven days. Failure of treatment is usually due to one of two causes, antibiotic resistance or lack of patient compliance (Bazzoli et al., 2002).

### **Follow up**

Patients who have *H. pylori*, which is causing serious complications or those who are deemed to be at risk for serious gastrointestinal problems are recommended to have follow up endoscopies post-treatment. Someone who has been diagnosed positive for *H. pylori*, without

any major complications, does not require a follow up endoscopy post-treatment (Lubbers, Mahlke, Lankisch, & Stolte, 2010).

### **Reinfection Rate**

Studies in western countries have reported reinfection rates ranging from 0.5 to 2.5 %. However, a study in Korea reported that 31.2% of cases had recurrence of H. pylori a year or more after eradication. It also stated that there was no significant difference in recurrence between various treatment regimens. The discrepancy between the reinfection rate in Korea and those in western countries can be explained by the general percentage of the population that is infected, which in Korea is 69.4% which is higher than western countries. However, the important fact is that the study reported that there was no significant difference in reinfection rate, based on which treatment was used (Ryu et al., 2010).

### **Methodology**

#### **Hypotheses**

- What percentage of people have follow up endoscopies after a positive H. pylori diagnosis?
  - a. Does not require hypotheses
- Is there a correlation between who the referring doctor is and whether a patient has a follow up endoscopy after a positive H. pylori diagnosis?
  - e. Null Hypothesis: The referring doctor has no effect on whether a patient undergoes a follow up endoscopy
  - f. Alternative Hypothesis: The referring doctor has an effect on whether a patient undergoes a follow up endoscopy

- Is there a correlation between the age of the patient and whether or not they have a follow up endoscopy after a positive H. pylori diagnosis?
  - a. Null Hypothesis: The age of the patient has no effect on whether they undergo a follow up endoscopy
  - b. Alternative Hypothesis: The age of the patient has an effect on whether they undergo a follow up endoscopy
- Is there a correlation between the patient's gender and whether or not they have a follow up endoscopy after a positive H. pylori diagnosis?
  - a. Null Hypothesis: The patient's gender has no effect on whether they undergo a follow up endoscopy
  - b. Alternative Hypothesis: The patient's gender has an effect on whether they undergo a follow up endoscopy
- Is there a correlation between who the gastroenterologist is and whether or not a patient has a follow up endoscopy after a positive H. pylori diagnosis?
  - a. Null Hypothesis: who the gastroenterologist is has no effect on whether the patient has a follow up endoscopy
  - b. Alternative Hypothesis: whom the gastroenterologist is has an effect on whether the patient has a follow up endoscopy
- What percentage of people have a follow up endoscopies after a negative H. pylori Diagnosis
  - a. Does not require hypotheses
- Is there a correlation between who the referring doctor is and whether a patient has a follow up endoscopy after a negative H. pylori diagnosis?

- g. Null Hypothesis: The referring doctor has no effect on whether a patient undergoes a follow up endoscopy
  - h. Alternative Hypothesis: The referring doctor has an effect on whether a patient undergoes a follow up endoscopy
- Is there a correlation between the age of the patient and whether or not they have a follow up endoscopies after a negative H. pylori diagnosis?
    - c. Null Hypothesis: The age of the patient has no effect on whether they undergo a follow up endoscopy
    - d. Alternative Hypothesis: The age of the patient has an effect on whether they undergo a follow up endoscopy
  - Is there a correlation between the patient's gender and whether or not they have a follow up endoscopy after a negative H. pylori diagnosis?
    - c. Null Hypothesis: The patient's gender has no effect on whether they undergo a follow up endoscopy
    - d. Alternative Hypothesis: The patient's gender has an effect on whether they undergo a follow up endoscopy
  - Is there a correlation between who the gastroenterologist is and whether or not a patient has a follow up endoscopy after a negative H. pylori diagnosis?
    - c. Null Hypothesis: who the gastroenterologist is has no effect on whether the patient has a follow up endoscopy
    - d. Alternative Hypothesis: whom the gastroenterologist is has an effect on whether the patient has a follow up endoscopy
  - What is the incidence of H. pylori infection within the community?

- a. Does not require hypotheses
- What is the prevalence of H. pylori infection within the community?
  - b. Does not require hypotheses
- Is there a correlation between gender and the prevalence of H. pylori infection within the community?
  - a. Null Hypothesis: gender does not have an effect on the prevalence of H. pylori infection within the community.
  - c. Alternative Hypothesis: gender has an effect on the prevalence of H. pylori infection within the community.
- Is there a correlation between patient age and the prevalence of H. pylori infection within the community?

- a. Null Hypothesis: age does not have an effect on the prevalence of H. pylori infection within the community.
- b. Alternative Hypothesis: age has an effect on the prevalence of H. pylori infection within the community.

### **Population and Sampling**

The data for this study were obtained using the digital medical charts system at Emory-Adventist Hospital. For privacy reasons all names and other personal information has been removed. The data specifically is from the period 2007 through 2009 and contains all biopsies on which a Giemsa stain was performed to test for H. pylori. This includes 388 cases, from 347 patients. The data only contain records from Emory-Adventist Hospital. Therefore, some caution must be taken when extrapolating the data. It is not recommended that the data pertaining to incidence, prevalence, and the rate of follow up testing be extrapolated beyond an outer-city area, which has a population that is similar to the population that attends Emory-Adventist Hospital.

### **Instrumentation**

Tissue was processed using a Xylene based pressurized tissue processor, the majority of the processing was done using a Tissue-Tek ® VIP pressurized tissue processer. All tissue was also embedded using a tissue embedding station, the majority of tissue was embedded in paraffin using a Tissue-Tek ® Thermal Console, Tissue-Tek ® Dispensing console, and a Tissue-Tek III Cryo Console. All tissue was also sectioned using a standard microtome; the majority of sections were cut using a Leica RM 235 microtome. All sections were stained using a Giemsa stain and a Hematoxylin and Eosin (H and E) stain, the majority of sections were stained using a

Quick III three stage Giemsa. All slides were also cover slipped. Slides were examined using a standard confocal microscope, the majority of slides were observed using an Olympus BX40 microscope.

### **Procedure and time frame**

Tissue samples were received in formalin containers. They were measured and any abnormalities are noted. Samples were placed into cassettes. If the sample was too large to fit into a cassette, it was cut to size. Cassettes were then placed into a pressurized tissue processor where the tissue is fixed, dehydrated, cleaned, and impregnated with paraffin. After processing was complete, tissue was removed from the cassettes and embedded in paraffin. Once embedded sections were cut from the tissue and placed onto slides. The slides were then heated and stained using Giemsa and H and E stains. Once stained, slides were cover slipped. Slides were then examined by a trained pathologist using a microscope. Although H and E stains can sometimes show H. pylori infection, the Giemsa stain was relied upon to make the final decision as to whether a section of tissue is positive or negative for H. pylori.

The diagnoses for all tests were recorded in the Emory-Adventist Hospital digital medical records system. All cases upon which analysis was performed for H. pylori infection, between March of 2007 and June of 2010, were included in this study.

### **Analysis plan**

All data were stored in Microsoft Access. Once all of the data was placed in Access its query and reporting features were used to output the data into useable forms. Once output Microsoft Excel and SOFA will be used to analyze the data. All questions that pertain to correlations (the follow up questions, and relationship between prevalence and gender) had a Chi-square Test of Independence run. For all Chi-square Tests the alpha value was .05 these

tests yielded results as to whether or not a correlation does in fact exist between the tested variables. For the incidence and prevalence, incidence and prevalence will be calculated using standard methods.

### **Validity and reliability**

The method used to diagnose the patients in this study (GI biopsy with Giemsa stain) is considered accurate when interpreted by a trained pathologist. Two pathologists performed the analysis. The first, John D. Cochran is a board certified pathologist, by the American Board of Pathology, and he is a fellow with the College of American Pathologists. In addition to his over ten years of private, practice experience, Dr. Cochran also consults for a number of wealth-management firms. The second, Michael B. Koch is board certified by the American Board of Pathology, and he is a fellow with the College of American Pathologists. In addition to his nine years of private practice experience, Dr. Koch performed a Fellowship in Cytopathology and Soft Tissue Pathology at Emory University (Pathology Lab of Georgia, 2010).

### **Assumptions**

This study assumed that the sample represented the described population. It also assumed that all patients, if they choose to undergo a follow up endoscopy, had it performed at Emory-Adventist Hospital.

### **Scope and limitations**

A number of factors limited this study. One was that the sample was not random. All of the people who had endoscopies performed had them performed for a reason therefore; it can be presumed that at least for their initial endoscopy the patients previously experienced side effects. Another is that, due to the limited size, limited randomness, and limited diversity of the sample, the study was limited in its power of extrapolation.

## Data and Results

### Description of the Sample

The sample contains 388 cases and 347 unique patients. Within these patients are 123 males, 223 females, and 1 patient with unknown gender. The eldest patient was born on August 7, 1908. The youngest patient was born on March 16, 1992. The first case considered was performed on March 26, 2007. The last case considered was performed on February 15, 2010.

### Data

For complete raw data, please see Appendix 2, which contains raw data that were used in the study. It should be noted that more data was collected; however, it was not used in the study, so it is not displayed. Within the data, a few notes must be made. First, all doctors were assigned a number to protect their identity. Second, age was not processed based on the patient's age at the time of the test, but rather by the patient's date of birth, which then falls into a category with other like aged patients. This was done to prevent conflicts which would naturally arise when looking at the ages of patients who had multiple tests performed. Third, for patients who had more than one case (had a follow up) the gastroenterologist and referring doctor from their first case, chronologically, is used.

Table 1: Gender and H. pylori diagnosis

		H. pylori diagnosis	
		Negative	Positive
		Freq	Freq
Gender	Female	160	63
	Male	86	37
	Unknown	1	0

Table 2: Date of Birth and H. pylori diagnosis

		H. pylori diagnosis	
		Negative	Positive
		Freq	Freq
Date of birth	1900-1919	4	0
	1920-1939	49	29
	1940-1959	93	33
	1960-1979	84	30
	1980-1999	17	8

Table 3: Referring doctor and follow up when diagnosis is negative

		Follow up	
		Did not receive follow up	Did receive follow up
		Freq	Freq
Referring Doctor	200.0	116	6
	201.0	99	10
	202.0	8	0
	Others	8	0

Table 4: Referring doctor and follow up when diagnosis is positive

		Follow up	
		Did not receive follow up	Did receive follow up
		Freq	Freq
Referring Doctor	200.0	37	3
	201.0	43	12
	202.0	3	0
	Others	2	0

Table 5: Date of Birth and follow up when diagnosis is negative

		Follow up	
		Did not receive follow up	
		Freq	Freq
Year of birth	1900-1919	4	0
	1920-1939	44	5
	1940-1959	84	9
	1960-1979	81	3
	1980-1999	17	0

Table 6: Date of Birth and follow up when diagnosis is positive

		Follow up	
		Did not receive follow up	
		Freq	Freq
Year of birth	1920-1939	21	8
	1940-1959	32	1
	1960-1979	26	4
	1980-1999	6	2

Table 7: H. pylori diagnoses

H. pylori diagnosis	Freq	
	Negative	Positive
Negative	247	
Positive		100

Table 8: Gastroenterologist and follow up when diagnosis is negative

		Follow up	
		Did not receive follow up	
		Freq	Freq
Gastroenterologist	300.0	200	13
	301.0	30	4

Table 9: Gastroenterologist and follow up when diagnosis is positive

		Follow up	
		Did not receive follow up	
		Freq	Freq
Gastroenterologist	300.0	82	12
	301.0	10	3

Table 10: Gender and follow up when diagnosis is negative

		Follow up	
		Did not receive follow up	
		Freq	Freq
Gender	Female	149	11
	Male	80	6
	Unknown	1	0

Table 11: Gender and follow up when diagnosis is positive

		Follow up	
		Did not receive follow up	
		Freq	Freq
Gender	Female	57	6
	Male	29	8

Table 12: Diagnosis and follow up

		Follow up	
		Did not receive follow up	Did receive follow up
		Freq	Freq
H. pylori Diagnosis	Negative	230	17
	Positive	85	15

## Analyses

**what percentage of people have follow up endoscopies after a positive H. pylori diagnosis.**

There is no test necessary for this question. Using the data in Table 13, out of 100 patients who received a positive diagnosis, 15 got a follow up. That corresponds to a 15% follow up rate after a positive H. pylori diagnosis.

**is there a correlation between who the referring doctor is and whether a patient has a follow up endoscopy after a positive H. pylori diagnosis.**

The null hypothesis is the referring doctor has no effect on whether a patient undergoes a follow up endoscopy.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 13. The data in table 13 can be visualized in figures 1 and 2 (Appendix 1), which show the proportions and frequencies of follow up for each referring doctor when the diagnosis is positive.

Fifty percent of the expected value cells contain a value less than 5, which signifies that the results from the chi-square test are weak. When run, the test yielded a chi-square value of 4.652 with three degrees of freedom, which corresponds to a p-value of 0.199. The p-value is

not less than the alpha value of .05. Therefore, the results of the analyses failed to reject the null hypothesis, and it cannot be concluded that there is any relationship between who the referring doctor is, and whether the patient receives a follow up endoscopy.

Table 13: Chi-square test for referring doctor and follow up when diagnosis is positive

		Referring Doctor									
		200.0		201.0		202.0		Assorted Others		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	37	34.0	43	46.8	3	2.6	2	1.7	85	85.0
	Did receive follow up	3	6.0	12	8.3	0	0.5	0	0.3	15	15.0
	TOTAL	40	40.0	55	55.0	3	3.0	2	2.0	100	100.0

**is there a correlation between the age of the patient and whether or not they have a follow up endoscopy after a positive H. pylori diagnosis.**

The null hypothesis is the age of the patient has no effect on whether they undergo a follow up endoscopy.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 14. The data in table 14 can also be visualized in figures 3 and 4 (Appendix 1), which show the proportions and frequencies of follow up for each age group when the diagnosis is positive.

Fifty percent of the expected value cells contain a value less than 5, which signifies that the results from the chi-square test are weak. When run, the test yielded a chi-square value of 8.004 with three degrees of freedom, which corresponds to a p-value of 0.046. The p-value is less than the alpha value of .05. Therefore, the data is able to reject the null hypothesis. As such, there is sufficient evidence to doubt independence between the age of the patient and whether they will undergo a follow up endoscopy when the H. pylori diagnosis is positive.

