

## The Truth about Trauma Readmissions

Olubode A. Olufajo, MD, MPH, Zara R. Cooper, MD, MSc, Brian K. Yorkgitis, DO, Peter A. Najjar, MD, David Metcalfe, LLB, MBChB, Joaquim M. Havens, MD, Reza Askari, MD, Gabriel A. Brat, MD, MSc, Adil H. Haider, MD, MPH, Ali Salim, MD



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**Introduction:** There is a paucity of data on the causes and associated patient factors for unplanned readmissions among trauma patients.

**Methods:** We examined patients admitted for traumatic injuries between 2007 and 2011 in the California State Inpatient Database. Using Chi square tests and multivariate logistic regression models, we determined rates, reasons, locations and patient factors associated with 30-day readmissions.

**Results:** Among 252,752 trauma discharges, the overall readmission rate was 7.56%, with 36% of readmissions occurring at a hospital different from the hospital of initial admission. Predictors of readmissions included being discharged against medical advice [Odds Ratio (OR): 2.56(2.35-2.76)]; Charlson Scores  $\geq 2$  [OR: 2.00(1.91-2.10)]; and age  $\geq 45$  [OR: 1.29(1.25-1.33)]. Major reasons for readmissions were musculoskeletal complaints (22.29%), psychiatric conditions (9.40%), and surgical infections (6.69%).

**Conclusion:** Health and social vulnerabilities influence readmission among trauma patients, with many readmitted at other hospitals. Targeted interventions among high-risk patients may reduce readmissions after traumatic injuries.

**Keywords:** Injury; Readmission; Reason; Risk Factors; Trauma

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