

# A STUDY ON IDENTIFYING THE REASONS CAUSING LAMA DISCHARGES & WAYS OF REDUCING IT AT PARAS' HOSPITAL, UDAIPUR

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# INTRODUCTION



- In the complex landscape of healthcare, to promote positive health outcomes, healthcare facilities need to ensure patient adherence to treatment plans and medical advice.
- However, Leaving Against Medical Advice (LAMA) discharges – is a situation where patients voluntarily decide to leave the healthcare facility before finishing their prescribed course of treatment which represent a substantial concern for healthcare providers.
- The decision to leave against medical advice is multifaceted and can stem from various factors. Exploring and analysing these underlying reasons is essential to gain insights into patient perspectives, identifying common themes and developing strategies to address the root causes of LAMA.
- Also, it is crucial for healthcare providers to improve patient care & enhance patient satisfaction.

# LITERATURE REVIEW

| TITLE                                                                                                                                                         | AUTHORS (YEAR)                                                                                               | STUDY LOCATION                                          | METHODOLOGY                                                                                                                                                | FINDINGS                                                                                                                                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Factors Contributing to Leaving Against Medical Advice (LAMA): A Consideration of the Patient's Perspective</b>                                            | Eddieson Pasay-An; Romeo Mostoles, Jr; Sandro Villareal; Reynita Saguban<br><br>2023                         | Govt.-Subsidised Hospital in City of Hail, Saudi Arabia | <ul style="list-style-type: none"><li>• Purposive and snowball sampling</li><li>• Sample size- 13</li><li>• Study Duration-3 months</li></ul>              | Based on the accounts of the 13 participant patients, five themes were discernible:<br><br><ol style="list-style-type: none"><li>1. Knowledge of health</li><li>2. Self-diagnosing</li><li>3. Extended wait time</li><li>4. Communication problem</li></ol> Unclear explanation about their condition |
| <b>LAMA from In-Patients Department Rate, Reasons and Predicting Risk Factors for Re-visiting Hospital Retrospective Cohort from a Tertiary Care Hospital</b> | Obada Hasan, Muhammad Adeel Samad, Hamza Khan, Maryam Sarfraz, Shahryar Noordin, Tashfeen Ahmad, Gul Nowshad | Tertiary Care University Hospital in Karachi, Pakistan  | <ul style="list-style-type: none"><li>• Study Duration- 1 year</li><li>• Sample size- 429 LAMA patients accounting for 0.7% of total admissions.</li></ul> | Out of the 429 patients, 147 (34.3%) patients revisited the hospital within 30 days.<br><br>61% of these 'bounced-back' LAMA patients had worsening or persistence of same problem or new problem/s developed.                                                                                        |

# RESEARCH QUESTION

What is the percentage of LAMA  
(Leave Against Medical Advice)  
discharge cases?



What are the reasons for  
patients opting for LAMA?





# OBJECTIVES

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To calculate the percentage of LAMA cases from Emergency Department and IPD respectively.

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To identify and analyse the reasons causing LAMA discharges.

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To analyse LAMA discharges speciality-wise.

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To understand the conversion pattern of LAMA patients from ED to OPD and IPD admissions.

# METHODOLOGY

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Study Setting: Paras Hospital, Udaipur (200 bedded Multi-speciality Tertiary Care)

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Study Design: Retrospective-observational study

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Inclusion Criteria: All IPD patients, critical care IP, Emergency footfall

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Exclusion Criteria: Discharged patients from ED, Day care IPD patients

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STUDY TOOLS: LAMA audit tool, Telephonic interview, Bar-chart, and graphs

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DURATION OF STUDY: 2 Months

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SAMPLE SIZE: 1922

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DATA COLLECTION PROCEDURE: Frome HIS, Electronic Medical Records (EMR), Observation, Telephonic Interview

# ANALYSIS & INTERPRETATIONS

## LAMA from Emergency Department

**a) The analysis of Emergency Department (ED) data about the patient inflow and outflow for the months of April & May gave the following results:**