Therefore, it can be concluded that there appears to be a relationship between the age of the patient, and whether they receive a follow up endoscopy, when the H. pylori diagnosis is positive.

Table 14: Chi-square test for referring doctor and follow up when diagnosis is positive

		Date of birth									
		1920-1939		1940-1959		1960-1979		1980-1999		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	21	24.7	32	28.1	26	25.5	6	6.8	85	85.0
	Did receive follow up	8	4.4	1	5.0	4	4.5	2	1.2	15	15.0
	TOTAL	29	29.0	33	33.0	30	30.0	8	8.0	100	100.0

**is there a correlation between the patient's gender and whether or not they have a follow up endoscopy after a positive H. pylori diagnosis.**

The null hypothesis is the patient's gender has no effect on whether they undergo a follow up endoscopy.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 15. The data in table 15 can also be visualized in figures 5 and 6, which show the proportions and frequencies of follow up for each age group when the diagnosis is positive.

None of the expected value cells contains a value less than 5. This signifies that the results from the test are strong. When run, the test yielded a chi-square value of 2.834 with one degree of freedom, which corresponds to a p-value of 0.092. The p-value is not less than the alpha value of .05. Therefore, the data failed to reject the null hypothesis, and it cannot be

concluded that there is any relationship between patient gender, and whether they receive a follow up endoscopy.

Table 15: Chi-square test for gender and follow up when diagnosis is positive

		Gender					
		Male		Female		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	29	31.8	57	54.2	86	86.0
	Did receive follow up	8	5.2	6	8.8	14	14.0
	TOTAL	37	37.0	63	63.0	100	100.0

**is there a correlation between who the gastroenterologist is and whether or not a patient has a follow up endoscopy after a positive H. pylori diagnosis.**

The null hypothesis is who the gastroenterologist is has no effect on whether the patient has a follow up endoscopy.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 16. The data in table 16 can also be visualized in figures 7 and 8 (Appendix 1), which show the proportions and frequencies of follow up for each age group when the diagnosis is positive.

Twenty five percent of the expected value cells contain a value less than 5, which signifies that the results from the chi-square test are slightly weak. When run, the test yielded a chi-square value of 1.007 with one degree of freedom, which corresponds to a p-value of 0.316. The p-value is not less than the alpha value of .05. Therefore, the data failed to reject the null hypothesis, and it cannot be concluded that there is any relationship between who the gastroenterologist is, and whether a patient receives a follow up endoscopy.

Table 16: Chi-square test for gastroenterologist and follow up when diagnosis is positive

		Gastroenterologist					
		300.0		301.0		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	82	80.8	10	11.2	92	92.0
	Did receive follow up	12	13.2	3	1.8	15	15.0
	TOTAL	94	94.0	13	13.0	107	107.0

**what percentage of people have a follow up endoscopies after a negative H. pylori diagnosis.**

There is no test necessary for this question. Using the data in Table 12, out of a total of 247 patients who received a positive diagnosis, 17 got a follow up. That corresponds to a 6.9% follow up rate after a negative H. pylori diagnosis.

**is there a correlation between who the referring doctor is and whether a patient has a follow up endoscopy after a negative H. pylori diagnosis.**

The null Hypothesis is the referring doctor has no effect on whether a patient undergoes a follow up endoscopy. To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 17. The data in table 17 can also be visualized in figures 9 and 10 (Appendix 1), which show the proportions and frequencies of follow up for each referring doctor when the diagnosis is negative.

25% of the expected value cells contain a value less than 5, and the minimum expected value cell contains a value of 0.518, which signifies that the results from the chi-square test are weak. When run, the test yielded a chi-square value of 2.906 with three degrees of freedom, which corresponds to a p-value of 0.406. The p-value is not less than the alpha value of .05. Therefore, the results of the analyses failed to reject the null hypothesis, and it cannot be

concluded that there is any relationship between who the referring doctor is, and whether a patient receives a follow up endoscopy.

Table 17: Chi-square test for referring doctor and follow up when diagnosis is negative

		Referring Doctor									
		200.0		201.0		202.0		Assorted Others		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	116	114.1	99	101.9	8	7.5	8	7.5	231	231.0
	Did receive follow up	6	7.9	10	7.1	0	0.5	0	0.5	16	16.0
	TOTAL	122	122.0	109	109.0	8	8.0	8	8.0	247	247.0

**is there a correlation between the age of the patient and whether or not they have a follow up endoscopies after a negative H. pylori diagnosis.**

The null hypothesis is the age of the patient has no effect on whether they undergo a follow up endoscopy.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 18. The data in table 19 can also be visualized in figures 11 and 12 (Appendix 1), which show the proportions and frequencies of follow up for each age group when the diagnosis is positive.

Forty percent of the expected value cells contain a value less than 5, which signifies that the results from the chi-square test are weak. When run, the test yielded a chi-square value of 4.966 with four degrees of freedom, which corresponds to a p-value of 0.291. The p-value is not less than the alpha value of .05. Therefore, the data failed to reject the null hypothesis, and it

cannot be concluded that there is any relationship between the patient age and whether they receive a follow up endoscopy.

Table 18: Chi-square test for age and follow up when diagnosis is negative

		Decade Of Birth											
		1900-1919		1920-1939		1940-1959		1960-1979		1980-1999		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	4	3.7	44	45.6	84	86.6	81	78.2	17	15.8	230	230.0
	Did receive follow up	0	0.3	5	3.4	9	6.4	3	5.8	0	1.2	17	17.0
	TOTAL	4	4.0	49	49.0	93	93.0	84	84.0	17	17.0	247	247.0

**is there a correlation between the patient's gender and whether or not they have a follow up endoscopy after a negative H. pylori diagnosis.**

The null hypothesis is the patient's gender has no effect on whether they undergo a follow up endoscopy. To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 19. The data in table 19 can also be visualized in figures 13 and 14 (Appendix 1), which show the proportions and frequencies of follow up for each age group when the diagnosis is positive.

None of the expected value cells contains a value less than 5, which signifies that the results from the chi-square test are strong. When run, the test yielded a chi-square value of .001 with one degree of freedom, which corresponds to a p-value of 0.976. The p-value is not less than the alpha value of .05. Therefore, the results of the analyses failed to reject the null hypothesis, and it cannot be concluded that there is any relationship between the patient gender , and whether they receive a follow up endoscopy.

Table 19: Chi-square test for gender and follow up when diagnosis is negative

		Gender					
		Male		Female		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	80	80.1	149	148.9	229	229.0
	Did receive follow up	6	5.9	11	11.1	17	17.0
	TOTAL	86	86.0	160	160.0	246	246.0

**is there a correlation between who the gastroenterologist is and whether or not a patient has a follow up endoscopy after a negative H. pylori diagnosis.**

The null hypothesis is that who the gastroenterologist is has no effect on whether the patient has a follow up endoscopy.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 20. The data in table 20 can also be visualized in figures 15 and 16 (Appendix 1), which show the proportions and frequencies of follow up for each age group when the diagnosis is positive.

25% of the expected value cells contain a value less than 5, which signifies that the results from the chi-square test are weak. When run, the test yielded a chi-square value of 1.466 with three degrees of freedom, which corresponds to a p-value of 1.466. The p-value is not less than the alpha value of .05. Therefore, the results of the analyses failed to reject the null hypothesis, and it cannot be concluded that there is any relationship between who the gastroenterologist is, and whether the patient receives a follow up endoscopy.

Table 20: Chi-square test for gastroenterologist and follow up when diagnosis is negative

		Gastroenterologist					
		300.0		301.0		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp
Follow Up	Did not receive follow up	200	198.3	30	31.7	230	230.0
	Did receive follow up	13	14.7	4	2.3	17	17.0
	TOTAL	213	213.0	34	34.0	247	247.0

**what is the incidence of H. pylori infection within the community.**

There is no test necessary for this question. Using the data in Table 7, out of a total of 347 patients who were tested over three years 100 were positive. This means that the incidence is 33 people per 347 person-years, or .096 people per person-year, which can also be written as 96 people per 1000 person-years.

**what is the prevalence of H. pylori infection within the community.**

There is no test necessary for this question. Using the data in Table 7, out of 347 patients who were tested 100 were positive. This means that the prevalence is 28.8%.

**is there a correlation between gender and the prevalence of H. pylori infection within the community.**

The null hypothesis is gender does not have an effect on the prevalence of H. pylori infection within the community.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 21. The data in table 21 can also be visualized in figures 17 and 18 (Appendix 1), which show the proportions and frequencies of positive and negative diagnoses based upon gender.

None of the expected value cells contain a value less than 5, which signifies that the results from the chi-square test are strong. When run, the test yielded a chi-square value of 0.129

with one degree of freedom, which corresponds to a p-value of 0.719. The p-value is not less than the alpha value of .05. Therefore, the data failed to reject the null hypothesis, and it cannot be concluded that there is any relationship between gender and the prevalence of H. pylori.

Table 21: Chi-square test for gender and H. pylori diagnosis

		Gender					
		Male		Female		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp
H. pylori diagnosis	Negative	86	87.5	160	158.5	246	246.0
	Positive	37	35.5	63	64.5	100	100.0
	TOTAL	123	123.0	223	223.0	346	346.0

**is there a correlation between patient age and the prevalence of H. pylori infection within the community.**

The null hypothesis is age does not have an effect on the prevalence of H. pylori infection within the community.

To analyze this question a chi-square test of independence was performed. The expected and observed results are displayed in table 22. The data in table 22 can also be visualized in figures 19 and 20 (Appendix 1), which show the proportions and frequencies of positive and negative diagnoses based upon age.

20% of the expected value cells contain a value less than 5, and the minimum expected value is 1.153 which signifies that the results from the chi-square test are strong. When run, the test yielded a chi-square value of 5.173 with four degree of freedom, which corresponds to a p-value of 0.270. The p-value is not less than the alpha value of .05. Therefore, the data failed to reject the null hypothesis, and it cannot be concluded that there is any relationship between age and the prevalence of H. pylori.

Table 22: Chi-square test for age and H. pylori diagnoses

		Date of Birth											
		1900-1919		1920-1939		1940-1959		1960-1979		1980-1999		TOTAL	
		Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp
H. pylori diagnosis	Negative	4	2.8	49	55.5	93	89.7	84	81.1	17	17.8	247	247.0
	Positive	0	1.2	29	22.5	33	36.3	30	32.9	8	7.2	100	100.0
	TOTAL	4	4.0	78	78.0	126	126.0	114	114.0	25	25.0	347	347.0

## Conclusions and Recommendations

### Conclusions

Data was gathered from Emory-Adventist Hospital and used to answer questions about H. pylori. The data were processed and then a number of tests were run on the data, in order to answer the questions proposed by this study.

The first question was what percentage of people have follow up endoscopies after a positive H. pylori diagnosis, to which the answer is 15%. There were then a number of sub questions which were analyzed for the specific circumstance of having received a positive H. pylori diagnosis. The first is, if there was a correlation between the referring doctor and the percentages of people that have follow up endoscopies, to which the answer was that there was not enough evidence to support a correlation. The next question was, if there was a correlation between the patient ages and whether they would, receive a follow up, to which the answer was that there appears to be a correlation. The third question dealt with whether or not there was a correlation between the patients gender and whether or not they would receive a follow up, to which the answer was that there was not enough evidence to support a correlation. The final sub question was whether there is a correlation between who the gastroenterologist is and whether or not patients receive follow ups, to which the answer was that there was not sufficient evidence to support a correlation.

The next question was what percentage of people receive a follow up test after a negative H. pylori diagnosis, to which the answer was 6.9%. This question also had a number of sub questions associated with it, which were analyzed for the specific circumstance of having received a negative H. pylori diagnosis. The first was whether or not there was a correlation between whom the referring doctor is and whether or not a patient receives a follow up, to which the answer was that there was insufficient evidence to support a correlation. The next sub question was whether there was a correlation between the ages of patients and whether they got follow ups, to which the answer was that there was not enough evidence to support a correlation. The third sub question was whether there was a correlation between patients' genders and whether or not they got follow ups, to which the answer was that there was insufficient evidence to support a correlation. The final sub question was whether there was a correlation between who the gastroenterologist was and whether the patient got a follow up, to which the answer was that there was not enough evidence to support a correlation.

The third question was what the incidence of H. pylori infection is within the community. The answer is .096 cases per person-year, which is the same as 96 cases per 1000 person-years.

The fourth question was what the prevalence of H. pylori infection is within the community. The answer is an average of 28.8% over the course of the data collection. This question also had two sub questions associated with it. The first was is there a correlation between gender and prevalence of H. pylori infection, to which the answer was that there was insufficient evidence to indicate a correlation. The second question was whether there is a correlation between age and prevalence, to which the answer was that there was insufficient evidence to support a correlation.

## Discussion

This study looks at four major questions, and within three of those questions, there are sub questions.

### **follow up.**

The first question deals with whether or not patients receive follow up testing for H. pylori after receiving a positive diagnosis for H. pylori. The overall rate of follow up testing for patients who received a positive diagnosis was 15%. Based on the literature this makes sense. Because H. pylori is not an immediately life threatening disease it is not normally necessary for patients to receive second round testing. The exception to this is if patients have a very severe case, which may be causing permanent damage or there are recurring symptoms after treatment.

The second question deals with whether or not patients receive follow up testing for H. pylori after receiving a negative diagnosis for H. pylori. The overall rate of follow up testing for patients who received a negative diagnosis was 6.9%. I expected this value to be lower. I would assume that there are two possible reasons that this number is above zero. The first is that patients continue to experience symptoms of H. pylori, and as a result receive a second test. The second possible reason is that an endoscopy was performed for another reason and as standard procedure; an H. pylori test was performed.

The question of follow up after both positive and negative H. pylori diagnosis is then broken up into multiple sub questions. This is done in order to examine what different factors affect whether people receive a follow up after positive H. pylori testing. The factors that are examined are the referring doctor, the patient's age, the patient's gender, the gastroenterologist who examines the case.

The only one of these factors for which there appears to be a correlation is age, with whether a patient receives a follow up test, when the patient receives a positive diagnosis. There is no pertinent literature to support or deny correlation between these factors; as a result, it is difficult to say that these results are supported by any other research.

### **incidence.**

The third major question was what the incidence in the population is. The result was that the incidence is .096 cases per person-year, which would more commonly be stated as 96 cases per 1000 person-years. What this means is that within the population for every thousand people 96 new cases appear per year.

### **prevalence.**

The final major question was what the prevalence is in the population. The result is that the prevalence is 28.8%. This is actually a little lower than I would have expected, but is easily within reason. This question was then also broken up into two sub questions. They are what effect gender has on the prevalence and what effect the age has on the prevalence.

