

Hospital strategies linked to lower mortality after acute MI

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(HealthDay) -- Five specific hospital performance strategies have been identified that result in lower 30-day risk-standardized mortality rates (RSMRs) for patients with acute myocardial infarction (AMI), according to a study published in the May 1 issue of the *Annals of Internal Medicine*.

To identify which hospital strategies are associated with lower RSMRs, Elizabeth H. Bradley, Ph.D., of the Yale School of Public Health in New Haven, Conn., and colleagues conducted a cross-sectional survey of 537 acute care hospitals with annualized AMI volumes of 25 patients or more.

The researchers identified five specific hospital performance strategies associated with lower RSMRs, including holding monthly meetings to review AMI cases (−0.70 percent), ensuring that cardiologists were always on site (−0.54 percent), encouraging clinicians to creatively problem solve (−0.84 percent), not cross-training intensive care unit nurses to work in the cardiac catheterization laboratory (−0.44 percent), and having both physician and nurse champions rather than nurse champions alone (−0.88 percent). Fewer than 10 percent of the hospitals used at least four of these performance strategies.

"The strategies may be important for improving outcomes for patients with AMI, and if effective, in aggregate would be associated with clinically important reductions in RSMRs," the authors write.

More information: www.annals.org/content/156/9/618.abstract

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