

Early surgical follow-up with primary care physicians can cut hospital readmissions

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Patients who have post-operative complications following high-risk surgery have a significantly lower risk of being readmitted to the hospital within 30 days if they go see their primary care physician soon following discharge, a new study in *JAMA Surgery* shows.

The study shows that better coordination of care between surgeons and [primary care](#) physicians is important to help reduce [hospital](#) readmissions within 30 days for those high-risk [surgery patients](#) who have post-operative complications or live with a chronic disease, according to Benjamin S. Brooke, M.D., Ph.D., assistant professor of surgery at the University of Utah School of Medicine and first author on the study.

Brooke, along with co-researchers at Dartmouth College, examined records of more than 12,000 Medicare beneficiaries who underwent open surgery to repair a thoracic aortic aneurysm (TAA), a high-risk procedure, and almost 53,000 who received a ventral hernia repair (VHR), a lower-risk operation, between 2003-2010.

They found that patients who underwent TAA surgery were much more likely to experience post-operative complications and be readmitted compared to those who had VHR surgery. Nearly 37 percent of TAA surgery patients experienced complications following surgery while 8 percent of VHR patients had complications.

Early follow-up with a primary care physician had a major influence on whether TAA patients with medical and surgical complications had to go back to the hospital, according to the study. Those who saw their primary care provider within 30 days after surgery had a 20 percent readmission rate compared to a rate of 35 percent among those who did not have an early follow-up visit with their primary care physician.

The study makes a good case for better

coordination of care between surgeons and [primary care physicians](#), according to Brooke.

"Clearly, follow-up visits with a primary care provider soon after surgery will help ensure that a patient's medical complication or chronic disease conditions are being optimally managed," he says. "Clear communication between surgeons and primary care providers at the time of hospital discharge can help make sure these follow-up visits happen."

More information: *JAMA Surgery*, archsurg.jamanetwork.com/article.aspx?articleid=1883584

Provided by University of Utah Health Sciences

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