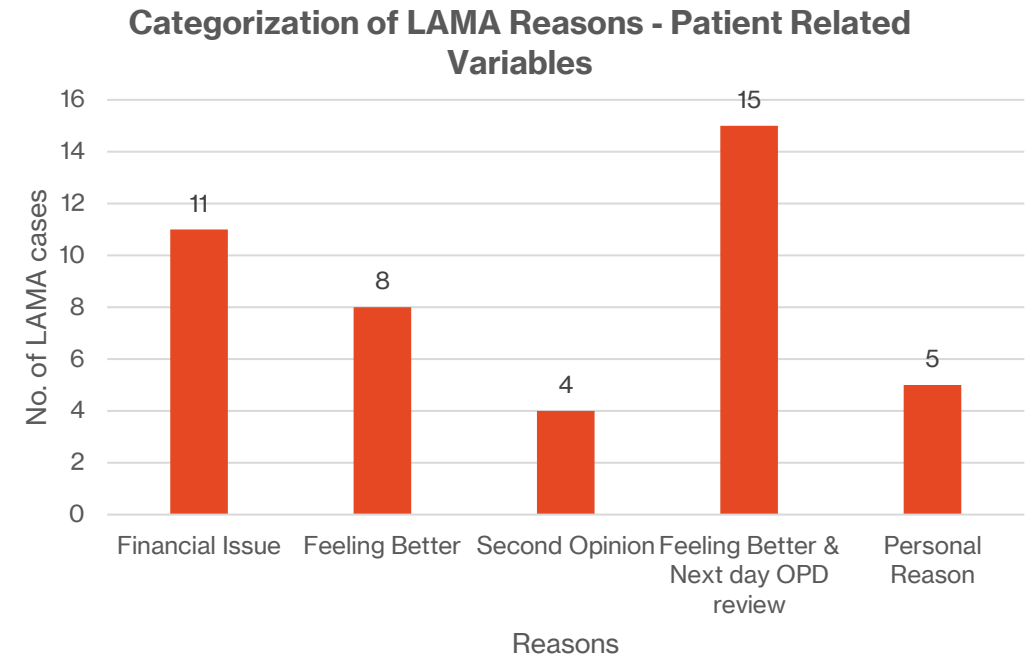
- On calculation of LAMA rate for two consecutive months of April and May we have found that there is a consistent rate of LAMA occurring which is 10.36% for the month of April and 10.89% for the month of May respectively.
- According to the analysis of the overall distribution of the Emergency Department Footfall we have found that most patients visiting ED convert into Admissions i.e., to In-Patient Department (IPD). The ED to IP conversion for 2 months is found to be nearly 70%.
- While the patients who get discharged on medical advice from ED is approx. 20% of the overall ED footfall. Rest is LAMA patients who were advised admission, but they left against medical advice

| Emergency Department Data | April | May |
|---------------------------|-------|-----|
| ED-IP Conversion          | 199   | 221 |
| ED Discharged             | 68    | 61  |
| LAMA                      | 23    | 27  |
| Death                     | 2     | 1   |
| Total ED Footfall         | 292   | 310 |

## b) Analysis of reasons for LAMA from Emergency Department

The reasons captured from the Emergency department Data Register for LAMA are categorized into two broad categories as – Patient Related Variables and Hospital Related Variables.

- The analysis of the patient-related variables states that the most common reason for LAMA is given as the patient is feeling better and wishes to show up in OPD for review with consultant next day (30%).
- The 2<sup>nd</sup> most common reason is the financial issue with the patients (22%).
- The patients who give the reason of feeling better (16%) are either not willing to take further treatment or they go to other hospital.
- The personal reasons (10%) given by the patients were mostly such that they have a function at home, or they want to discuss with their family, or they want to consult a known doctor, etc.