The evidence does not support a correlation between gender and prevalence nor age and prevalence. The fact that there is no correlation when dealing with the gender nor age is logical, this is because none of the literature suggested that H. pylori has an easier time infecting one or the other gender.

### **Recommendations**

Although this study did provide some meaningful results, there were also some shortcomings. First, although the data was sound, when broken up into smaller subcategories the sample size was not large enough. The results of the tests which were run within this study could be stated much more definitively if the sample size were larger. It would also have

increased the value of the study to have increased demographic information on the sample. This would have allowed the sample itself to be better defined, allowing it to be associated with a population with greater ease, therefore allowing the findings to be extrapolated more confidently.

Although there were flaws with this study, it is still capable of being useful. This does however depend upon the data in this survey and the conclusions which it makes being used. The prevalence and incidence can both be taken and compared to past and future results to allow the development of a picture of how the state of H. pylori infection in the population is developing.

### Glossary

Biopsy	A portion of tissue which is removed from an organ for testing
Endoscopy	A procedure in which a small tube with a camera and forceps is placed down the patient's esophagus. The gastroenterologist then looks at the esophagus, stomach and duodenum, and if anything appears out of the ordinary, a biopsy is taken
Gastric cancer	Cancer of the stomach, usually adenocarcinoma
Gastritis	A condition denoted by inflammation in the stomach lining
Microaerophilic	Describes an organism which requires minimal oxygen to survive, and which will die at oxygen concentrations found in the atmosphere
Peptic ulcers	A lack of the mucus layer and an erosion of the wall in any part of the gastrointestinal system
Referring doctor	The doctor who sees the patient and sends the sample and test request to the pathologist
Susceptibility testing	Testing to see if a bacterium will be affected by a medicine and to what

