Abstract 6

Length of Hospital Stay Is Predicted by Comorbidities

Catherine Gibb, MBBS, FRACP; and Professor Villis Marshall, FRACS
Royal Adelaide Hospital, Balhannah, S. Australia

Australia's demographics are of an aging population. This is putting an increasing strain on hospital resources.

One potential for building capacity in the hospital system is to reduce the length of stay (LOS). This would allow greater patient turnover.

The challenge has been to identify areas where potential improvements could occur.

An audit of LOS cross-correlated with comorbidities at the Royal Adelaide Hospital (RAH) showed that an increased number of common comorbidities correlated well with increased LOS, and particularly LOS of greater than 14 days.

This finding has confirmed the potential for early identification of patients likely to have a prolonged LOS. It raised the possibility of interventions prior to admission, at least in elective surgical patients, that may reduce LOS.

A high-risk preoperative medical clinic has been established in conjunction with the existing preanesthetic clinic. The aim of the clinic is to optimize pre-existing medical problems and establish a plan for possible complications to facilitate early recognition and treatment.

Early data suggest LOS in patients seen through the high-risk clinic is reduced compared with case controls, with the relative stay index in patients seen through the clinic being 1.103, compared with 1.235 in case controls.

Downloaded from www.ccjm.org on April 19, 2024. For personal use only. All other uses require permission.