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ReDS Monitoring In Conjunction With Multifaceted Team Reduces Readmissions From Skilled Nursing Facilities

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- > Background: ReDS lung fluid monitoring is a technology for Heart Failure (HF) enabling preemptive intervention. We hypothesized that post-acute care guidance via ReDS monitoring in conjunction with a strict multifaceted protocol-based HF care pathway may reduce readmission from skilled nursing facilities (SNF)
- Methods: Allegheny Health Network, PA created a multidisciplinary dedicated HF care pathway for acute HF discharges to SNF's, designating (after scrutiny and extensive education) a narrow-partnered network of SNF's implementing evidence based strict protocols until discharge from SNF. Protocol:
 - > Daily ReDS device measurements
 - Incorporation ReDS readings to daily fifteen-minute phone huddles along with the partnered facilities with daily assessment of vitals, weights, symptoms, ambulation, diet, PT/OT
 - > Establishing diuretic and afterload reduction intervention/modulation protocol executed by CRNP under the supervision of an advanced HF physician
- Results: The program <u>did demonstrate a significant reduction in all cause</u> readmissions and revealed a further decrease of HF to HF readmission rate, although the latter was not statistically significant
- Conclusions: These observations may support a tandem approach of ReDS guided monitoring and multidisciplinary care pathway program in the post acute care settings.



	30 day Pre- program	30 day On- program	Reduction	P- value
All-cause Readmissions	28.7%	18.7%	35%	0.04
HF Readmissions	6%	4%	33%	0.6

Late Breaking Clinical Trial HFSA 2020