degree

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**Appendix 1 - Figures**

Figure 1: Follow up and referring doctor when diagnosis is positive - Proportion

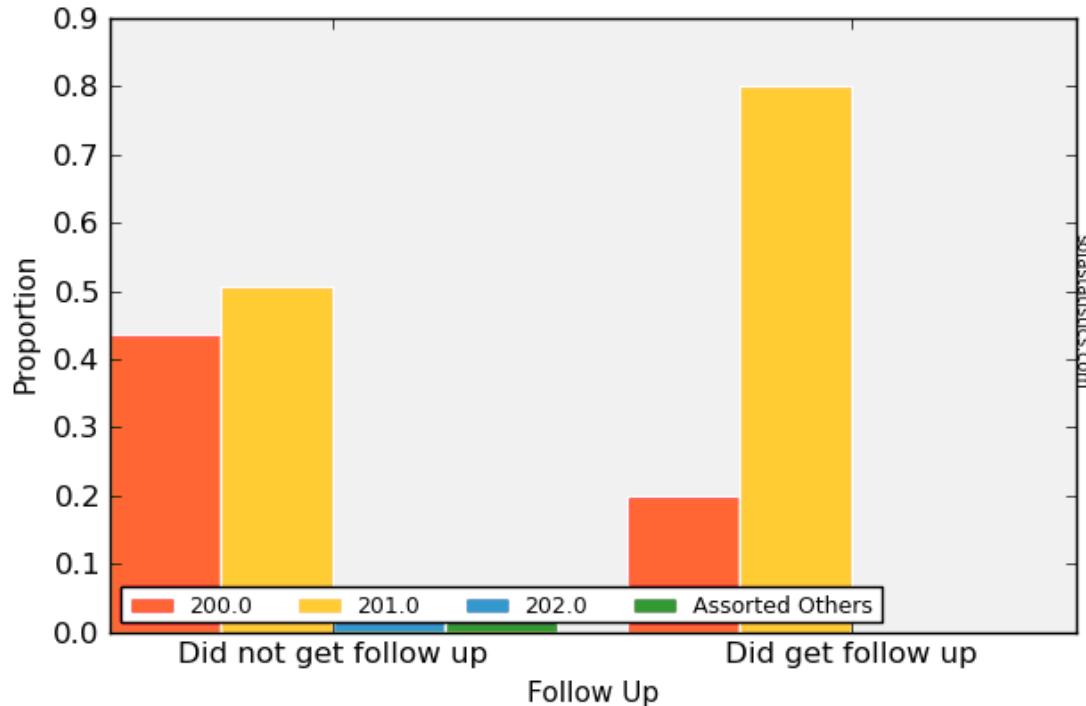


Figure 2: Follow up and referring doctor when diagnosis is positive – Frequency

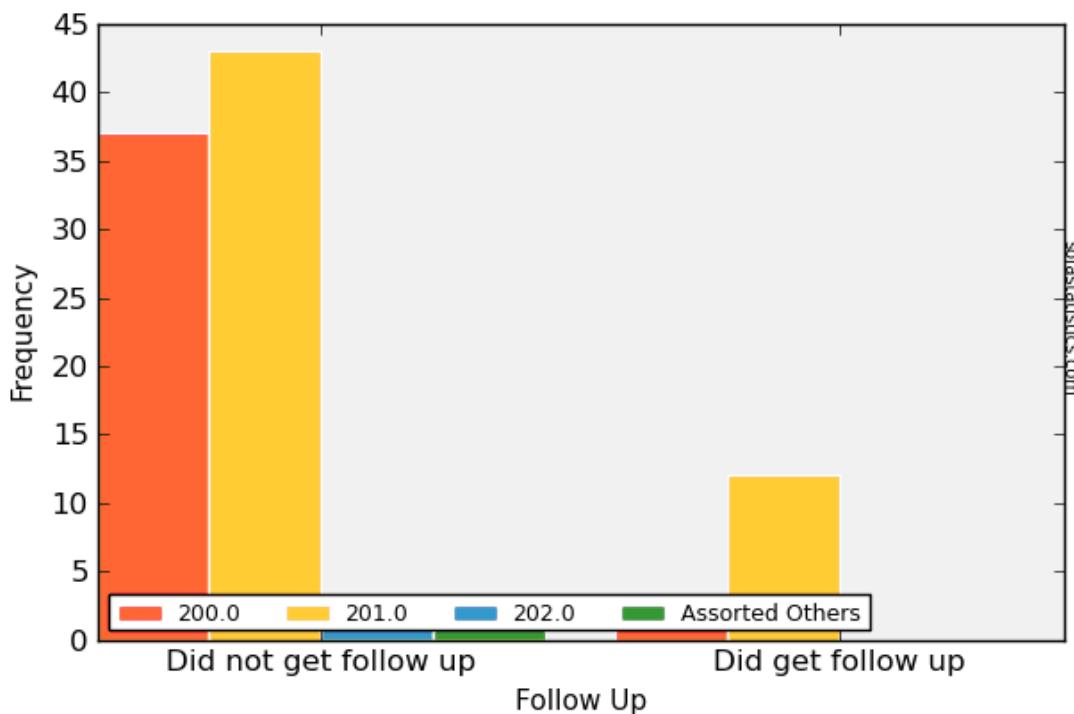


Figure 3: Follow up and age when diagnosis is positive - Proportion

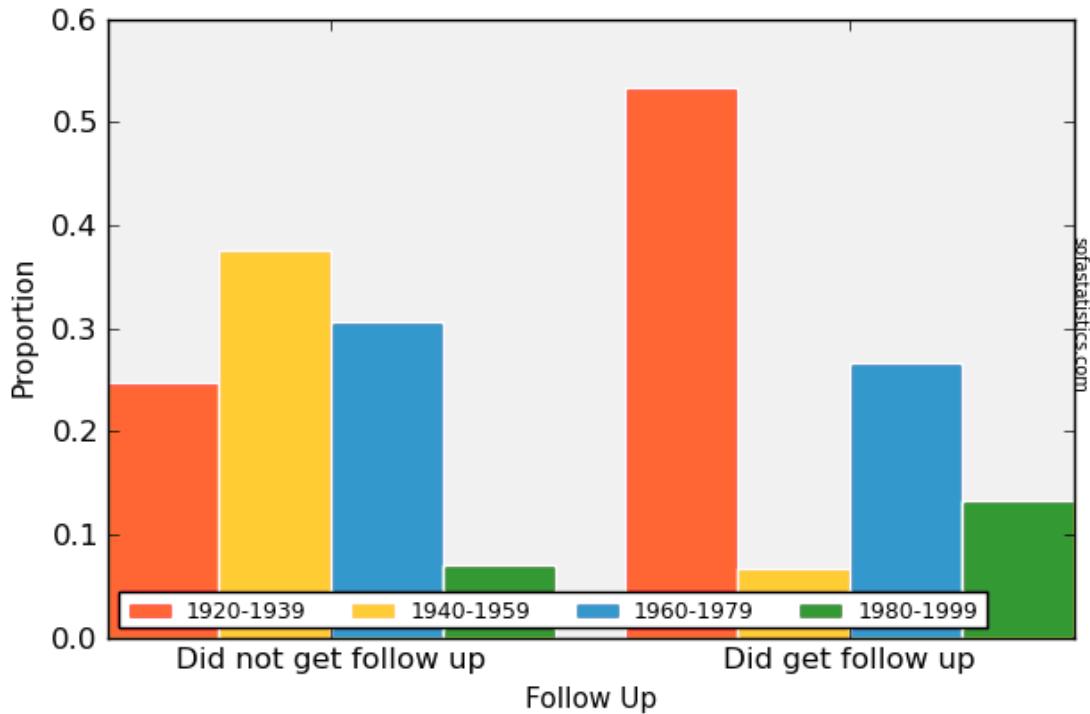


Figure 4: Follow up and age when diagnosis is positive – Frequency

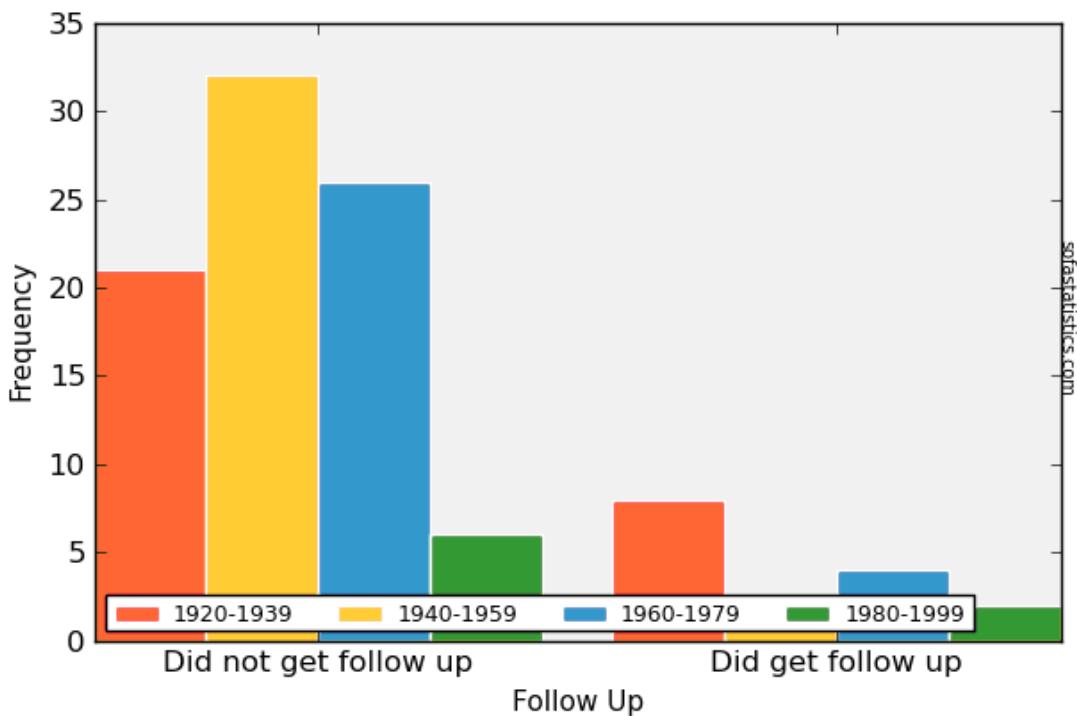


Figure 5: Follow up and gender when diagnosis is positive - Proportion

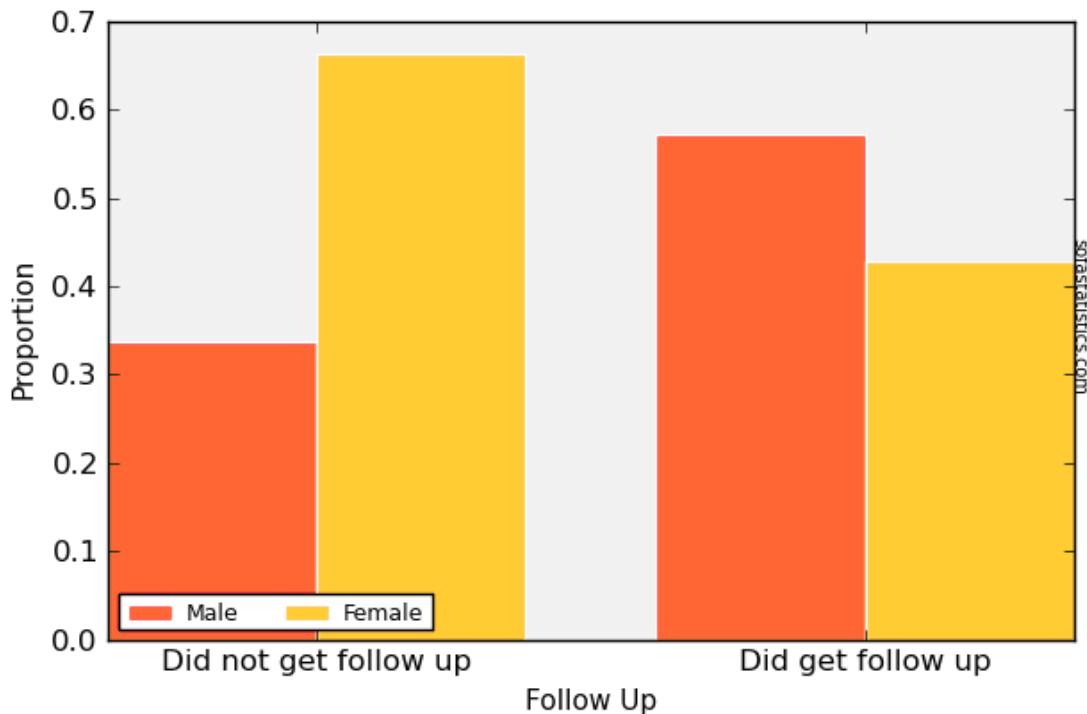


Figure 6: Follow up and gender when diagnosis is positive – Frequency

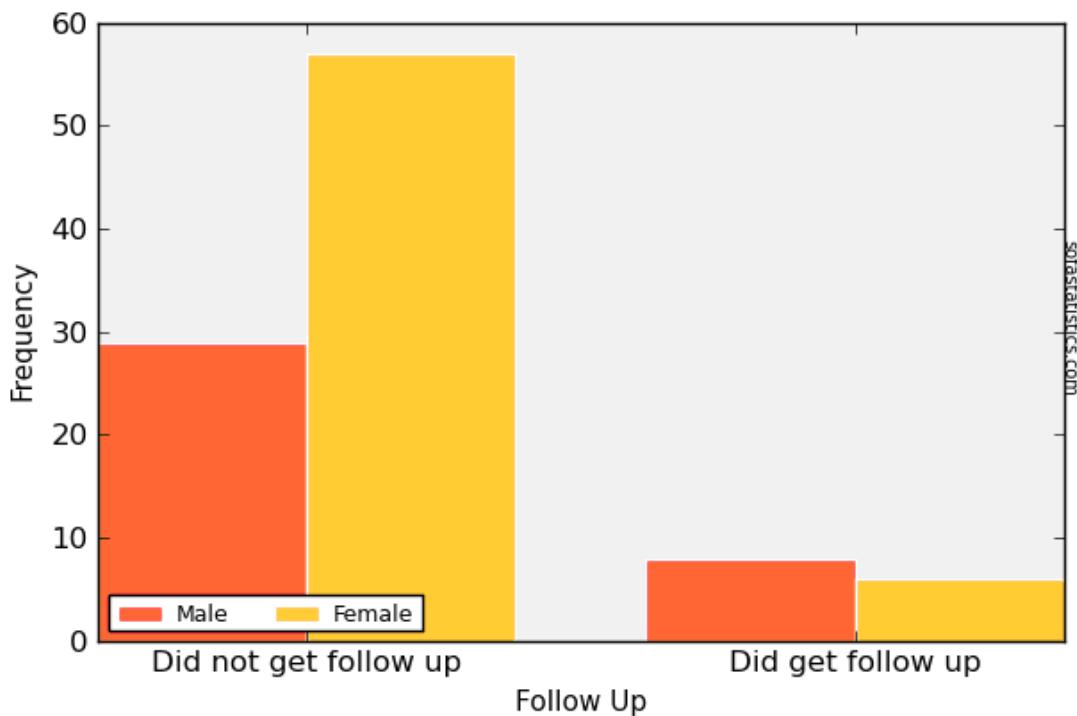


Figure 7: Follow up and gastroenterologist when diagnosis is positive - Proportion

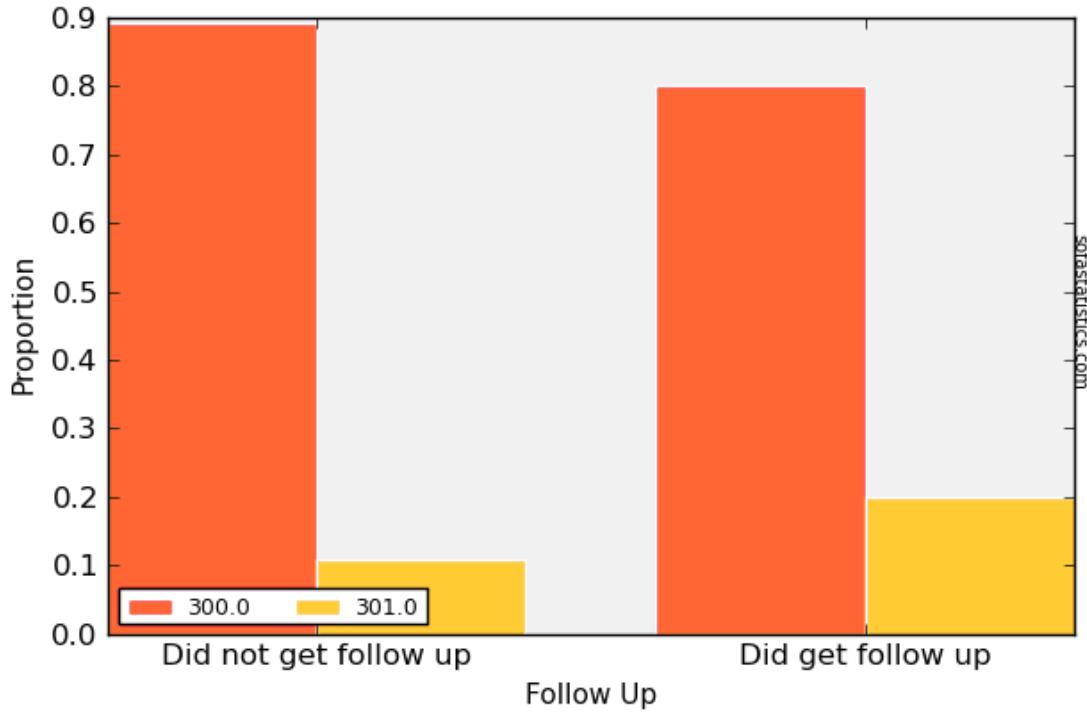


Figure 8: Follow up and gastroenterologist when diagnosis is positive – Frequency