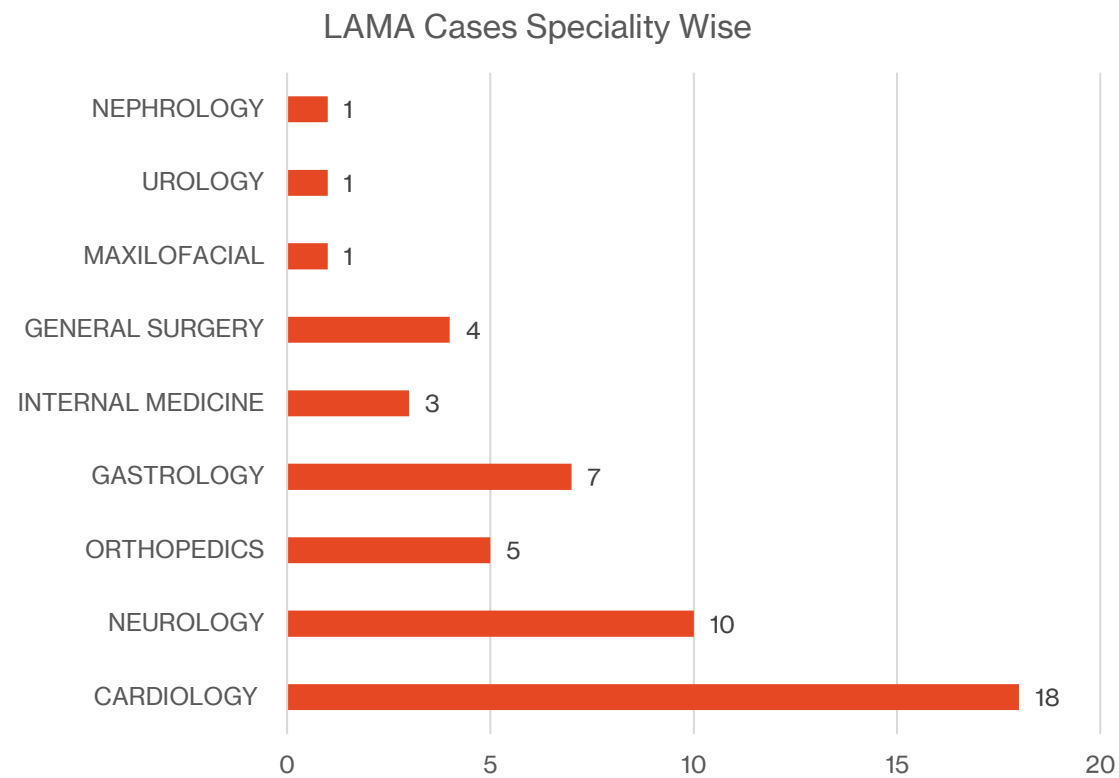


- The analysis of the patient-related variables states that the most common reason for LAMA is given as patient being unhappy with the staff behaviour (6%) which includes the Emergency department medical and nursing staff, billing staff unpleasant behaviour.
- Followed by dissatisfaction with the treatment plan (4%) & unsatisfied with the hospital facilities (4%) such as waiting time, cleanliness.
- The Patients taking LAMA due to Hospital – related reasons are the major areas for intervention where immediate improvement is needed to be made as it puts the quality of services of hospital in question.



**c) Speciality-wise analysis of LAMA cases from Emergency Department**

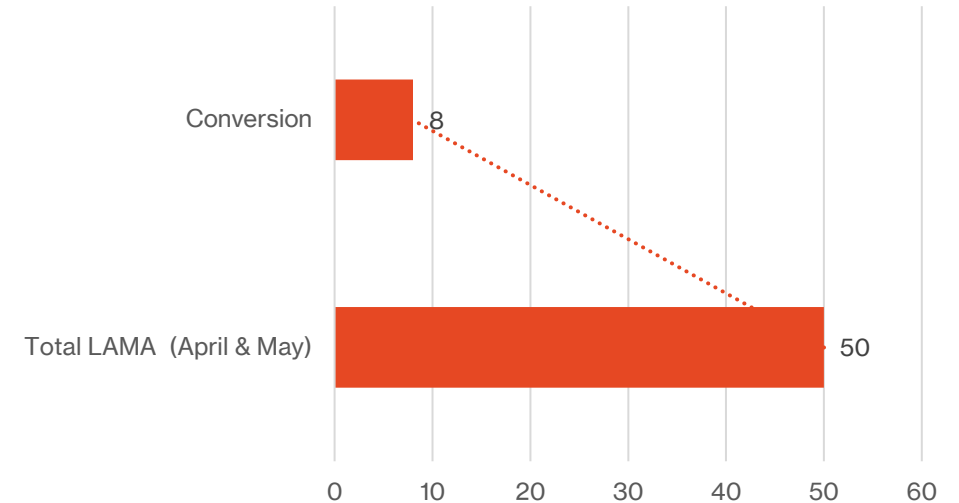
- These mentioned specialities in graph are the ones in which LAMA took place in months of April & May in the ED.
- The analysis of LAMA cases speciality wise states that the maximum no. of LAMA cases is from the Cardiology speciality i.e., 36 % of the total LAMA cases, from Neurology 20 % and from Gastroenterology 14 %.



