

Abstract

Anxiety occurs commonly in the general United States population and most patients present initially to their primary care provider (PCP) for initial diagnosis and management. Many PCPs have indicated that they lack training in anxiety management, and additionally, management has changed over the past decade with increasing research steering providers away from addictive benzodiazepines and to lifestyle modifications and non-addictive medication modalities. The goal of this project was to develop a decision tree to assist PCPs in implementing evidenced based care at initial presentation, and to evaluate the change in practice of providers once the decision tree was implemented. Results of this study indicate that the addition of an easy to follow decision tree changed provider practice to more closely align with current evidence and was met with overwhelming provider approval.

Keywords: anxiety, primary care, benzodiazepines, cognitive behavioral therapy, stress, music therapy, exercise therapy.