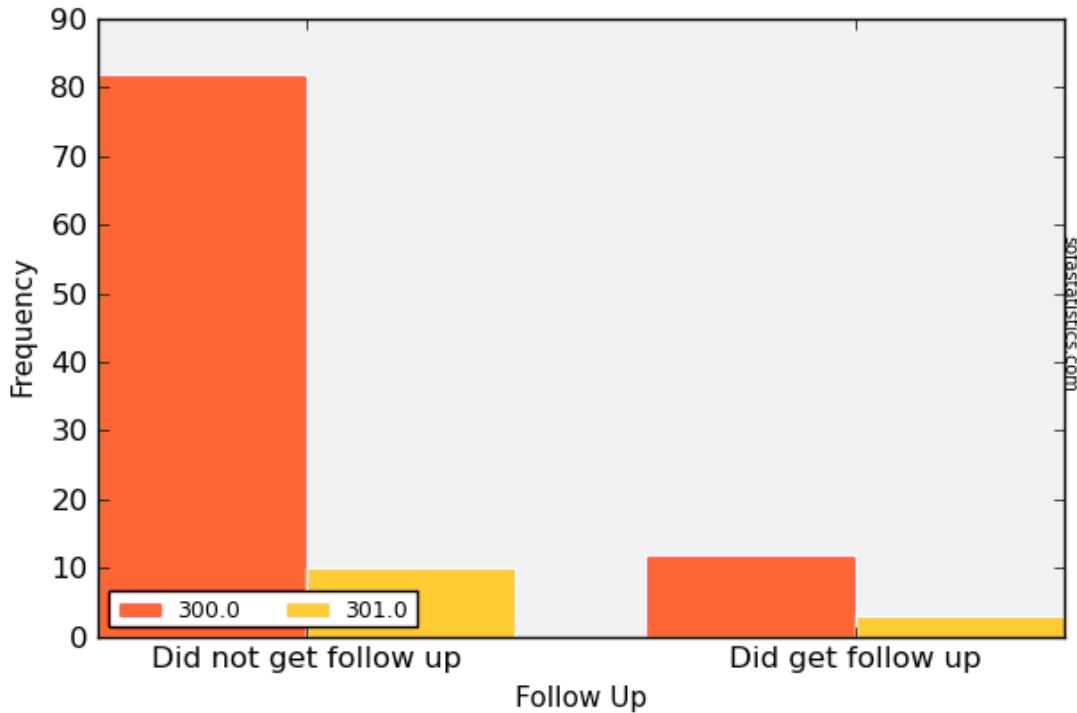


Figure 9: Follow up and referring doctor when diagnosis is negative - Proportion

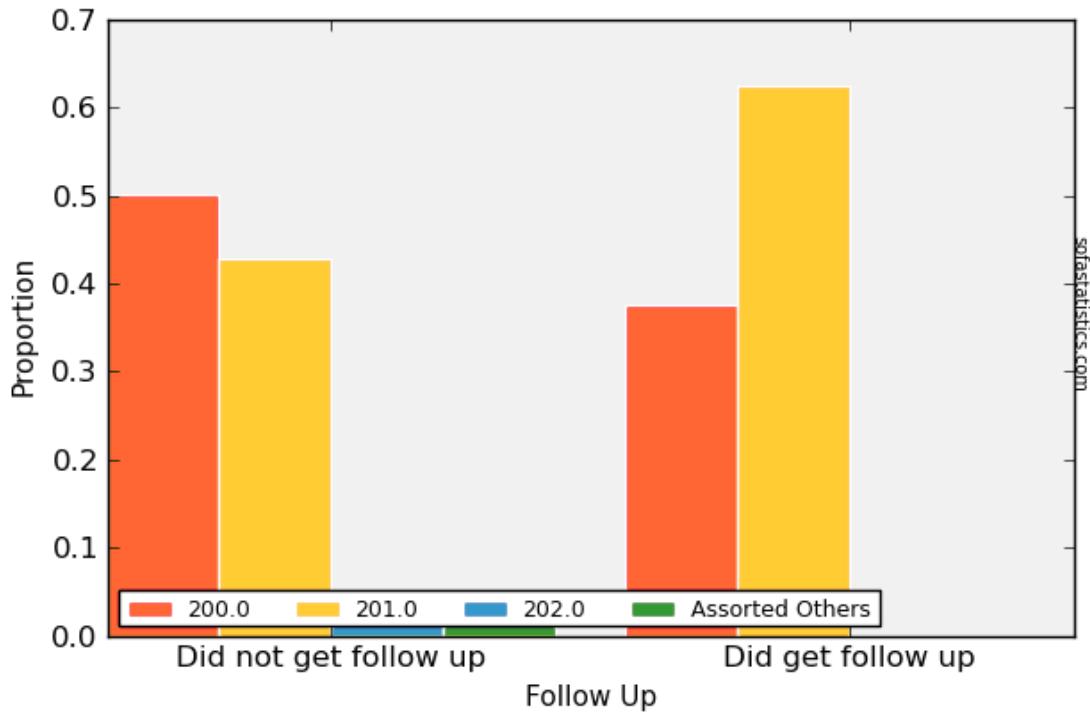


Figure 10: Follow up and referring doctor when diagnosis is negative – Frequency

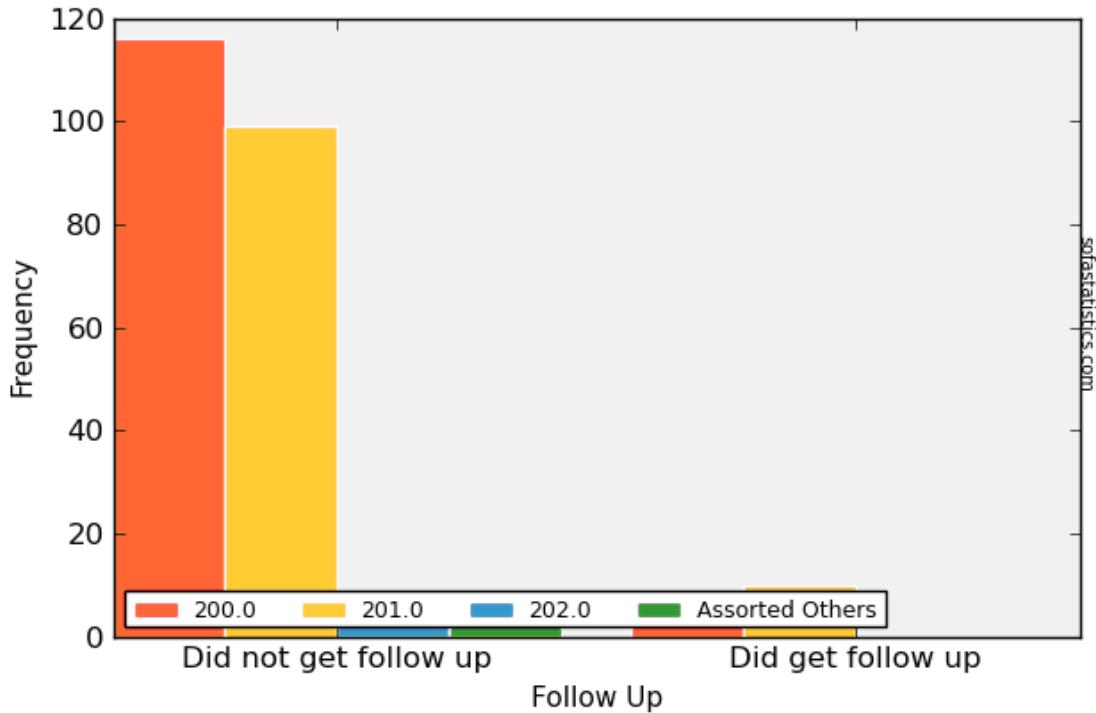


Figure 11: Follow up and age when diagnosis is negative - Proportion

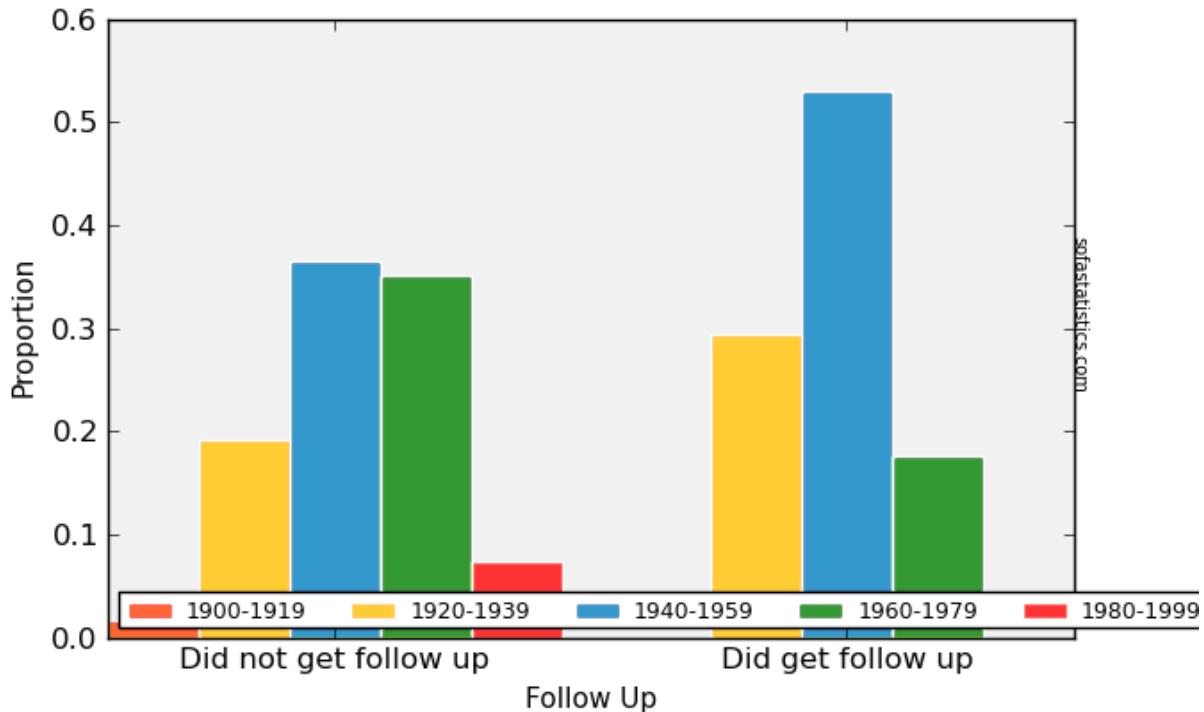


Figure 12: Follow up and age when diagnosis is negative – Frequency

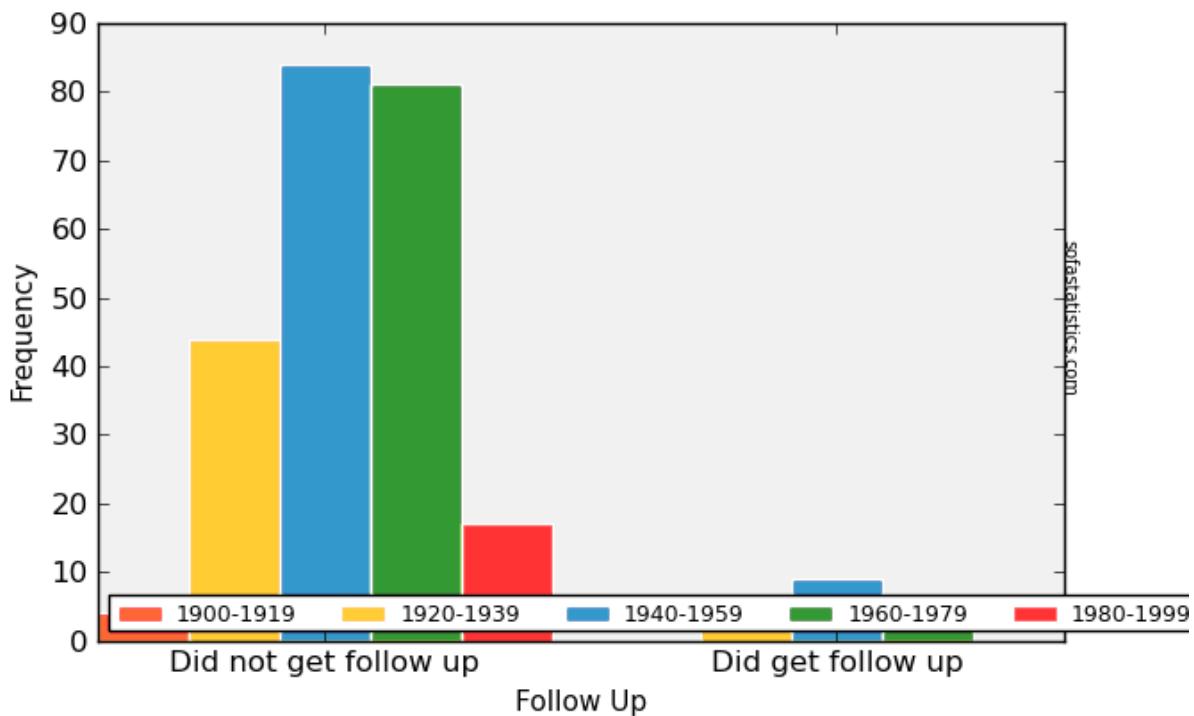


Figure 13: Follow up and gender when diagnosis is negative - Proportion

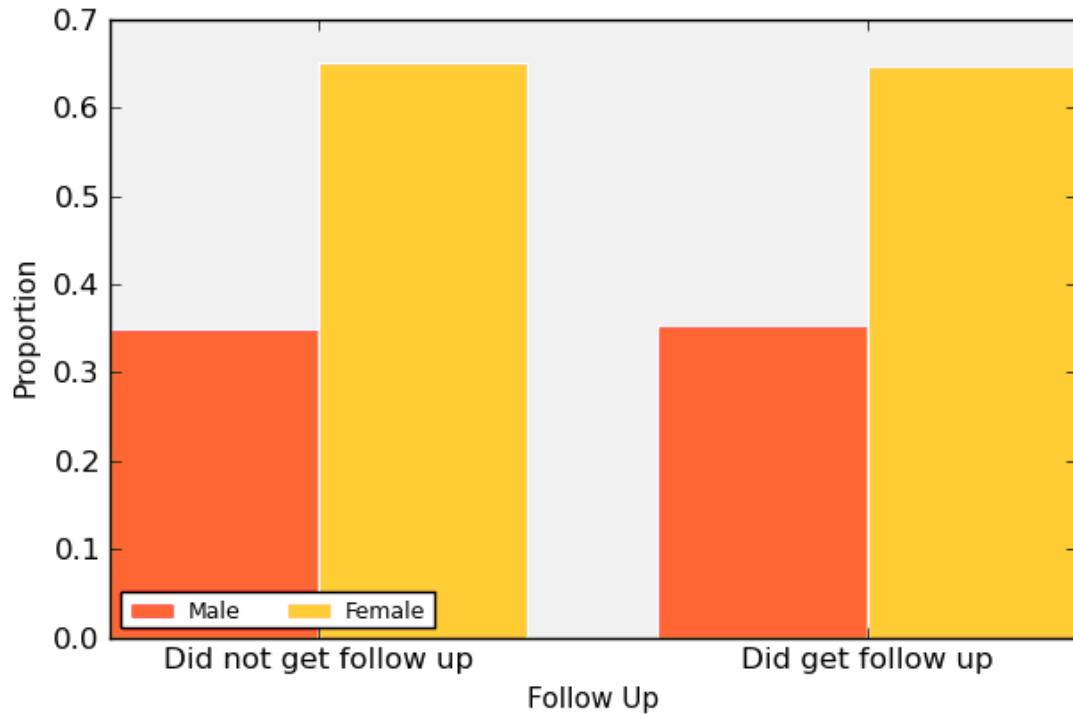


Figure 14: Follow up and gender when diagnosis is negative - Frequency

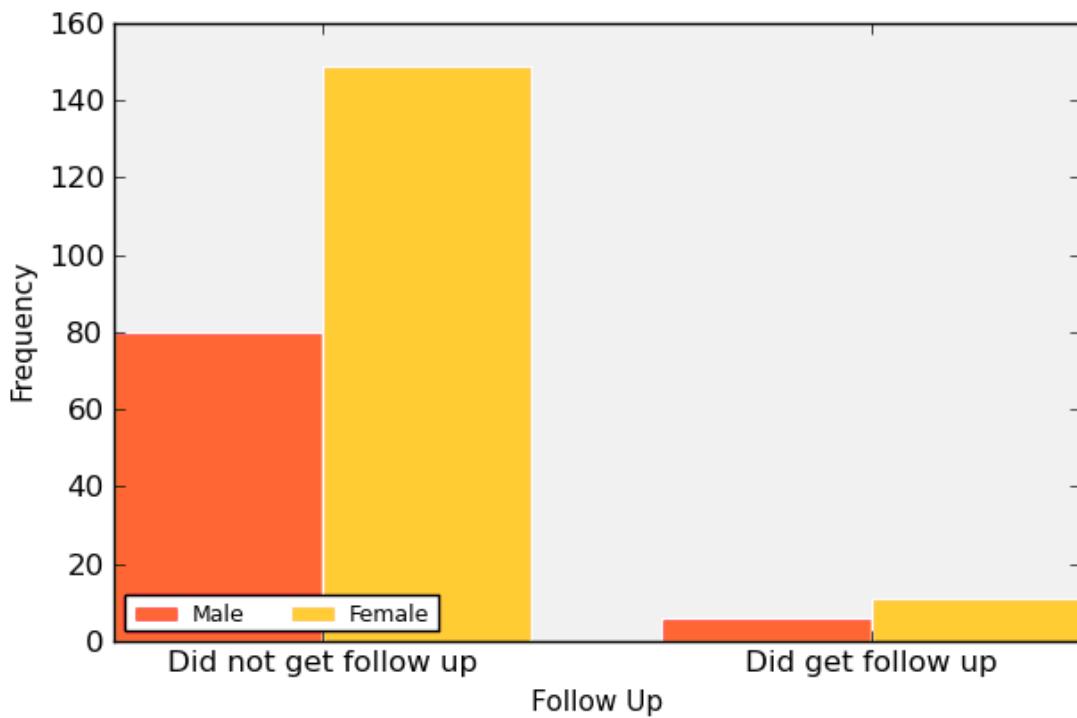


Figure 15: Follow up and gastroenterologist when diagnosis is negative – Proportion

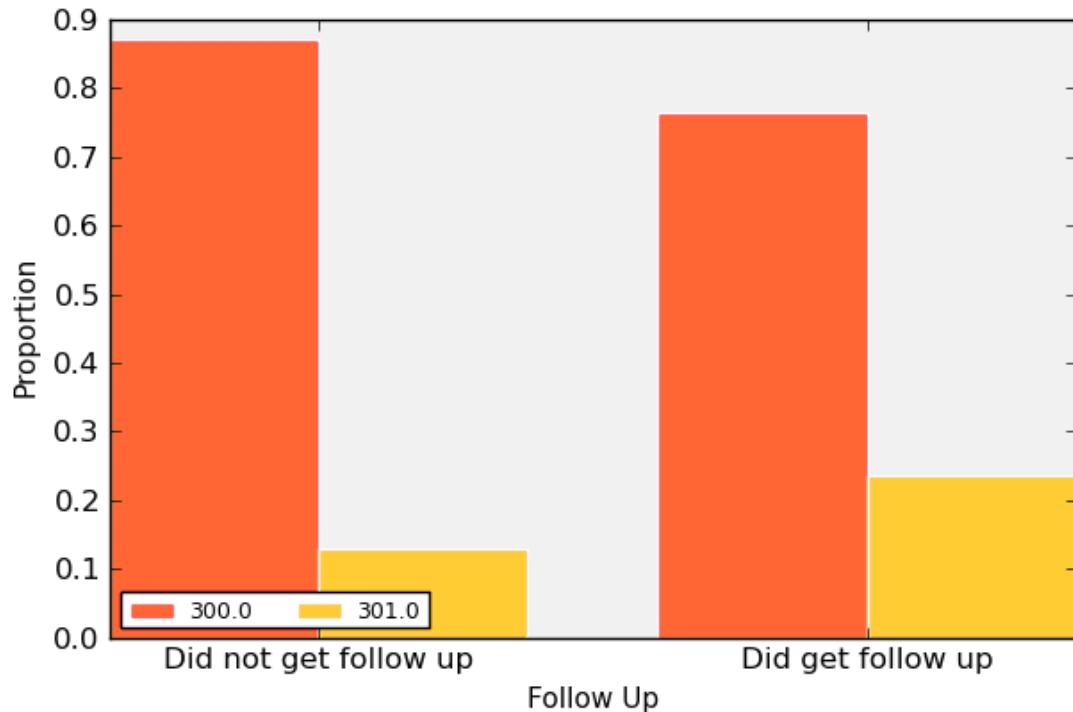


Figure 16: Follow up and gastroenterologist when diagnosis is negative – Frequency