#### d) Analysis of the LAMA Conversion from ED to OPD & ED to IPD

- The patients who opted for LAMA in Emergency Department and later come in OPD for review with the consultant are considered as ED-OPD conversion.
- In the 2 months duration out of 50 LAMA cases from ED, 8 LAMA patients showed up.
- Out of which 7 patients were ED – OPD conversion while there was 1 ED – IPD conversion of LAMA cases.

Total LAMA (April & May) Vs LAMA Conversion



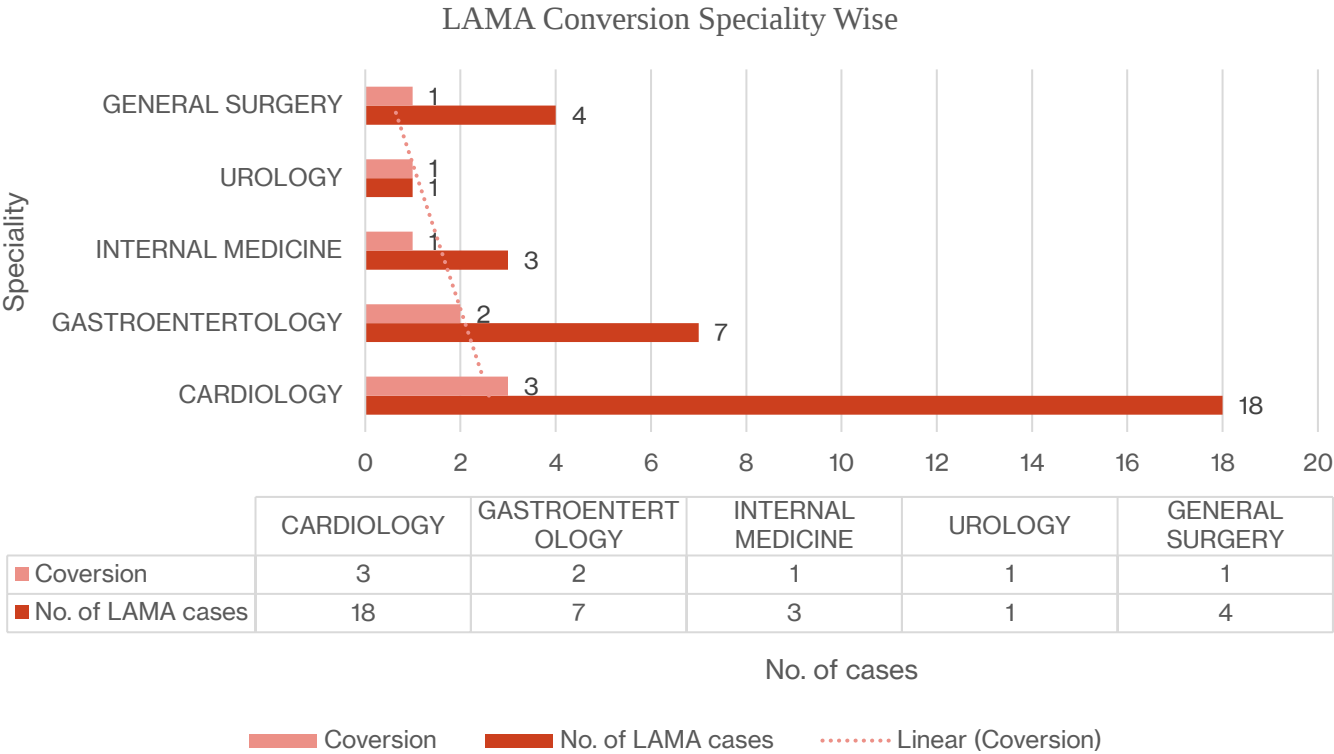
**d) Speciality-wise analysis of LAMA conversion from Emergency Department**

The analysis of the LAMA Conversion from ED to OPD & ED to IPD states that there was conversion only in 5 specialities from LAMA from total 9 specialities.

The maximum percentage of conversion is in Urology i.e., 100%, while in Internal Medicine 33.33%, General Surgery 25%, Gastroenterology 28.57% & Cardiology 16.66%.

