

Pharmacist Phone Calls May Lower Readmissions

by Jess White

You may have new potential partners in the quest to lower readmissions: pharmacists. New research shows how their involvement with patient care may reduce the likelihood that someone's readmitted to the hospital.

Specifically, if a pharmacist calls a patient shortly after discharge, they're more likely to have better outcomes during their recovery.

Effect of Several Calls

Multiple phone calls from pharmacists may lead to fewer return trips to the hospital, according to a study in the *Journal of Hospital Medicine*.

Northwestern Memorial Hospital in Chicago launched a pilot program where pharmacists contacted patients three separate times: one call three days after discharge, one 14 days after discharge and a final call 30 days after discharge. Past studies of pharmacist intervention only examined the effect of one phone call post discharge. However, researchers at Northwestern wanted to see if additional contact during key points in the patient's recovery would be beneficial – and the results were promising.

As part of the study, some patients received one follow-up call from a pharmacist after discharge, while others got all three. Thirty-nine percent of the patients who received one phone call were either readmitted to the hospital or visited the emergency department within 30 days.

But just fewer than 25% of patients who received a series of three phone calls from pharmacists were readmitted or visited the ED.

In the article, researchers said the study showed the importance of having multiple “touch points” with patients during the recovery process to discuss their medications and care plans.

Not only can these follow-up calls reinforce the information patients received during discharge, they give patients an opportunity to ask questions based on how their recovery is progressing.

One Call still Helps

Another hospital had similar success when having its pharmacists make just one follow-up call to patients, according to an article in Medscape.

Mercy Hospital St. Louis implemented a counseling program for patients who were discharged to two of its outpatient clinics. Before the program, hospital pharmacists would occasionally call patients to see if they were taking their medications correctly and understood the risks.

Follow-up calls from pharmacists, however, were a key component of the new program. The pharmacists would verify that patients understood how to take their medications.

They called almost every patient one time within 48 hours of discharge. Those who couldn't be reached by phone were sent letters.

After comparing study patients to similar patients who were discharged before the program began, the researchers found readmissions rates were lower for patients in the counseling program at various points after discharge. And they declined even further when these patients visited their primary care doctor within 14 days of discharge.

The research team plans to see if these results can be replicated for patients who may be at high risk of being readmitted, including those taking 13 or more medications at discharge or those who've been admitted to the hospital more than once a year.

Positive Effects

Studies like these show that having a pharmacist follow up with patients after they leave the hospital can be a critical part of improving their recovery – especially if the professional reminds patients to make appointments with their primary care provider ASAP.

With that in mind, you may want to talk to your pharmacists about expanding their role in the post-discharge process, encourage them to reach out to patients and train them to answer patients' medication questions in plain, clear terms.



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