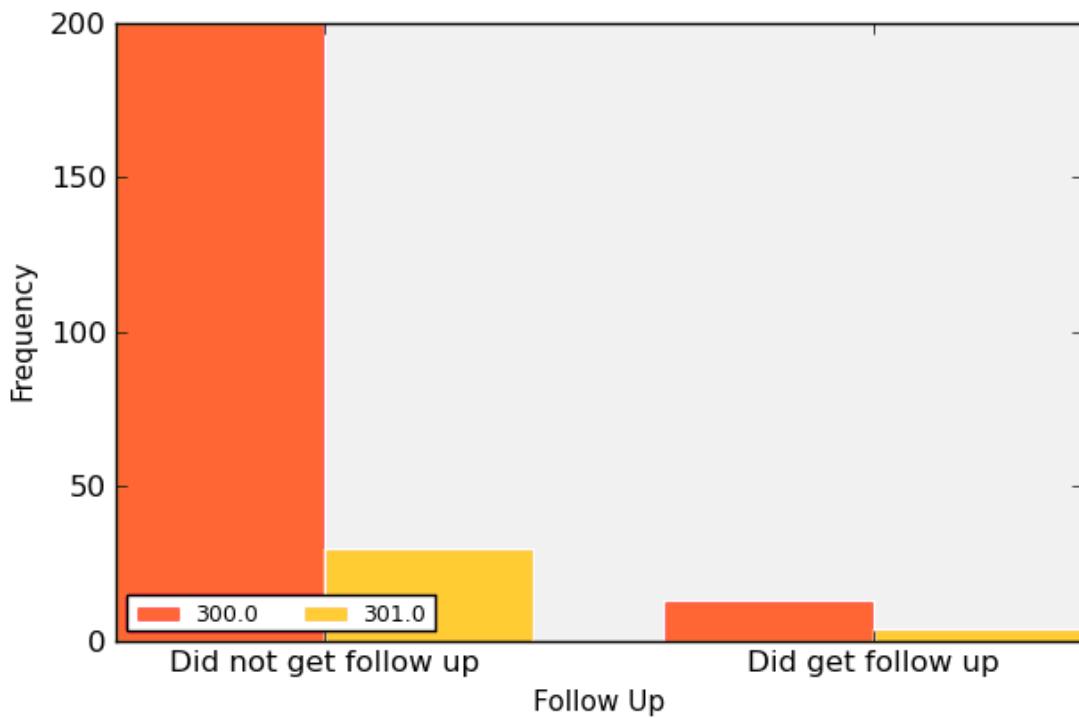


Figure 17: Gender and H. pylori diagnosis - Proportion

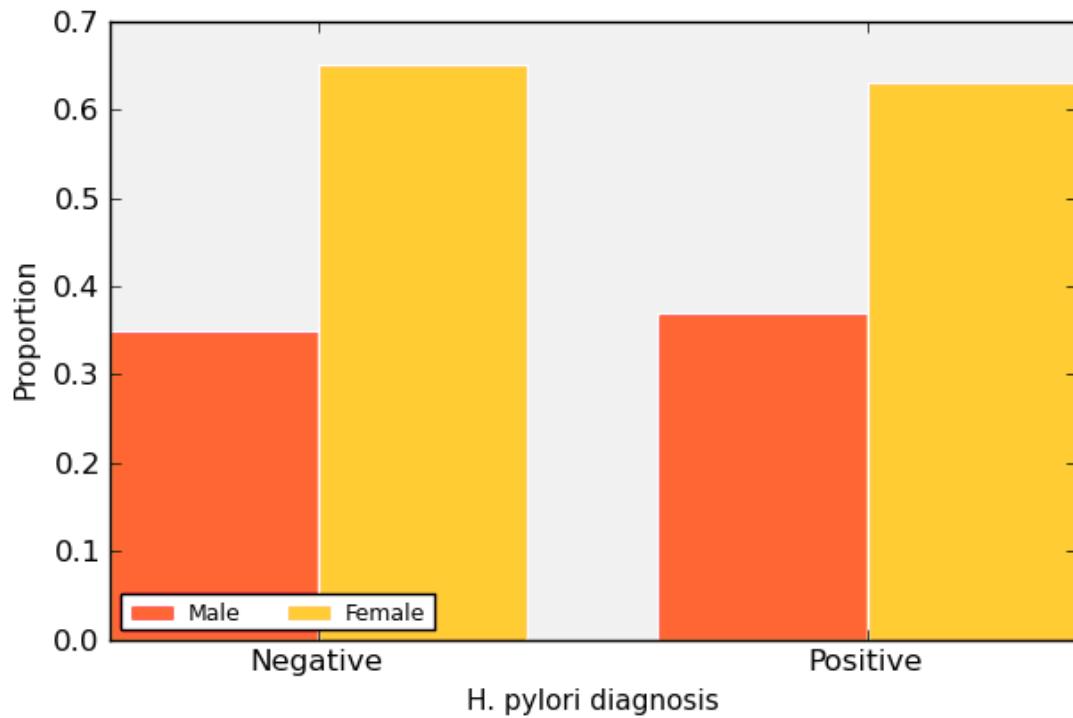
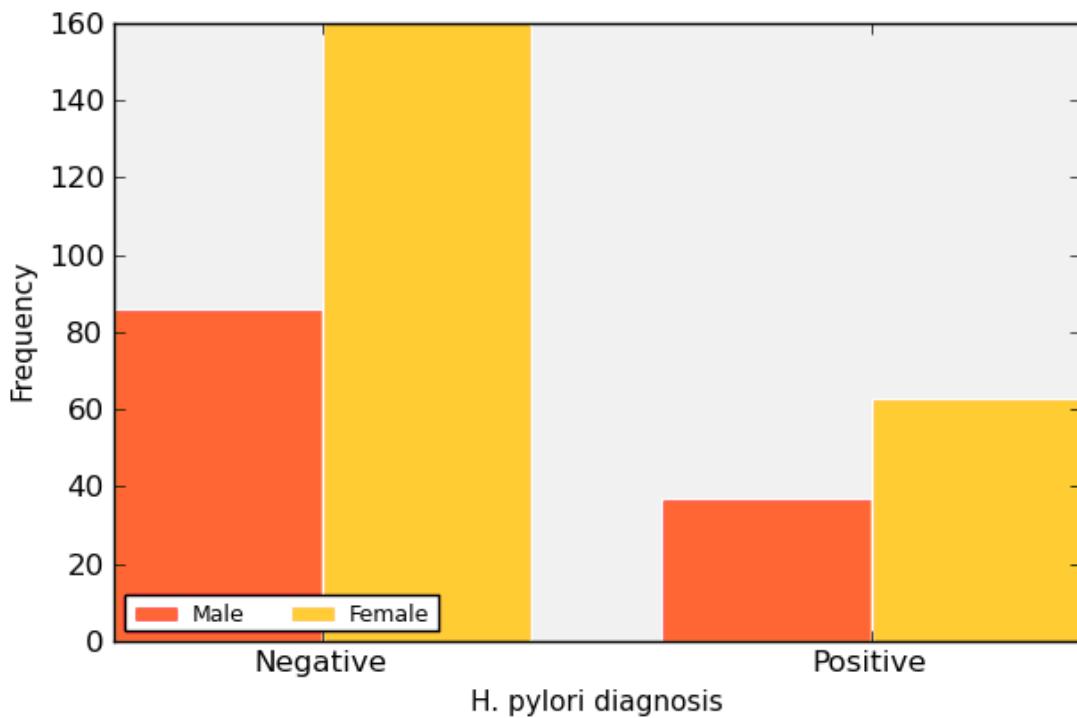


Figure 18: Gender and H. pylori diagnosis - Frequency



## rptFinalData

Med Rec number	Sex	DOB	had follow up	had positive	Accession Number	Signed By	Collected	Submitting	Positive For H Pylori
6399	F	2/21/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000220	300	2/27/2008	200	<input type="checkbox"/>
22294	M	10/12/1932	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000887	301	7/27/2007	202	<input type="checkbox"/>
26262	F	2/10/1954	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000162	300	2/12/2008	200	<input checked="" type="checkbox"/>
29584	F	1/15/1970	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000391	300	4/22/2009	200	<input type="checkbox"/>
32307	F	9/23/1934	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000189	300	2/25/2009	200	<input type="checkbox"/>
40306	F	1/11/1952	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001134	300	10/3/2007	200	<input type="checkbox"/>
41324	F	1/3/1939	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001182	300	10/17/2007	200	<input checked="" type="checkbox"/>
53808	F	11/26/1928	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000878	300	7/25/2007	200	<input type="checkbox"/>
62521	F	12/17/1964	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000535	300	5/14/2008	200	<input type="checkbox"/>
68517	M	11/13/1939	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000282	300	3/25/2009	200	<input checked="" type="checkbox"/>
74906	M	3/6/1933	<input type="checkbox"/>	<input type="checkbox"/>					

## Appendix 2 – Raw Data

<b>Med Rec number</b>	<b>Sex</b>	<b>DOB</b>	<b>had follow up</b>	<b>had positive</b>	<b>Accession Number</b>	<b>Signed By</b>	<b>Collected</b>	<b>Submitting Positive For H Pylori</b>
76805	F	1/3/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000331		300	4/7/2009 <input type="checkbox"/>
77927	F	8/14/1936	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000663	301	5/29/2007 <input type="checkbox"/>	200 <input type="checkbox"/>
80909	M	5/21/1944	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000807		300	7/23/2008 <input type="checkbox"/>
82909	F	4/25/1963	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001108		300	10/23/2009 <input type="checkbox"/>
87696	F	4/15/1933	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000621		300	5/16/2007 <input type="checkbox"/>
91147	M	10/26/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-10-0000021		300	1/6/2010 <input type="checkbox"/>
92012	F	5/5/1922	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000365		300	4/2/2008 <input type="checkbox"/>
92592	F	12/22/1969	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000498	301	5/13/2009 <input type="checkbox"/>	200 <input type="checkbox"/>
99279	M	3/29/1970	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001092		300	9/19/2007 <input type="checkbox"/>
102854	F	9/16/1984	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000089		300	1/28/2009 <input type="checkbox"/>
105831	M	12/19/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000094		300	1/28/2008 <input type="checkbox"/>
130745	F	1/13/1972	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000919		300	9/2/2009 <input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

54

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
135945	F	12/19/1936	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000343	300	3/27/2008	200	<input type="checkbox"/>
154768	F	5/20/1937	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000502	300	4/18/2007	200	<input type="checkbox"/>
155829	M	3/11/1941	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000505	300	4/18/2007	200	<input type="checkbox"/>
157936	F	9/3/1948	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000143	300	2/6/2008	201	<input type="checkbox"/>
162693	M	5/1/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000625	300	6/17/2009	200	<input checked="" type="checkbox"/>
165303	M	4/9/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000875	300	8/19/2009	200	<input type="checkbox"/>
172458	F	5/22/1949	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000415	300	3/26/2007	200	<input type="checkbox"/>
173404	F	3/9/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001025	300	9/24/2008	200	<input checked="" type="checkbox"/>
192264	F	9/24/1924	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0001013	300	9/23/2009	200	<input type="checkbox"/>
199167	F	5/25/1982	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001226	300	11/16/2008	200	<input checked="" type="checkbox"/>
212000	F	8/18/1947	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001184	301	11/13/2009	202	<input checked="" type="checkbox"/>
217405	M	3/1/1960	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001282	301	11/14/2007	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

55

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
218276	F	5/7/1928	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000538	301	4/25/2007	200	<input type="checkbox"/>
2222291	M	1/18/1956	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001297	300	12/8/2008	201	<input type="checkbox"/>
224698	M	5/12/1976	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001087	300	9/19/2007	200	<input type="checkbox"/>
224738	F	11/21/1944	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001286	301	11/14/2007	200	<input type="checkbox"/>
231043	M	1/6/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000464	300	4/9/2007	200	<input type="checkbox"/>
240295	F	5/8/1964	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001225	300	10/29/2007	201	<input type="checkbox"/>
241899	F	5/18/1946	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000550	300	4/30/2007	200	<input type="checkbox"/>
242983	F	9/29/1967	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000422	300	4/29/2009	200	<input type="checkbox"/>
244482	M	5/15/1968	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000811	301	7/23/2008	200	<input type="checkbox"/>
244602	M	3/26/1931	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000503	300	4/18/2007	200	<input type="checkbox"/>
245683	F	12/13/1963	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000668	300	6/24/2009	200	<input type="checkbox"/>
246187	M	2/5/1972	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001066	301	9/12/2007	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

56

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
246793	F	4/4/1936	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000769	300	7/14/2008	201	<input type="checkbox"/>
263319	F	5/10/1947	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000137	300	2/6/2008	200	<input checked="" type="checkbox"/>
267541	F	7/30/1926	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000508	300	5/6/2008	202	<input checked="" type="checkbox"/>
269147	F	12/31/1958	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000816	300	7/11/2007	200	<input type="checkbox"/>
275240	F	2/28/1981	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000285	300	3/12/2008	200	<input type="checkbox"/>
275634	F	8/26/1936	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000886	300	8/24/2009	201	<input type="checkbox"/>
278682	M	5/7/1941	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000745	300	6/20/2007	200	<input checked="" type="checkbox"/>
280685	M	12/29/1960	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000880	300	7/25/2007	200	<input type="checkbox"/>
283166	F	3/29/1972	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001101	300	10/15/2008	200	<input type="checkbox"/>
283750	F	12/8/1965	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000561	300	5/21/2008	200	<input type="checkbox"/>
284026	F	6/30/1952	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0000460	300	4/9/2007	200	<input type="checkbox"/>
					PS-09-0000390	300	4/22/2009	200	<input type="checkbox"/>
					PS-08-0001026	301	9/24/2008	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

57

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
286748	F	9/22/1955	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000018		300	1/7/2009	200
291882	F	7/22/1969	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000366		300	4/2/2008	200
292226	M	10/15/1915	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000364		300	4/2/2008	200
293117	F	10/21/1967	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001474		300	12/26/2007	200
293550	M	2/15/1955	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000874		300	7/25/2007	200
297770	M	7/21/1929	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000346		300	3/28/2008	204
298426	F	9/7/1968	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000743		300	6/20/2007	200
300739	F	10/22/1932	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000669		300	6/24/2009	200
301785	M	1/2/1962	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001021		300	9/28/2009	201
					PS-10-0000111		300	2/1/2010	201
302179	F	10/26/1962	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000810		301	7/23/2008	200
303106	M	3/12/1956	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000652		300	6/11/2008	201
					PS-08-0000435		300	4/22/2008	202

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

58

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
304198	F	1/24/1955	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001406	300	12/12/2007	200	<input type="checkbox"/>
307494	F	2/12/1970	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000866	301	7/20/2007	201	<input checked="" type="checkbox"/>
307904	M	3/18/1963	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0000551	300	4/30/2007	200	<input type="checkbox"/>
					PS-07-0000814	300	7/11/2007	200	<input type="checkbox"/>
312615	M	9/8/1973	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000873	300	8/19/2009	200	<input type="checkbox"/>
313073	F	7/14/1933	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000139	300	2/11/2009	200	<input checked="" type="checkbox"/>
313252	M	10/21/1957	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001440	300	12/19/2007	200	<input type="checkbox"/>
315534	F	2/1/1948	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0001443	300	12/19/2007	200	<input type="checkbox"/>
					PS-08-0000751	300	7/9/2008	206	<input type="checkbox"/>
316570	M	9/17/1957	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000908	300	8/29/2009	209	<input type="checkbox"/>
317213	M	7/19/1935	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000985	301	9/17/2009	202	<input type="checkbox"/>
317752	F	5/8/1968	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000743	300	7/5/2008	205	<input type="checkbox"/>
318791	F	9/19/1948	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS 08 0000808	300	7/23/2008	200	<input checked="" type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

59

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
318829	F	6/1/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001407	300	12/12/2007	200	<input type="checkbox"/>
321362	M	3/27/1925	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000888	301	7/27/2007	202	<input checked="" type="checkbox"/>
321671	M	11/3/1938	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000940	300	8/8/2007	200	<input type="checkbox"/>
325475	F	8/9/1965	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000537	300	5/14/2008	200	<input checked="" type="checkbox"/>
330417	F	11/18/1949	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001449	300	12/19/2007	201	<input checked="" type="checkbox"/>
333159	M	1/11/1973	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000161	300	2/12/2008	200	<input checked="" type="checkbox"/>
333628	F	4/10/1951	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001303	300	12/10/2008	200	<input type="checkbox"/>
3335256	F	2/5/1937	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000159	300	2/18/2009	201	<input type="checkbox"/>
335963	M	4/27/1975	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000493	300	4/16/2007	200	<input type="checkbox"/>
336605	M	12/12/1954	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000663	300	6/24/2009	200	<input checked="" type="checkbox"/>
340336	F	8/8/1939	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001304	300	12/10/2008	200	<input type="checkbox"/>
342539	F	6/23/1933	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000597	300	5/19/2007	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

