

Costs up with failure to thrive planned weekend admissions

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Scheduled failure to thrive admissions on weekends are associated with increased length of stay and health care costs compared with admissions of similar complexity on weekdays, according to a study published online Feb. 25 in *Pediatrics*.

(HealthDay)—Scheduled failure to thrive (FTT) admissions on weekends are associated with increased length of stay (LOS) and health care costs compared with admissions of similar complexity on weekdays, according to a study published online Feb. 25 in *Pediatrics*.

To assess whether admission day of the week impacts LOS and health care costs for FTT, Rachel T. Thompson, M.D., from Indiana University School of Medicine in Indianapolis, and colleagues analyzed administrative data for all 23,332 children aged younger than 2 years with a primary admission diagnosis of FTT, from 2003 to 2011, from 42

freestanding U.S. hospitals.

The researchers found that increased LOS and increased average costs were significantly associated with weekend admission; this finding was also seen for children with admission and discharge diagnoses of FTT. There was no significant difference in the number of procedures for children admitted on the weekend or on weekdays. There were significantly more radiologic studies (incident rate ratio [IRR], 1.13) and [laboratory tests](#) (IRR, 1.39) performed for weekend admissions. Based on 2010 data, if one-half of weekend admissions with both admission and discharge diagnoses of FTT were converted to Monday admissions, \$534,145 total savings would have been realized.

"Planned FTT admissions should, when feasible, be scheduled for weekday admission to decrease both health care costs and LOS," write the authors. "In most cases we believe savings from this simple adjustment could be recouped without a change in [health outcomes](#)."

More information: [Abstract](#)
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