

# Hospital discharge

In the face of technical difficulties and the cost of collecting health [outcomes](#) data from patients directly, many “outcome measures” actually use processes of care or use of services as “proxies” for patients' health states. For example, [hospital readmission](#) rate is sometimes referred to as an outcome measure; the underlying theory is that readmission reflects a change in health state. In reality, readmissions can occur for many reasons other than the health state of the patient. A high readmission rate may indicate that the patient's health has deteriorated, or it could indicate another issue, such as a lack of caregivers in the home or a misjudgment about the [discharge](#) destination at the time of discharge. A high rate of readmissions could reflect poor care during the first admission, or superior care leading to rescue and a sicker population on average at discharge. Such measures may be considered “proxies for health outcome.”

## Same-day discharge

Outpatient brain surgery has many advantages for the psychological and physical wellbeing of patients, as well as reduced costs to the health care system. Compared with inpatient admissions, same day discharges reduce patient exposure to nosocomial infection, thromboembolic complications, and medical error. We aim to establish a prospectively collected quality outcomes database to examine the outcomes of patients that undergo brain tumor resection and are discharged home the same day as surgery.

**Methods:** We have established a prospectively collected quality outcomes database to examine the outcomes of all patients that underwent brain tumor resection by a single neurosurgeon (R.J.K) at our institution from August 2020 to August 2021 and were discharged home the same day as surgery.

**Results:** Over the one-year period this study was conducted, 37 of 334 patients met inclusion criteria for the outpatient protocol. Thirty-two patients were discharged on the same day as surgery. Five patients (14%) were considered eligible for outpatient surgery but were ultimately admitted to the hospital postoperatively and were discharged after an overnight observation. No postoperative complications were noted at two-week postoperative follow-up.

**Conclusion:** In select patients undergoing brain tumor surgery, same day discharge should be considered. Establishing a multidisciplinary team of physicians, nurses, radiologists, and physical therapists is critical to achieving this aim. Physicians should have a low threshold to admit a patient with concerning exam findings, complications, or complicated past medical history. Once discharged, open communication with the patient and their family is critical to detect complications that should trigger rehospitalization and intervention <sup>1)</sup>.

<sup>1)</sup>

Vallejo FA, Eichberg DG, Morell AA, Shah AH, Di L, Berry K, Luther E, Lu VM, Patel NV, Ivan ME, Komotar RJ. Same-day discharge after brain tumor resection: a prospective pilot study. J Neurooncol. 2022 Feb 22. doi: 10.1007/s11060-022-03969-x. Epub ahead of print. PMID: 35192136.

From:

<https://neurosurgerywiki.com/wiki/> - **Neurosurgery Wiki**

Permanent link:

[https://neurosurgerywiki.com/wiki/doku.php?id=hospital\\_discharge](https://neurosurgerywiki.com/wiki/doku.php?id=hospital_discharge)

Last update: **2024/06/07 02:55**