60

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
343756	M	6/6/1945	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001137	300	10/3 /2007	200	<input type="checkbox"/>
343849	F	10/31/1968	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000222	300	2 /27/2008	200	<input type="checkbox"/>
345649	F	10/14/1929	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000996	301	8 /22/2007	201	<input type="checkbox"/>
345975	F	7/11/1947	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001309	300	12/9 /2009	200	<input type="checkbox"/>
346874	F	11/19/1939	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000358	300	4 /15/2009	200	<input type="checkbox"/>
346926	F	4/12/1941	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001236	300	10/31/2007	200	<input checked="" type="checkbox"/>
347897	F	4/6/1931	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000562	300	5 /21/2008	200	<input checked="" type="checkbox"/>
350086	F	10/8/1980	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000885	300	8 /13/2008	200	<input checked="" type="checkbox"/>
351246	M	2/16/1940	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000310	301	4 /1 /2009	200	<input type="checkbox"/>
352010	F	12/20/1983	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000474	300	4 /11/2007	200	<input type="checkbox"/>
352705	F	6/30/1949	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0001157	300	11/4 /2009	200	<input type="checkbox"/>
353577	F	9/15/1975	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001048	300	9 /30/2008	204	<input checked="" type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

61

Med Rec number	Sex	DOB	had follow up	had positive	Acction Number	Signed By	Collected	Submitting	Positive For H Pylori
354335	F	11/20/1948	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000671	300	5/31/2007	200	<input type="checkbox"/>
354644	F	11/11/1975	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0000595	300	5/9/2007	200	<input type="checkbox"/>
355242	M	2/15/1957	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001103	300	10/15/2008	200	<input type="checkbox"/>
355679	M	5/25/1973	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000666	300	6/24/2009	200	<input type="checkbox"/>
361066	M	2/21/1970	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000544	300	4/27/2007	200	<input checked="" type="checkbox"/>
361572	M	11/26/1974	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000920	300	9/2/2009	200	<input checked="" type="checkbox"/>
362109	F	6/5/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001327	300	11/28/2007	200	<input type="checkbox"/>
362577	M	10/9/1964	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000667	300	5/30/2007	200	<input checked="" type="checkbox"/>
364069	M	5/3/1941	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000281	300	3/25/2009	200	
364673	F	12/21/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000381	300	4/9/2008	201	<input type="checkbox"/>
366378	M	5/10/1951	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000077	300	1/23/2008	200	<input type="checkbox"/>
					PS-10-0000019	300	1/6/2010	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

62

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
366679	M	4/4/1971	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000523	301	4/23/2007	200	<input type="checkbox"/>
366903	M	3/13/1924	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-08-0000301	301	3/17/2008	201	<input type="checkbox"/>
366908	F	6/16/1969	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001073	300	10/13/2009	201	<input type="checkbox"/>
367527	M	10/19/1941	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000942	300	8/8/2007	200	<input type="checkbox"/>
367771	M	8/17/1939	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0001363	300	12/5/2007	200	<input type="checkbox"/>
367806	M	9/28/1933	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0000864	301	7/20/2007	201	<input type="checkbox"/>
367809	M	1/19/1925	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000922	300	8/3/2007	201	<input type="checkbox"/>
368019	F	3/20/1960	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0000564	300	5/2/2007	201	<input type="checkbox"/>
					PS-09-0000321	300	4/6/2009	201	<input type="checkbox"/>
					PS-09-0000996	300	9/18/2009	201	<input checked="" type="checkbox"/>
					PS-07-0001187	300	10/17/2007	201	<input checked="" type="checkbox"/>
					PS-08-0000410	300	4/16/2008	200	<input type="checkbox"/>
					PS-07-0001089	300	9/19/2007	200	<input type="checkbox"/>
					PS-08-0000136	300	2/6/2008	200	<input type="checkbox"/>
1001232	F	8/7/1908	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000457	300	4/6/2007	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

63

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1001333	M	11/4/1972	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000494	300	4/16/2007	200	<input type="checkbox"/>
1001354	F	5/30/1932	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000048	300	1/16/2008	201	<input checked="" type="checkbox"/>
					PS-08-0000831	300	7/28/2008	201	<input type="checkbox"/>
1001586	F	6/20/1962	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000473	300	4/11/2007	200	<input checked="" type="checkbox"/>
1001672	F	7/14/1977	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000524	301	4/23/2007	200	<input type="checkbox"/>
1002221	M	7/20/1960	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000506	300	4/18/2007	201	<input type="checkbox"/>
1002455	F	9/8/1947	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000516	300	4/20/2007	201	<input type="checkbox"/>
1002461	F	11/1/1976	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000514	300	4/20/2007	201	<input type="checkbox"/>
1002547	M	1/22/1947	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000536	301	4/25/2007	200	<input checked="" type="checkbox"/>
1002608	F	4/27/1975	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000528	301	4/23/2007	201	<input type="checkbox"/>
1003102	M	4/11/1938	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000546	300	4/27/2007	201	<input type="checkbox"/>
1003317	F	8/30/1989	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000689	300	6/6/2007	200	<input type="checkbox"/>
1003414	F	9/19/1942	<input checked="" type="checkbox"/>	<input type="checkbox"/>					

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

64

Med Rec number	Sex	DOB	had follow up	had positive	Acquisition Number	Signed By	Collected	Submitting	Positive For H Pylori
1003628	M	7/11/1974	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000565 PS-08-0000729	300 301	5/12/2007 7/12/2008	201	<input type="checkbox"/>
1003673	F	4/8/1982	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000574	300	5/4/2007	201	<input type="checkbox"/>
1003709	F	7/29/1973	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001251	300	11/2/2007	200	<input checked="" type="checkbox"/>
1003771	F	8/7/1974	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000578	300	5/12/2007	200	<input type="checkbox"/>
1003773	F	8/9/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000584	300	5/7/2007	201	<input checked="" type="checkbox"/>
1003955	F	7/13/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000585	300	5/7/2007	201	<input type="checkbox"/>
1003956	M	11/5/1970	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000602	300	5/9/2007	201	<input type="checkbox"/>
1004010	M	9/4/1965	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000601	300	5/9/2007	201	<input type="checkbox"/>
1004104	F	2/11/1974	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000643	300	5/22/2007	202	<input type="checkbox"/>
1004310	F	3/20/1983	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000614	300	5/14/2007	200	<input type="checkbox"/>
1004408	F	12/8/1951	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000622	300	5/16/2007	200	<input checked="" type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

65

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1004598	F	6/25/1936	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000633	301	5/18/2007	201	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
					PS-08-0000501	300	5/5/2008	201	<input type="checkbox"/>
					PS-08-0000856	300	8/4/2008	201	<input type="checkbox"/>
1004665	F	8/30/1985	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001439	300	12/19/2007	200	<input checked="" type="checkbox"/> <input type="checkbox"/>
					PS-09-0000698	300	7/11/2009	200	<input type="checkbox"/>
1005619	M	8/5/1927	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001227	300	10/29/2007	201	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
					PS-07-0000678	300	6/11/2007	201	<input checked="" type="checkbox"/>
1005823	F	11/8/1977	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000683	300	6/4/2007	201	<input type="checkbox"/>
					PS-07-0000695	300	6/4/2007	201	<input type="checkbox"/>
1006014	M	11/20/1966	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000682	300	6/18/2008	200	<input checked="" type="checkbox"/>
					PS-08-0000730	300	6/15/2007	201	<input type="checkbox"/>
1006526	F	11/24/1958	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000731	300	6/15/2007	201	<input type="checkbox"/> <input type="checkbox"/>
					PS-08-0000252	300	3/5/2008	201	<input checked="" type="checkbox"/> <input type="checkbox"/>
1006734	F	9/24/1956	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000359	300	4/15/2009	200	<input type="checkbox"/>
1006735	F	7/22/1959	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
1007239	M	6/19/1981	<input type="checkbox"/>	<input type="checkbox"/>					
1007872	M	11/8/1965	<input type="checkbox"/>	<input type="checkbox"/>					

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

66

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1007873	M	4/25/1990	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000770	300	6/29/2007	201	<input type="checkbox"/>
					PS-07-0000769	300	6/29/2007	201	<input checked="" type="checkbox"/>
					PS-07-0001148	300	10/8/2007	201	<input checked="" type="checkbox"/>
					PS-09-0000175	300	2/20/2009	201	<input checked="" type="checkbox"/>
1007878	F	3/16/1962	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000768	300	6/29/2007	201	<input type="checkbox"/>
1008043	F	3/5/1950	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-08-0000389	300	4/10/2008	201	<input type="checkbox"/>
					PS-09-0001306	301	12/8/2009	201	<input type="checkbox"/>
1008047	F	9/19/1941	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000774	300	7/2/2007	201	<input type="checkbox"/>
1008056	F	2/7/1957	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000776	300	7/2/2007	201	<input type="checkbox"/>
1008057	F	9/9/1941	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000777	300	7/2/2007	201	<input checked="" type="checkbox"/>
1008155	F	6/6/1961	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000361	300	4/15/2009	200	<input type="checkbox"/>
1008380	F	4/13/1945	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000792	300	7/6/2007	201	<input type="checkbox"/>
1008503	F	9/25/1937	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001348	300	12/3/2007	201	<input type="checkbox"/>
1008504	F	10/10/1934	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000800	300	7/9/2007	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

67

Med Rec number	Sex	DOB	had follow up	had positive	Acquisition Number	Signed By	Collected	Submitting	Positive For H Pylori
1008527	F	3/6/1964	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000883	300	8/13/2008	201	<input type="checkbox"/>
1008679	M	10/29/1923	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000815	300	7/11/2007	200	<input checked="" type="checkbox"/>
1009638	F	8/8/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000862	301	7/20/2007	201	<input type="checkbox"/>
1009640	F	2/8/1972	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000865	301	7/20/2007	201	<input checked="" type="checkbox"/>
1009849	F	11/3/1969	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001389	300	12/23/2009	201	<input type="checkbox"/>
1010477	M	1/18/1948	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001289	300	12/8/2008	201	<input type="checkbox"/>
1010819	F	6/23/1965	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001114	300	9/26/2007	200	<input checked="" type="checkbox"/>
1010898	F	7/9/1935	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001268	300	11/7/2007	201	<input checked="" type="checkbox"/>
1010922	F	1/9/1956	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001185	300	10/17/2007	201	<input type="checkbox"/>
1011260	M	11/4/1982	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000943	300	8/8/2007	200	<input type="checkbox"/>
1011525	F	8/9/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0000955	300	8/10/2007	201	<input type="checkbox"/>
1011669	M	1/17/1924	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-07-0000964	300	8/13/2007	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

68

Med Rec number	Sex	DOB	had follow up	had positive	Acquisition Number	Signed By	Collected	Submitting	Positive For H Pylori
1011747	F	10/11/1927	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000747	301	7/16/2009	201	<input type="checkbox"/>
1012097	F	7/11/1967	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001350	300	12/3/2007	201	<input type="checkbox"/>
1012393	F	2/13/1967	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001211	300	10/24/2007	201	<input type="checkbox"/>
1012476	M	10/27/1936	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0000973	301	8/17/2007	201	<input checked="" type="checkbox"/>
1012682	M	3/26/1944	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000511	300	5/7/2008	200	<input type="checkbox"/>
1012683	F	1/26/1965	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001012	301	8/22/2007	201	<input checked="" type="checkbox"/>
1012684	M	1/18/1951	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001008	301	8/24/2007	201	<input type="checkbox"/>
1012686	F	7/16/1940	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001009	301	8/24/2007	201	<input checked="" type="checkbox"/>
1012939	F	5/8/1977	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000231	300	2/28/2008	201	<input checked="" type="checkbox"/>
1013301	F	5/14/1973	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000693	300	6/23/2008	201	<input checked="" type="checkbox"/>
					PS-09-0001003	301	9/21/2009	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

69

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1013604	M	5/26/1923	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000221	300	2/27/2008	200	<input type="checkbox"/>
1014684	F	3/28/1936	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001241	300	10/31/2007	201	<input type="checkbox"/>
1014687	F	3/1/1951	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001099	300	9/21/2007	201	<input checked="" type="checkbox"/>
1015044	F	6/14/1935	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001467	300	12/21/2007	201	<input type="checkbox"/>
1015574	F	8/1/1919	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001116	300	9/26/2007	201	<input checked="" type="checkbox"/>
1015856	F	7/31/1938	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000062	300	1/21/2008	202	<input type="checkbox"/>
1015998	F	5/12/1961	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000832	300	7/28/2008	201	<input type="checkbox"/>
1016291	F	10/11/1937	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001235	300	10/31/2007	200	<input type="checkbox"/>
1016372	F	3/17/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001213	300	10/24/2007	201	<input checked="" type="checkbox"/>
1016373	M	7/31/1979	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001168	300	10/12/2007	201	<input type="checkbox"/>
1016579	F	12/9/1953	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001166	300	10/12/2007	201	<input type="checkbox"/>
1016581	F	12/19/1951	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001176	300	10/15/2007	201	<input checked="" type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

70

<b>Med Rec number</b>	<b>Sex</b>	<b>DOB</b>	<b>had follow up</b>	<b>had positive</b>	<b>Acception Number</b>	<b>Signed By</b>	<b>Collected</b>	<b>Submitting</b>	<b>Positive For H Pylori</b>
1016746	M	2/9/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001175	300	10/15/2007	201	<input type="checkbox"/>
1016753	M	8/9/1971	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001184	300	10/17/2007	201	<input type="checkbox"/>
1017157	M	8/28/1977	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001196	300	10/18/2007	203	<input checked="" type="checkbox"/>
1017264	F	8/29/1935	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001208	300	10/24/2007	200	<input type="checkbox"/>
1017265	F	2/27/1967	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001214	300	10/24/2007	201	<input type="checkbox"/>
1017479	M	8/21/1978	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000829	300	7/28/2008	201	<input checked="" type="checkbox"/>
1017481	F	9/18/1955	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001212	300	10/24/2007	201	<input type="checkbox"/>
1017609	F	9/25/1934	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001219	300	10/26/2007	201	<input type="checkbox"/>
1017623	F	2/7/1980	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001220	300	10/26/2007	201	<input type="checkbox"/>
1017774	M	11/29/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001362	300	12/5/2007	200	<input type="checkbox"/>
1018114	M	12/18/1961	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001228	300	10/29/2007	201	<input type="checkbox"/>
					PS-07-0001242	300	10/31/2007	201	<input type="checkbox"/>
					PS-07-0001265	300	11/7/2007	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

