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## Clinical pharmacist helps lower hospitalization rate, reduce costs, study finds

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Nurse discharge advocates who prepared patients' post-hospitalization plans and a pharmacist who conducted medication reviews after discharge lowered patients' hospitalization rate and reduced total health care costs by \$149,995, an average of \$412 per person, compared to patients receiving usual care, according to a study in the February 3, 2009, *Annals of Internal Medicine*.<sup>1</sup>

Under the hospital discharge program, a nurse discharge advocate coordinated a patient's discharge plan, reconciled his or her medication plan, and organized post discharge services, among other tasks. Between two and four days after a patient was discharged, a clinical pharmacist called participants to review their medications and address medication-related problems. The randomized, controlled trial was conducted among English-speaking patients 18 and older who were admitted to Boston Medical Center from January 3, 2006, to October 18, 2007. Among the 749 participants selected for the study, 376 were placed in the usual care group and 373 were assigned to the intervention group and received the services described above.

Of the 228 (62%) intervention participants reached by the pharmacist, a medication review was completed for 195 participants. "The pharmacist found that 126 of 195 (65%) intervention participants who completed medication review had at least [one] medication problem and 103 (53%) needed corrective action by the pharmacist, such as contacting the participants' [primary care provider]."

The study is available at <http://annals.org/cgi/content/abstract/150/3/178>

1. Jack BW, Chetty VK, Anthony D, Greenwald JL et al. A reengineered hospital discharge program to decrease rehospitalization: a randomized trial. *Ann Int Med*. 2009; 150: 178-87.

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ASHP Health Policy Alerts are synopses of new studies highlighting the medication-use process in health care, especially studies assessing contemporary pharmacists' role in improving medication-use outcomes. The American Society of Health-System Pharmacists encourages recipients to keep a copy of this synopsis for future reference.