The patients who bounced back were from following categories of reasons:

- Feeling Better & Next Day OPD Review (37.5%)
- Personal Reason (37.5%)
- Second Opinion (12.5%)
- Feeling Better (12.5%)



## LAMA from IPD

a) **The analysis of IPD data for the months of April & May gave the following results:**

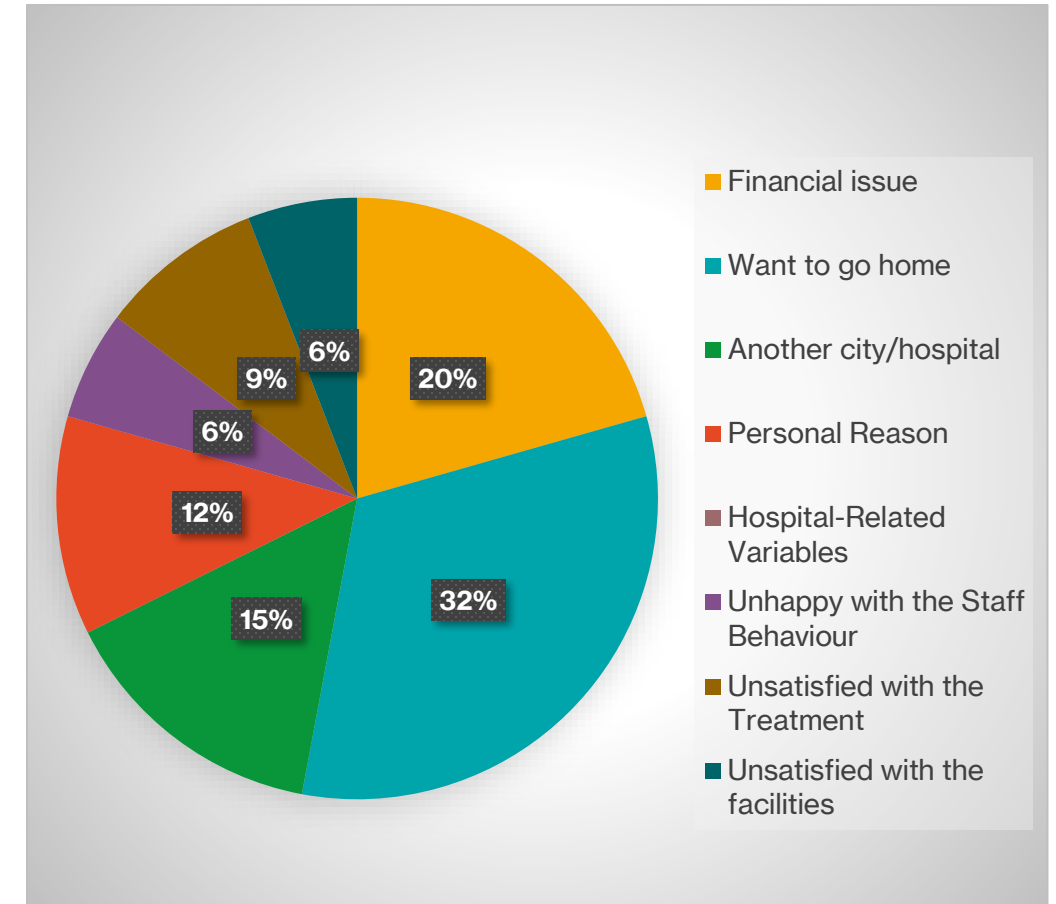
- The LAMA percentage calculated for the month of April & May combined is nearly 2%
- It states that the percentage of LAMA from IPD is significantly lesser as compared to LAMA from ED.
- Majority of discharges are of normal category that is discharges with medical advice.

| IPD Data                   | April | May |
|----------------------------|-------|-----|
| Normal Discharge           | 727   | 957 |
| LAMA                       | 11    | 23  |
| Discharge on Request (DOR) | 2     | 4   |
| Expired                    | 10    | 6   |
| Total                      | 750   | 990 |

