

## TEAM EMERALD

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**Infoway Question:** Does prompt access to a discharge summary (within 2 to 4 days) by primary care physicians reduce the rate of readmissions and emergency room visits?

### Results:

For all rostered EMERALD patients, we identified all inpatient admissions between January 1, 2012 and January 31, 2013. Our study cohort had 10,397 hospital discharges. Of these hospital discharges, there were 489 (4.7%) discharge note/notifications received by the patient's family physician within 3 days of discharge, 1558 (15.0%) notes within 30 days of discharge, 1804 (17.35%) within 60 days of discharge and 1909 (18.4%) notes within 90 days of discharge from hospital. For our study cohort of hospital admissions, there were 2076 (19.97%) hospital readmissions/and or emergency room visits, 1881 (18.1%) hospital admissions and 877 emergency room visits (8.44%). Of the 489 admissions that had a discharge note received within less than 3 days there were 112 (22.9%) hospital readmissions and or emergency room visits. For the 1558 admissions that had a discharge note received within less than 30 days there were 394 (25.29%) hospital readmissions and or emergency room visits. For the 8839 admissions that had a discharge note received over 30 days or not at all there were 1682 (19.0%) hospital readmissions and or emergency room visits. For the univariate analysis, the odds ratio for the receipt of a discharge note/notification within 3 days was 1.2 [0.96,1.49], within 30 days was 1.44 [1.3,1.6] and more than 30 days was 1.25 [1.09,1.42]. The odds ratios when adjusted for patient factors (patient age, sex, hospital type, comorbidities including diabetes, COPD, hypertension, asthma) and provider factors (physician age and sex, practice location) for the receipt of a discharge note/notification was 1.1 [0.88, 1.38] for less than 3 days, 1.38 [1.18,1.53] for within 30 days and 1.21 [1.06, 1.36] for greater than 30 days.

### Conclusions:

The prompt receipt of a discharge summary/notification within 3 days by a patient's family physician was not associated with a reduction of readmissions and/or emergency room visits. However, the receipt of a discharge summary within 30 days and greater than 30 days or not at all was associated with readmissions/emergency room visits. This relationship held even when adjusted by patient and provider factors.