

Preventable hospitalizations ID'd in pediatric medical complexity

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(HealthDay)—A review published online Nov. 10 in *Pediatrics* identifies the characteristics of preventable hospitalizations for children with medical complexity (CMC), and offers strategies for the prevention of these hospitalizations.

Ryan J. Coller, M.D., M.P.H., from the University of Wisconsin in Madison, and colleagues conducted a [systematic review](#) involving 13 [observational studies](#) to characterize potentially preventable hospitalizations in CMC. The authors also reviewed four experimental studies that assessed the efficacy of interventions to reduce CMCs.

Preventable hospitalizations were measured by ambulatory care sensitive conditions, readmission, or investigator-defined criteria. The researchers

found that the rates of preventable hospitalizations were higher for postsurgical patients, for those with [neurologic disorders](#) and medical devices, and among those with public insurance and nonwhite race/ethnicity. Additional risks included passive smoke exposure, nonadherence to medications, and lack of follow-up after discharge. In more complex patients, hospitalizations for [ambulatory care](#) sensitive conditions were less common. Fewer preventable hospitalizations were seen among patients receiving home visits, care coordination, chronic care management, and continuity across settings.

"Reductions in hospital use among CMC might be possible," the authors write. "Strategies should target primary drivers of preventable hospitalizations."

More information: [Abstract](#)
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