

Early readmissions more preventable than later ones

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(HealthDay)—Early general medicine readmissions are more likely than

late readmissions to be preventable with hospital-based interventions, according to a study published online May 1 in the *Annals of Internal Medicine*.

Kelly L. Graham, M.D., M.P.H., from Harvard Medical School in Boston, and colleagues examined data from 822 adults readmitted to a general medicine service at 10 [academic medical centers](#) in the United States. A structured survey instrument was used to determine whether readmissions within seven days of discharge differed from those between eight and 30 days after discharge regarding preventability.

The researchers found that 36.2 percent of early readmissions were preventable versus 23 percent of late readmissions. For preventing early readmissions, hospitals were better locations (median risk difference, 22.8 percentage points). In contrast, for preventing late readmissions, outpatient clinics (median risk difference, 10 percentage points) and home (median risk difference, 5.6 percentage points) were better locations.

"We believe it is time to change the model for patient outcomes after [hospital discharge](#) to one that recognizes shared accountability for readmissions along the entire spectrum of care," the authors write.

Several authors disclosed [financial ties](#) to the pharmaceutical industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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