What Post-Surgical ER Visits Say (Or Don't Say) About Quality Of Care

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Correlation doesn’t always indicate causation, but there are times when certain statistical data deserves another look.

According to a recent study from the University of Michigan [1], nearly one in five older adults who have common operations will end up in the emergency department within a month of their hospital stay. However, just as disconcerting is the tremendous variation between hospitals in terms of their ability to keep older surgery patients from needing post-surgical care.

The data used in the survey came from an analysis of Medicare information from approximately 2.4 million adults who what at least one common surgical procedure in a three-year period. The survey found more than four percent had two or more emergency department visits within 30 days of leaving the hospital. Common issues that led to medical emergencies included cardiovascular and respiratory conditions, infections, surgical site complications, and abdominal or gastrointestinal issues.

The results come from zeroing on in seniors who had one or more of six of the following common operations: angioplasty or other minimally invasive heart procedures, coronary artery bypass, hip fracture repair, back surgery, elective abdominal aortic aneurysm repair, and colectomy or removal of part of the colon.

However, the University of Michigan Medical School team that performed the research stopped short of suggesting post-surgical emergency visits are a viable indicator of quality of care. What can be gleaned from this study is hospitals must find a way to decrease the rate of post-surgical ER visits among older patients, especially in today's Affordable Care Act era of healthcare, one where facilities see decreased funds from Medicare if they have high readmission rates.

What I'm curious to know, however, is what's driving this high rate of emergency visits among older adults who undergo surgical procedures. Any number of factors could be at work here, and the findings from this study certainly beg a number of relevant questions: Are older patients receiving the kind of post-operative attention necessary to ensure recovery? Are older patients being properly educated on the recovery process? Are facilities working with them to develop a gameplan to avoid complications?

And while it's no surprise there is some level of variation between hospitals in terms of their ability to keep older patients from ending up in the emergency department following a hospital stay, the rate of post-hospital emergency visits ranged from 1 in 4 patients treated at some hospitals to 1 in 14 treated at others. That's not an insignificant difference, and it further suggests some hospitals need to closely inspect how they are treating older patients who undergo surgery.

Again, the researchers did not directly link post-surgical emergency visits with quality of care. But the findings of this study are unsettling. Avoiding post-surgical complications and health issues is mutually beneficial to both hospitals and patients, so it is only reasonable to suggest the healthcare industry try to find the underlying problem or problems behind the statistical data outlined in this study.

What's your take? Email me at mike.schmidt@advantagemedia.com *[2]*

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