

# Exploring the Efficacy of the Extended Stay Unit

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Shiv Malhotra  
SUMR Scholar 2021

# Outpatient Total Joint Arthroplasty (TJA)

- Big national push towards transitioning TJAs from inpatient to outpatient
  - Medicare
  - Better Patient Outcomes / Satisfaction
  - Cheaper
- Most TJAs in Private Practice are currently done outpatient
  - Ambulatory Surgery Centers (ASCs)
- Majority of TJAs expected to be completed in an outpatient setting by 2026

DeCook CA. Outpatient Joint Arthroplasty: Transitioning to the Ambulatory Surgery Center. *J Arthroplasty*. 2019 Jul;34(7S):S48-S50. doi: 10.1016/j.arth.2019.01.006. Epub 2019 Jan 15. PMID: 30773355.

Huang A, Ryu JJ, Dervin G. Cost savings of outpatient versus standard inpatient total knee arthroplasty. *Can J Surg*. 2017;60(1):57-62. doi:10.1503/cjs.002516

Kelly MP, Calkins TE, Culvern C, Kogan M, Della Valle CJ. Inpatient Versus Outpatient Hip and Knee Arthroplasty: Which Has Higher Patient Satisfaction? *J Arthroplasty*. 2018 Nov;33(11):3402-3406. doi: 10.1016/j.arth.2018.07.025. Epub 2018 Aug 1. PMID: 30143333.

# Academic Centers and Outpatient TJA

- Different patient population
  - Medically sick
  - Surgically complex
- ASCs largely unavailable
  - No outpatient incentives
- TJA metrics the same - academic or private

Keeler EB, Rubenstein LV, Kahn KL, et al. Hospital Characteristics and Quality of Care. *JAMA*.1992;268(13):1709–1714. doi:10.1001/jama.1992.03490130097037

Burke L, Khullar D, Orav EJ, Zheng J, Frakt A, Jha AK. Do Academic Medical Centers Disproportionately Benefit The Sickest Patients? *Health Aff (Millwood)*. 2018 Jun;37(6):864-872. doi: 10.1377/hlthaff.2017.1250. PMID: 29863940.

# Extended Stay Unit (ESU)

- Strategy to address outpatients
- Separate area of the hospital
- Focused is on rapid recovery
- Option for admission available



# Study Aims

- Effectiveness of ESU
- Find reasons for delay in discharge of ESU patients
- Uncover possible improvements for the ESU

# Methods

- Retrospective review of TJA patients over an 18 month period
  - Nov 2019-Apr 2021
- Evaluation of ESU eligible patients from outpatient clinical assessment
- Review of final ESU eligibility status
- Review of ESU patients:
  - Discharge time
  - Reasons for late discharge if applicable

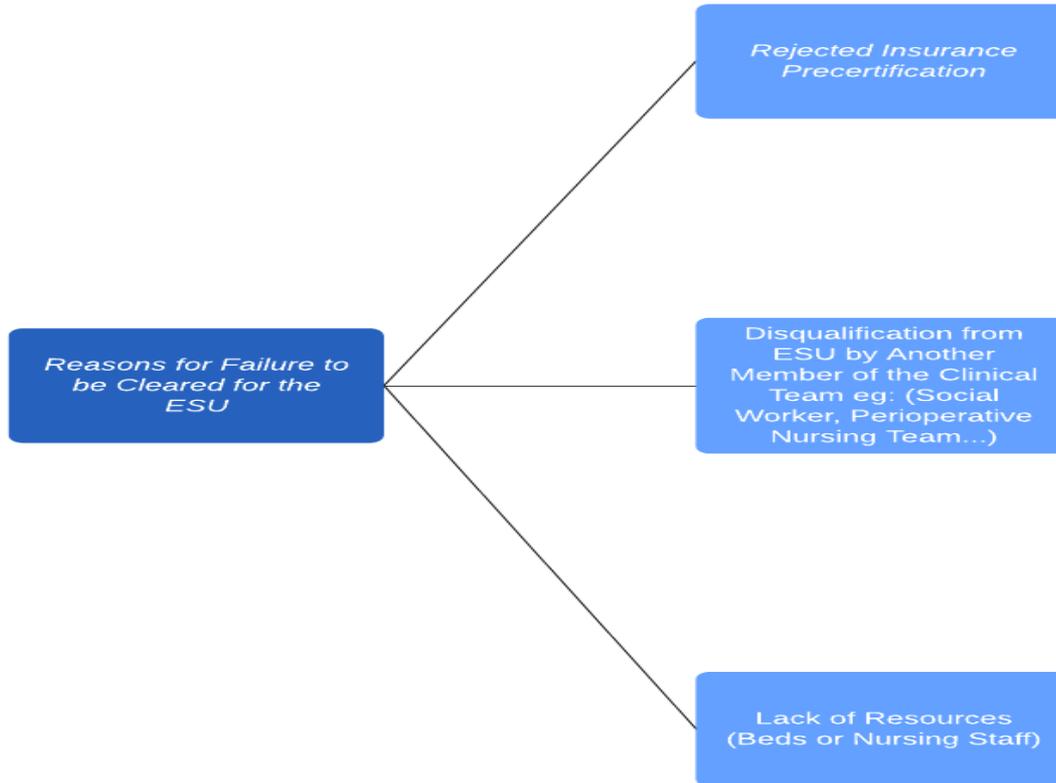
# Results

Gender	Patient Mean Age	Patient Mean BMI
Male- 228, 39.9%	64 (Range, 15-88)	30.2 (Range, 15.1-55.5)
Female- 343, 60.1%		

