

Relevance of Post-Hospital Discharge Appointments in Patients with Liver Disease

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Introduction

- Post-hospital discharge clinics aim to prevent readmissions and cut healthcare costs.
- Patients with liver disease require close monitoring of labs and symptoms to avoid complications and readmissions.
- Up to 75% of post-discharge readmissions are considered preventable¹.

Objective

- Evaluate the relationship between attendance of post-hospital discharge appointments on 30-day readmission rates.

Method

- Retrospective chart review of patients seen in the post-discharge hepatology clinic in our urban liver transplant center.
- Number of patients included = 258.
- Time period examined: 9/10/20 - 12/20/21.
- 30-day readmission rate for patients who attended the appointments and those who did not were reviewed.
- Impact of attendance on preventing readmission risk was reviewed through metrics such as scheduling of outpatient paracentesis, medication adjustment and close monitoring of lab work.

Results

- Average duration between discharge and appointment = 13 days

	Readmission Rate (%)
Total among all patients	82/258 (32%)
Among patients that did not attend their appointment	29/68 (43%)
Among patients that attended their appointment	53/190 (28%) <ul style="list-style-type: none"> - Readmission on same day (10%) - Readmission within 30 days (18%)

Intervention during appointment	Incidence of intervention among attendees (%)
Outpatient paracentesis scheduling	38/190 (15%)
Medication adjustment	71/190 (37%) <ul style="list-style-type: none"> - 22% based on labs - 21% based on symptoms - Anticipated changes in 18% based on pending labs
Review of post-discharge lab work	65/190 (25%)

Discussion

- Direct correlation between post-hospital discharge clinic attendance and reduced 30-day readmissions.
- 10% of same day readmissions allowed for urgent intervention but demonstrates a flaw in the discharge process.
- Attendance facilitated scheduling of outpatient paracentesis and medications adjustments based on labs and symptoms.
- Care was delayed for 18% of attendees who did not complete labs prior to their appointment.

Conclusion

- Our study highlights the importance of post-hospital discharge visits, safe discharge planning and the importance of labs prior to post-discharge visits.
- Post-hospital discharge visits promote care coordination, timely medication adjustments and resource provision promoting prevention of emergent need for hospitalization and morbid outcomes.

References

1. van Walraven, Carl et al. "Proportion of hospital readmissions deemed avoidable: a systematic review." *CMAJ : Canadian Medical Association journal = journal de l'Association medicale canadienne* vol. 183,7 (2011): E391-402. doi:10.1503/cmaj.101860