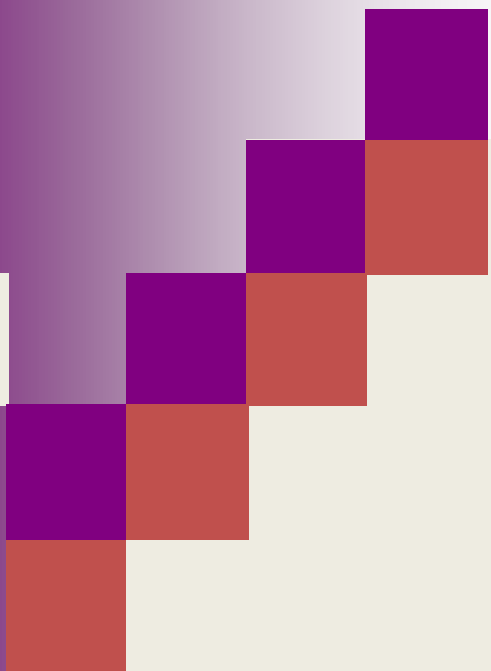


Hospital Authority Convention 2013




Written Action Plan and Telephone Hotline Support to Reduce Hospital Readmission in Patients with Chronic Obstructive Pulmonary Disease

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Written Action Plan, Rescue Medications and Telephone Hotline Support

- Till Nov., 2012, 68 COPD patients were educated on self-management
- 23 were given in addition a telephone hotline for crisis intervention

慢性阻塞性肺病人士之行動計劃	
<p>要知悉當你身體狀況好的時候</p> <p>你每天可承擔多少活動 你在靜止或活動時的呼吸情況 有什麼因素導致你呼吸惡化 你的食慾狀況 你的睡眠狀況 你有多少痰涎及其顏色</p>	<p>行動</p> <p>每天預備一些活動 預早計劃及分清楚活動之輕重緩急性 - 預備充份時間去完成 按照物理治療師之家居運動計劃，定時運動，並根據職業治療師之指引，作出適當之呼吸配合 保持均衡健康食譜 - 並飲用足夠水份 避免可令你病徵惡化之因素 每年十一月，請到門診部或私家醫生醫務所接受流感疫苗注射 </p>
<p>慢阻肺病發作時</p> <p>明顯比日常氣喘或呼吸喘哈 痰涎量增加或轉濃 應付日常活動之體力減退 食慾減退 容易疲倦及睡眠質素下降</p>	<p>行動</p> <p>致電胸肺科日間醫療中心並討論</p> <ol style="list-style-type: none"> 1. 病徵的改變 2. 藥物治療：見後頁 <p>重組你的活動，並增加時間處理 爭取充份的休息，並採用職業治療師指引之減壓技巧 採用物理治療師指引之呼吸技巧 少食多餐，飲用充足水份</p>
<p>病徵持續惡化</p> <p>慢阻肺病發作之徵狀沒有改善</p>	<p>行動</p> <p>致電夜診/門診部或私家醫生儘早約見醫生或致電胸肺科日間醫療中心安排入院治理# # 要視乎當時床位數目再作安排</p>
<p>嚴重發作之徵狀</p> <p>靜止時也極度氣喘 發高燒 感覺昏睡或神智不清</p>	<p>行動</p> <p>致電 999 呼喚緊急救護車前往醫院急症室</p>

Patient Characteristics and Telephone Hotline Utilization

Gender	M/F: 22/1
Age	Mean: 71.1 (54 – 84)
COPD Stage (GOLD)	Stage 4 (very severe): 14 Stage 3 (severe): 9
MRC dyspnoea grade	Mean: 3.65
LTOT	Yes: 7 No: 16
Comorbid medical conditions	Yes: 15 No: 8
Call Triage	Intervention
13 calls for infective exacerbation	3 had action plan implemented over phone calls
	7 had fast track clinic consultation arranged
	3 had direct ward admission
7 calls for replenishment of rescue medications	Rescue medications prescribed at Ambulatory Care Centre
10 calls for re-assurance	Assessed & reassured by APN over telephone calls

28-day Readmission Rate for Infective Exacerbation

28-day Readmission Rate in ():
Gr. A: Action plan, rescue med. and telephone hotline (4.3%)
Gr. B: No telephone hotline (31.1%)
Gr. B1: No telephone hotline but has rescue med. (28%)
Gr. B2: No telephone hotline and no rescue med. (35%)
HA (2005 – 2010): (25 – 28%)