71

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1018132	F	2/25/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001217	300	11/17/2009	210	<input type="checkbox"/>
1018135	F	3/26/1960	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001258	300	11/5/2007	201	<input type="checkbox"/>
1018137	F	10/26/1943	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-07-0001470	300	12/21/2007	201	<input checked="" type="checkbox"/>
1018859	M	8/23/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001332	300	11/28/2007	201	<input type="checkbox"/>
1018860	M	4/30/1935	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000311	301	4/1/2009	200	<input type="checkbox"/>
1018861	M	8/25/1939	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000883	300	8/21/2009	201	<input type="checkbox"/>
1019754	F	10/3/1947	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001267	300	12/3/2008	200	<input type="checkbox"/>
1019883	M	12/11/1939	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001343	300	11/30/2007	201	<input type="checkbox"/>
1020049	F	1/6/1973	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001367	300	12/5/2007	200	<input type="checkbox"/>
1020075	F	8/26/1931	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001349	300	12/3/2007	201	<input type="checkbox"/>
1020155	M	3/22/1969	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001368	300	12/5/2007	201	<input type="checkbox"/>
1020160	F	8/9/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001372	300	12/5/2007	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

72

Med Rec number	Sex	DOB	had follow up	had positive	Acquisition Number	Signed By	Collected	Submitting Positive For H Pylori
1020197	F	5/6/1922	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000996	300	9/17/2008	200
1020482	F	1/9/1944	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001396	300	12/10/2007	201
1020679	F	4/24/1965	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001429	300	12/17/2007	201
1020989	F	8/3/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001430	300	12/17/2007	201
1021185	F	3/21/1976	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001452	300	12/19/2007	201
1021209	F	12/31/1932	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001450	300	12/19/2007	201
1021231	F	6/21/1933	<input type="checkbox"/>	<input type="checkbox"/>	PS-07-0001468	300	12/21/2007	201
1021518	M	6/4/1967	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001158	301	11/4/2009	200
1021824	F	1/14/1933	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000534	300	5/14/2008	200
1021928	M	8/19/1980	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000594	300	5/29/2008	205
1022210	M	2/3/1939	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000095	300	1/28/2008	201
1022439	F	7/10/1950	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000023	300	1/9/2008	201

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

73

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1022962	F	8/1/1953	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000047	300	1/16/2008	201	<input type="checkbox"/>
1022963	F	5/17/1942	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000049	300	1/16/2008	201	<input type="checkbox"/>
1023357	F	11/4/1961	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000063	300	1/21/2008	201	<input type="checkbox"/>
1023565	F	6/30/1930	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000090	300	1/25/2008	200	<input checked="" type="checkbox"/>
1023895	M	2/9/1955	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000103	300	1/30/2008	200	<input type="checkbox"/>
1023996	F	6/9/1962	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000106	300	1/30/2008	201	<input type="checkbox"/>
1023998	F	4/10/1943	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000909	300	8/18/2008	201	<input type="checkbox"/>
1024012	F	7/20/1975	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000107	300	1/30/2008	201	<input type="checkbox"/>
1024338	JKNOW	11/10/1956	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000141	300	2/6/2008	201	<input type="checkbox"/>
1024953	F	6/4/1985	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000157	300	2/11/2008	201	<input type="checkbox"/>
1024954	F	7/16/1938	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000183	300	2/18/2008	201	<input type="checkbox"/>
1024955	F	12/17/1928	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000160	300	2/11/2008	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

74

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1025112	M	8/1/1966	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000169	300	2/13/2008	201	<input type="checkbox"/>
1025411	M	4/18/1942	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000418	300	4/17/2008	202	<input type="checkbox"/>
1025691	F	5/2/1932	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000196	300	2/20/2008	201	<input checked="" type="checkbox"/>
1026290	F	5/1/1965	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000232	300	2/28/2008	201	<input type="checkbox"/>
1026294	F	2/2/1945	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000233	300	2/28/2008	201	<input checked="" type="checkbox"/>
1026607	M	10/3/1946	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000534	300	5/26/2009	201	<input type="checkbox"/>
1027165	M	2/26/1931	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001292	300	12/8/2008	201	<input checked="" type="checkbox"/>
1027309	M	2/4/1969	<input type="checkbox"/>	<input type="checkbox"/>	PS-10-0000049	301	1/14/2010	201	<input type="checkbox"/>
1027311	M	8/7/1942	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000281	300	3/12/2008	201	<input type="checkbox"/>
1027682	F	7/9/1948	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-08-0000282	300	3/12/2008	201	<input checked="" type="checkbox"/>
					PS-08-0001208	300	11/14/2008	201	<input type="checkbox"/>
					PS-08-0001288	300	12/8/2008	201	<input type="checkbox"/>
1027711	F	12/24/1920	<input type="checkbox"/>	<input type="checkbox"/>	PS 08 0000302	301	3/17/2008	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

75

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1028234	F	12/16/1959	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000329	300	3/24/2008	201	<input checked="" type="checkbox"/>
1028235	F	7/4/1949	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000330	300	3/24/2008	201	<input checked="" type="checkbox"/>
1028304	F	7/29/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001266	300	12/3/2008	200	<input checked="" type="checkbox"/>
1028578	F	10/23/1963	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000361	300	4/12/2008	200	<input checked="" type="checkbox"/>
1029514	F	3/19/1935	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000391	300	4/10/2008	201	<input checked="" type="checkbox"/>
1029768	M	7/29/1941	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-08-0000558	300	5/21/2008	200	<input type="checkbox"/> <input type="checkbox"/>
1029844	M	5/20/1959	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000494	301	5/13/2009	200	<input type="checkbox"/>
1030722	M	8/23/1980	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000412	300	4/16/2008	200	<input type="checkbox"/>
1030749	F	10/25/1940	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000783	301	7/16/2008	200	<input checked="" type="checkbox"/>
1030938	F	8/6/1951	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000469	300	4/28/2008	201	<input checked="" type="checkbox"/>
1030990	F	1/21/1963	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000663	300	6/16/2008	201	<input type="checkbox"/>
1031273	M	1/23/1984	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000487	300	5/1/2008	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

76

Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1031306	M	11/9/1978	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000499		300	5/5/2008	201
1031685	M	5/30/1975	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000516		300	5/7/2008	200
1032117	F	9/24/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001124		300	10/22/2008	200
1032466	M	2/12/1937	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000546		300	5/16/2008	201
1032467	M	12/15/1960	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000564		300	5/21/2008	201
1032496	M	7/15/1947	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000565		300	5/21/2008	201
1033612	F	11/19/1923	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000707		300	6/25/2008	201
1033748	M	8/1/1969	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000782		301	7/16/2008	200
1033848	F	11/18/1971	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000644		300	6/9/2008	201
1033906	F	3/29/1963	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000888		300	8/13/2008	201
1034780	F	3/16/1962	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000673		300	6/18/2008	200
					PS-08-0000651		300	6/11/2008	201
					PS-08-0000712		300	6/25/2008	200

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

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Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1035262	F	3/21/1964	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000724	300	6/30/2008	201	<input type="checkbox"/>
1035871	M	5/2/1934	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000756	300	7/9/2008	201	<input checked="" type="checkbox"/>
1036021	F	7/26/1978	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000781	301	7/16/2008	200	<input checked="" type="checkbox"/>
1036190	F	1/20/1943	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000767	300	7/14/2008	201	<input type="checkbox"/>
1036511	F	1/4/1962	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-10-0000020	300	1/6/2010	200	<input type="checkbox"/>
1037039	F	7/6/1959	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000824	300	7/25/2008	201	<input type="checkbox"/>
1037343	F	6/27/1965	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000843	300	7/30/2008	201	<input checked="" type="checkbox"/>
1037649	M	6/12/1928	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000855	300	8/4/2008	201	<input checked="" type="checkbox"/>
1037653	M	3/7/1958	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000861	300	8/6/2008	201	<input type="checkbox"/>
1037759	F	4/15/1937	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000854	300	8/4/2008	201	<input type="checkbox"/>
1038105	M	5/15/1961	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000881	300	8/13/2008	200	<input type="checkbox"/>
1038270	M	1/15/1943	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0000897	300	8/15/2008	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

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Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1038608	F	2/28/1973	☒	☒	PS-08-0001199	301	11/12/2008	200	□
1040609	F	9/15/1962	□	□	PS-09-0000737 PS-08-0000908	300 300	7/13/2009 8/18/2008	201 201	□ ☒
1040691	M	11/16/1971	□	☒	PS-08-0001271	301	12/3/2008	200	□
1041118	F	5/9/1925	□	□	PS-08-0000997	300	9/17/2008	200	☒
1041437	M	5/6/1937	□	□	PS-08-0001023	300	9/23/2008	202	□
1042514	F	9/25/1947	☒	□	PS-08-0001296	300	12/8/2008	201	□
1045690	M	8/11/1939	□	☒	PS-08-0000679 PS-08-0000830 PS-07-0000437 PS-07-0001161 PS-08-0000380	300 300 300 300 300	6/18/2008 7/28/2008 4/2/2007 10/8/2007 4/9/2008	201 201 201 201 201	□ □ □ □ □
1045732	F	3/31/1983	□	□	PS-08-0001265	300	12/3/2008	201	☒
1045741	F	12/11/1983	□	□	PS-08-0001270 PS-08-0001273	301 301	12/3/2008 12/3/2008	200 201	□ □

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

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Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1045754	F	12/9/1916	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001320	300	12/12/2008	207	<input type="checkbox"/>
1045972	F	1/19/1973	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001293	300	12/8/2008	201	<input type="checkbox"/>
1045973	F	10/16/1982	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001294	300	12/8/2008	201	<input type="checkbox"/>
1045974	F	2/28/1977	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001290	300	12/8/2008	201	<input type="checkbox"/>
1045987	F	5/14/1944	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001295	300	12/8/2008	201	<input type="checkbox"/>
1046067	F	11/10/1949	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001286	300	12/8/2008	201	<input type="checkbox"/>
1046253	M	12/16/1941	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001323	300	12/12/2008	201	<input checked="" type="checkbox"/>
1046519	M	11/7/1943	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001336	300	12/17/2008	200	<input checked="" type="checkbox"/>
1046558	M	11/6/1966	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0001335	300	12/17/2008	200	<input checked="" type="checkbox"/>
1046560	F	4/17/1951	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000516	301	5/20/2009	200	<input type="checkbox"/>
1046562	M	9/28/1981	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000017	300	1/7/2009	200	<input type="checkbox"/>
1047969	F	4/8/1947	<input type="checkbox"/>	<input type="checkbox"/>	PS-08-0001337	300	12/17/2008	200	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

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Med Rec number	Sex	DOB	had follow up	had positive	Acception Number	Signed By	Collected	Submitting	Positive For H Pylori
1049202	F	11/29/1943	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000699	301	7/12/2009	200	<input type="checkbox"/>
1049698	F	11/23/1957	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PS-09-0000088	300	1/28/2009	200	<input type="checkbox"/>
					PS-09-0000830	301	8/5/2009	200	<input type="checkbox"/>
					PS-09-0001159	301	11/4/2009	200	<input type="checkbox"/>
1050618	F	9/25/1937	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000150	300	2/16/2009	201	<input type="checkbox"/>
1050798	M	5/4/1987	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000160	300	2/18/2009	200	<input checked="" type="checkbox"/>
1051240	F	5/5/1963	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-10-0000157	301	2/15/2010	201	<input checked="" type="checkbox"/>
1051321	M	3/27/1955	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000188	300	2/25/2009	200	<input checked="" type="checkbox"/>
1051322	F	3/16/1992	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000192	300	2/25/2009	200	<input type="checkbox"/>
1051323	F	8/31/1944	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001310	300	12/9/2009	200	<input type="checkbox"/>
1052321	F	5/4/1960	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000267	301	3/19/2009	201	<input type="checkbox"/>
1053319	M	1/1/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000284	300	3/25/2009	200	<input type="checkbox"/>
1053435	F	6/14/1949	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000312	301	4/2/2009	201	<input type="checkbox"/>

## H. PYLORI: INCIDENCE, PREVELANCE, FOLLOW UP

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Med Rec number	Sex	DOB	had follow up	had positive	Acquisition Number	Signed By	Collected	Submitting Positive For H Pylori
1053819	M	1/17/1957	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000309	301	4/1/2009	200
1055885	M	8/17/1970	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000495	301	5/13/2009	200
1055998	M	3/14/1958	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000479	300	5/8/2009	201
1056489	F	11/16/1960	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000476	300	5/8/2009	<input checked="" type="checkbox"/>
1057995	F	9/17/1954	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000560	300	6/3/2009	200
1058139	F	9/3/1939	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000559	300	6/2/2009	209
1058189	M	5/18/1957	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001259	300	11/25/2009	200
1058346	F	7/3/1967	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000664	300	6/24/2009	200
1059102	M	11/11/1973	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0001311	300	12/9/2009	<input checked="" type="checkbox"/>
1059939	F	11/6/1980	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000799	300	7/28/2009	201
1062523	F	9/4/1977	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000980	300	9/16/2009	200
1062698	F	5/10/1971	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0000844	300	8/12/2009	201

## H. PYLORI: INCIDENCE, PREVALENCE, FOLLOW UP

Med Rec number	Sex	DOB	had follow up	had positive	Acquisition Number	Signed By	Collected	Submitting	Positive For H Pylori
1063267	F	5/13/1946	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000866	300	8/17/2009	201	<input checked="" type="checkbox"/>
1064259	F	3/8/1924	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-08-0000995	300	9/17/2008	200	<input checked="" type="checkbox"/>
1065488	M	7/14/1959	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0000962	300	9/14/2009	201	<input checked="" type="checkbox"/>
1067305	F	4/29/1977	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0001072	300	10/13/2009	201	<input checked="" type="checkbox"/>
1069162	F	7/3/1989	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001174	300	11/10/2009	201	<input type="checkbox"/>
1069843	M	10/31/1946	<input type="checkbox"/>	<input type="checkbox"/>	PS-09-0001221	300	11/18/2009	202	<input type="checkbox"/>
1070214	F	9/10/1962	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0001248	300	11/23/2009	201	<input checked="" type="checkbox"/>
1070215	F	8/1/1965	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PS-09-0001269	300	11/30/2009	201	<input checked="" type="checkbox"/>
1074504	F	1/21/1958	<input type="checkbox"/>	<input type="checkbox"/>	PS-10-0000133	300	2/8/2010	201	<input type="checkbox"/>