

Impact of asthma management protocol in reducing the length of stay in low income countries

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Introduction:

Asthma is recognized as one of the most common pediatric diseases. Different methods are adopted to reduce to Length of Stay of Asthmatics patients in Emergency Department. A unit-based protocol is adopted in a public sector hospital of Urban Sindh. Patients presenting in Pediatric Emergency Department (PED) were nebulized with Ventolin three times during first hour of their visit followed by Intravenous Hydrocortisone and other modalities and compliance to the protocol was assessed.

Objective:

To evaluate the impact of Asthma Management Protocol on Length of Stay in Public Sector Hospital

Method:

This is the retrospective cross-sectional study over a period of Six months (from January 22 – June 22). All pediatric patients presenting with Diagnosis of Acute asthma were assessed according to Asthma Protocol and Their Length of Stay and outcome was assessed.

Results:

During the period of six months 594 pediatric patients came with the diagnosis of Asthma in public sector hospitals of Sindh. There is a variability in the number of patients per month maximum numbers were observed during April and May 129 and 121 respectively. Compliance for Asthma protocol was observed in 90 % of patients. Progressive improvement was observed with maximum compliance 97 % observed in June. The average length of stay of patients was 26.56 hours. Length of stay showed a decreasing pattern with maximum average Length of stay 33.34 hours in January when compliance was 78 %, Length of stay decreased to 23.21 hours in June when compliance was 97 %. Less than 1 % of patients were referred to due to worsening condition to other tertiary care hospitals.

Conclusion:

Strict adherence to unit-based protocol can help in reducing the length of stay and referral outcomes.

Key Words:

Asthma, Length of Stay.