

## Vital signs are still vital: instability on discharge and the risk of post-discharge adverse outcomes.

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Nguyen OK, Makam AN, Clark C, et al. Vital Signs Are Still Vital: Instability on Discharge and the Risk of Post-Discharge Adverse Outcomes. J Gen Intern Med. 2017;32(1):42-48. doi:10.1007/s11606-016-3826-8. <a href="https://psnet.ahrq.gov/issue/vital-signs-are-still-vital-instability-discharge-and-risk-post-discharge-adverse-outcomes">https://psnet.ahrq.gov/issue/vital-signs-are-still-vital-instability-discharge-and-risk-post-discharge-adverse-outcomes</a>

Identifying patients at high risk of <u>readmission</u> following hospital discharge is a patient safety priority. This observational cohort study found that patients with abnormal vital signs—temperature, blood pressure, heart rate, respiratory rate, and oxygen saturation—upon hospital discharge were more likely to be readmitted to the hospital or die within 30 days compared to patients without vital sign abnormalities. Patients with multiple abnormal vital signs were at highest risk for <u>readmission</u>. The authors suggest vital signs should be used to assess safety for hospital discharge. These findings underscore the importance of conducting and attending to the physical exam, as Dr. Abraham Verghese discussed in a <u>PSNet interview</u>.