

Study shows time of hospital rounds for postpartum women impacts patient satisfaction

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In a study to be presented on Feb. 6 at 8:45 a.m. EST, at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting, in Atlanta, researchers will present findings from a study titled, Routine versus delayed timing of morning hospital rounds for postpartum women on patient satisfaction: A randomized quality improvement trial.

While it is convenient for physicians to have early morning [hospital](#) rounds so that they can handle other clinical duties including seeing patients in-office, it is not always convenient for postpartum hospital patients who often face sleep disruption and inadequate communication.

The study looked at 152 women with similar maternal demographics and clinical characteristics, except that delivery mode differed. More women had cesarean delivery in the routine. The [women](#) were all under the care of a university-based obstetrics/gynecology faculty practice and delivered at a tertiary care medical center. They were randomly allocated to either routine rounding (4-7 a.m.) or delayed physician rounding (after 8 a.m.) from postpartum day one until discharge. Women with medical conditions or delivery complications that precluded the ability to delay rounding were excluded. On day of discharge, research staff blinded to rounding group distributed a standardized survey that included questions regarding physician communication and hospital experience.

The result was that [postpartum women](#) who received delayed physician

rounding were more satisfied with physician communication and overall hospital experience without prolonging their hospital stay or time of discharge.

"This simple study indicates that physicians should be more cognizant of the hours they perform their rounds with healthy postpartum patients," stated Robyn P. Roberts, M.D. Roberts, with the University of Texas Medical School at Houston was researcher on the study and will present the study this week at the SMFM annual meeting. "By just moving rounds later in the morning, [patient satisfaction](#) can be significantly improved," added Roberts.

Provided by Society for Maternal-Fetal Medicine

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