## b) Analysis of reasons for LAMA from IPD

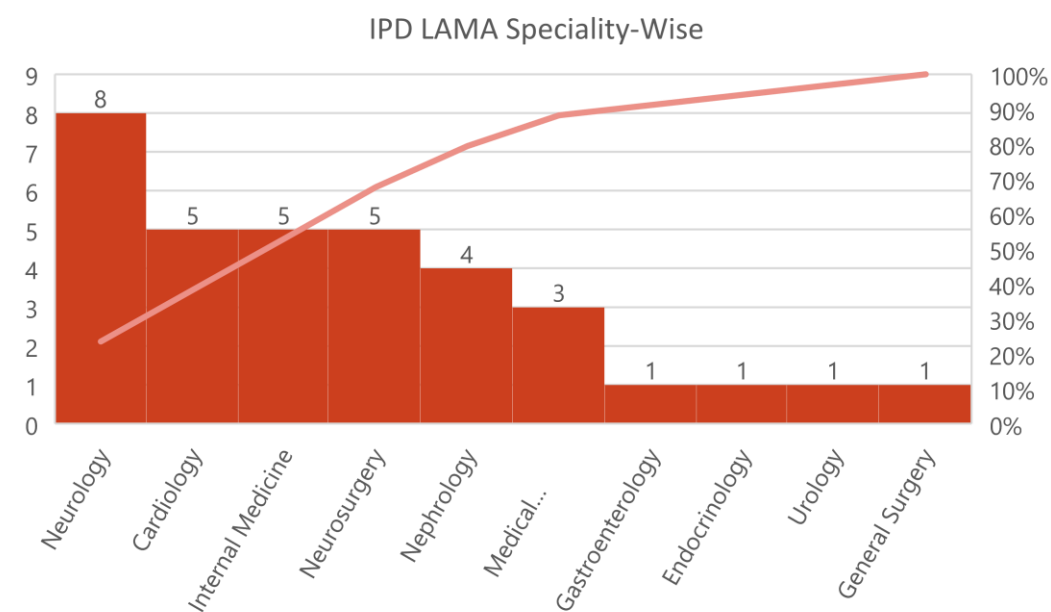
The Analysis of the reasons of LAMA from IPD for the months of April & May states that -

- The maximum (32%) LAMA cases wanted to go home, under their own responsibility because they did not want to stay any further in the hospital.
- The 2<sup>nd</sup> most stated reason was the financial concern of the patients i.e., 20%
- The patients who opted for LAMA to go to other metro city or hospital for second opinion or further treatment were around 15%
- The patients who left for personal reasons were 12%
  - The personal reasons were such that-
    - The patient's attendees were preferring home care.
    - Due to festival
    - There is a wedding at home.
    - Patient's relatives want to take patient to a known facility.
- The Hospital-related reasons were mainly of patient not satisfied with the current treatment i.e., 9%
  - While other hospital-related reasons were patient dissatisfied with the nursing care, billing staff (6%), facility related reasons such as food taste, waiting time of diagnostic services (6%).



**c) Speciality-wise analysis of IPD LAMA discharge cases**

The speciality-wise analysis of the LAMA cases from IPD for the months of April & May states that the maximum no. of LAMA cases occurred from Neurology speciality i.e., 23.5%  
Followed by Cardiology, Internal Medicine & Neurosurgery at the same level of 15%.



# SUGGESTIONS FOR REDUCING LAMA

Based on the study, the plausible recommendations to reduce instances of LAMA can be –

- **Improved Patient education through effective counselling**

As most patients desire to review in OPD with the consultant or take second opinion from some other doctor or hospital. If they get effective counselling it will help them understand their medical condition, treatment plans better as well as potential risks associated with delay in treatment.

- **Improve waiting time and hospital experience**

The turn-around-time should be monitored for services to be availed on time and reduce dissatisfaction of patients. The staff needs to be more responsive and should be trained for developing soft skills.

- **Address financial concerns**

With the availability of financial aid schemes such as RGHS, Mukhyamantri Cheeranjeevi Yojana, ECHS, and private insurance in place, the patients who are unaware of these financial aids needs to be guided and counselled properly by the billing or management staff.



# CONCLUSION

- The study on the reasons for LAMA discharges sheds light on important insights into patient behaviour such as paying capacity, competition from other healthcare facilities in the region or outside, etc.
- The findings from the study gave useful insights into improving patient care, communication, and overall delivery of care. The analysis of LAMA cases revealed concerns regarding the staff behaviour, waiting time, dissatisfaction with the treatment plan, canteen services, etc. which can be improved with immediate action.
- Similarly, various specialities were identified as having higher rates of LAMA cases. These findings emphasized the need for improved addressing patient concerns.
- However, it is crucial to recognize the limitations of this study. The findings are specific to the hospital setting and may not be directly applicable to other healthcare institutions.

**THANK YOU!**