

Scripted callbacks do not prevent 30-day returns of ER discharges

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(HealthDay)—For older adults discharged to home from the emergency

department, telephone follow-up does not improve outcomes, according to a study published online Dec. 22 in the *Journal of the American Geriatrics Society*.

Kevin J. Biese, M.D., from the University of North Carolina at Chapel Hill, and colleagues conducted a [randomized controlled trial](#) involving 2,000 individuals aged 65 years and older discharged to home from the [emergency department](#) who were randomized into intervention and control groups. The intervention group received a telephone call from a nurse using a scripted questionnaire to identify obstacles to elements of successful care transitions. Control subjects received a satisfaction survey.

The researchers found that the rate of return to the emergency department or hospital or death within 30 days was 15.5 and 15.2 percent in the intervention and control groups, respectively (P = 0.86). Death occurred in 0 and 0.51 percent of the intervention and control groups, respectively; return to the emergency department occurred in 12.2 and 12.5 percent of the intervention and control groups, respectively; and hospitalization within 30 days occurred in 9 and 7.4 percent of the [intervention](#) and control groups, respectively.

"Based on the results of this study and recent systematic reviews, we cannot recommend undifferentiated telephone call follow-up as a way to improve the care transitions of [older adults](#) from the emergency department," the authors write.

More information: [Abstract](#)
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