# Results

Total Patients	571	100%
ESU Eligible	438	76.70%
Went to ESU	182	31.90%
Failed to leave ESU within 24 Hours and were Admitted	18	3.2%

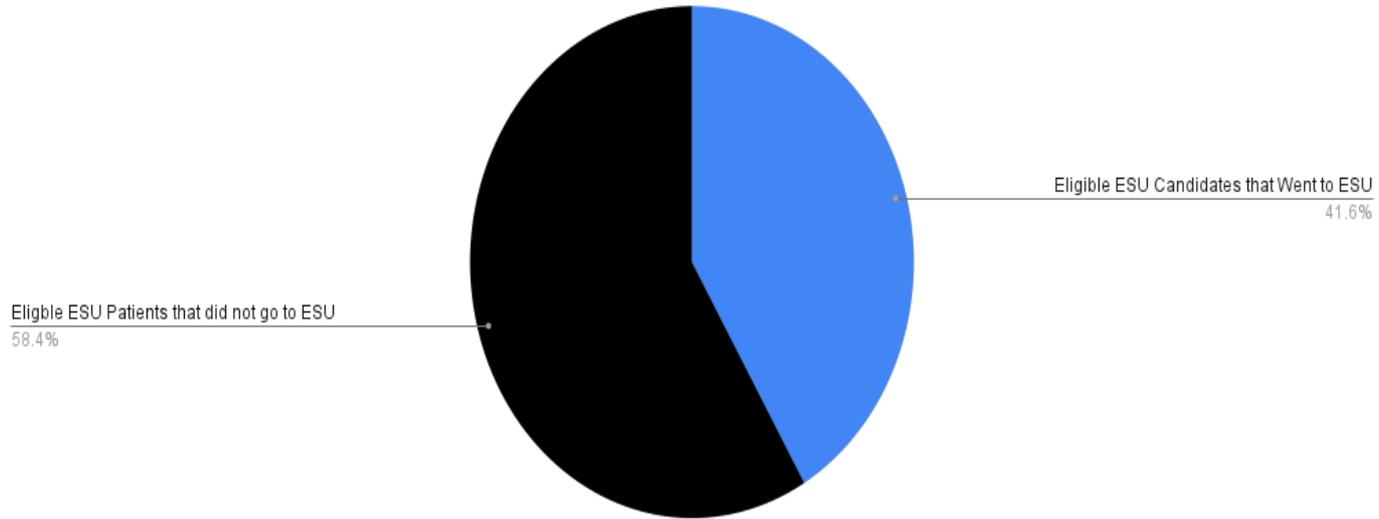
# Results



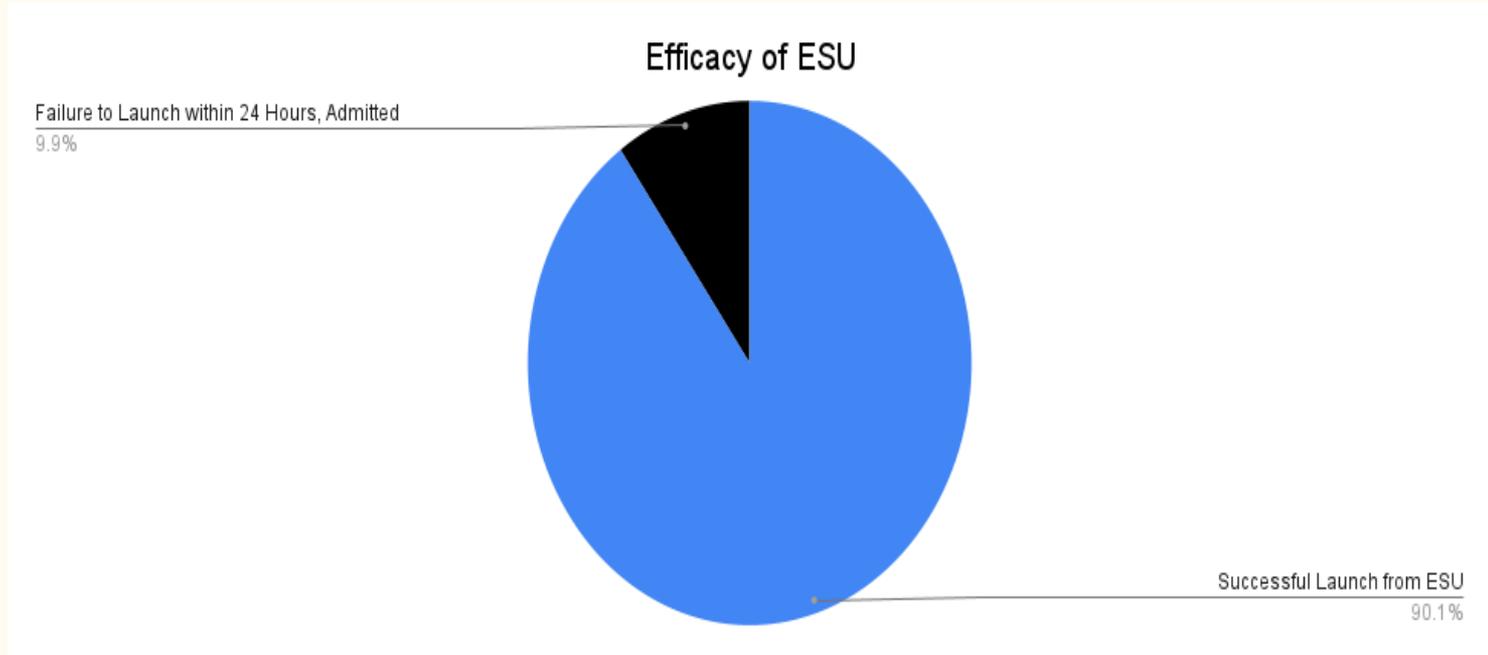
# Result

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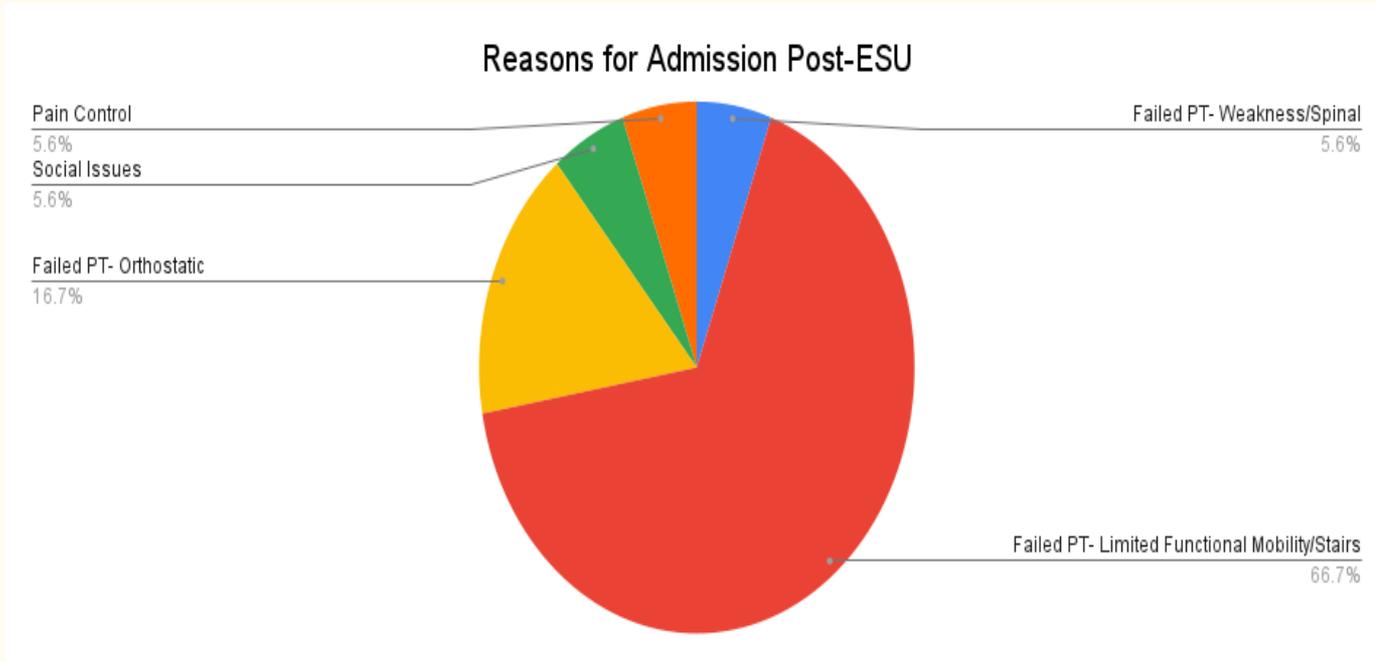
ESU Candidates that were admitted to ESU



# Results



# Results



# Discussion

- ESU was determined to be effective
- ESU efficiency is comparable to other ASCs
- Largest barrier for discharge to home → Physical Therapy

# Future Improvements to ESU

- Addition of more physical therapists and other physical therapy resources
- Further look and enhancements into other care services

# Credits

- Dr. Neil P. Sheth, MD, FACS
- Dr. Esme Singer, MD, MBA
- Dr. Aaron Gebrelul, MD
- Anna Lee Siqueza, RN
- Joanne Levy, MBA