

Delays in care longer for female trauma patients

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Female trauma patients have longer delays in trauma care and an

increased likelihood of discharge to long-term care facilities compared with male trauma patients, according to a study published online May 18 in *JAMA Surgery*.

Martha-Conley E. Ingram, M.D., M.P.H., from the Northwestern University Feinberg School of Medicine in Chicago, and colleagues conducted a retrospective cohort study using the 2013 to 2016 Trauma Quality Improvement Program databases from level I to III trauma centers. Patients aged 18 years or older with an injury severity score (ISS) greater than 15 and with diagnoses of traumatic brain injury, intra-abdominal injury, pelvic fracture, femur fracture, and [spinal injury](#) from their trauma were included.

Overall, 70.6 and 29.4 percent of the 28,332 patients were male and female, respectively. The researchers found that male patients more often had abdominal and spinal cord injuries, while female patients more often had femur and pelvic fractures. Compared with [male patients](#), female patients had significantly longer emergency department length of stay and longer time in pretriage; after matching by age, ISS, mechanism, and injury type, they also had an increased likelihood of discharge to nursing or [long-term care facilities](#) versus home.

"These findings suggest potential gaps of care that may be excellent targets for quality improvement of existing processes of assessment and triage and discharge planning," the authors write.

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