

Publication

Adherence to recommendations of inpatient geriatric consultation teams: a multicenter observational study

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Inpatient geriatric consultation teams (IGCTs) provide recommendations for the care of older patients hospitalized on non-geriatric wards based on comprehensive geriatric assessment. The lack of adherence to their recommendations hinders the potential impact of IGCTs. We evaluated the adherence to IGCT recommendations and determined which team and recommendation characteristics are related to higher adherence rates.; Multicenter observational study in older adults aged ≥ 75 years admitted to an acute non-geriatric ward. Demographic and adherence data were collected for 30 consecutive patients. A cross-sectional survey mapped team and organizational characteristics of the participating IGCTs.; Analyses were conducted in 278 patients (51.4% male, mean age 82.5 years, and median length of stay 10 days). There was a median number of 3 recommendations (range 1-13) per patient. The overall adherence rate was 69.7%. Recommendations related to 'social status' (82.4%) and 'functional status/mobility' (73.3%) were best adhered to. Recommendations related to 'medication' (53.2%) and 'nutritional status' (59.1%) were least adhered to. Adherence rates increased if recommendations were given to allied health professionals (OR = 6.37, 95% CI = 1.15-35.35) or by more experienced IGCTs (OR = 1.34, 95% CI = 1.04-1.72) and decreased when more recommendations were given (OR = 0.51, 95% CI = 0.33-0.80).; Adherence rate to IGCT recommendations increased if given to allied health professionals or by more experienced IGCTs and when fewer recommendations were given. Study replication in an international multicenter study with a larger number of centers and evaluating the quality of the recommendations is suggested.

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