

# THINGS YOU SHOULD KNOW ABOUT TRANSITIONS OF CARE

In the Clinic  
Annals of Internal Medicine

## What are transitions of care?

- When patients move from an inpatient setting to an outpatient setting. Often the transition is from hospital to home.
- The transition can be hard on patients and their families and other caregivers as they adjust to new routines and responsibilities.
- Careful planning and coordination and effective communication can ease the transition.

## Who should be involved in discharge planning?

- Patient.
- Hospital staff (nurses, therapists, and doctors involved in patient care).
- Primary care doctor.
- Home care nurse
- Pharmacist (for prescription information).
- Family and any other caregivers.

## What are the risks of transitions of care?

- Patients are at risk for complications after hospital discharge, such as needing rehospitalization due to medication errors, inadequate medical follow-up, and other medical management problems

## What can improve transitions of care?

- Anticipate the hospital discharge and discuss with your hospital-based health care providers about when you'll be going home and what to expect.
- A discharge instruction to patients outlining important, understandable, and well-structured information about diagnosis (reason for hospitalization), a



reconciled medication list, a follow-up appointment plan with their primary care provider, test and study results that need further follow-up, list of warning signs with instructions on what to do, and whom to contact in case questions arise after going home.

- Timely communication between the hospital doctors and your primary care doctors.
- Access to resources for posthospital care.
- A visit with your primary care physician soon after discharge, which allows him or her to assess your progress, provide any needed treatment, and answer questions about your care.

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## For More Information

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[www.caregiver.org/caregiver/jsp/content\\_node.jsp?nodeid=2312](http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=2312)  
A guide on hospital discharge planning for families and caregivers from the Family Caregiver Alliance.

<http://nextstepincare.org/>  
[http://nextstepincare.org/Caregiver\\_Home/What\\_Do\\_I\\_Need/](http://nextstepincare.org/Caregiver_Home/What_Do_I_Need/)  
[www.caretransitions.org/caregiver\\_resources.asp](http://www.caretransitions.org/caregiver_resources.asp)  
Web sites to help caregivers and health care providers work together towards achieving safe transitions of care.

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