

# Follow-up with a doctor within 7 days of discharge following hospitalization for chronic obstructive pulmonary disease (COPD)

## Alternate Name\*

Percentage of patients who saw a family doctor or specialist within 7 days of discharge after hospitalization for chronic obstructive pulmonary disease (COPD)

## INDICATOR DESCRIPTION

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### Description\*

Percentage of follow-up visits with a doctor within 7 days of discharge after hospitalization for chronic obstructive pulmonary disease (COPD) among patients aged 40 and older. A higher percentage is better.

### HQO Reporting tool/product

Public reporting

### Dimension\*

Effective

Timely

### Type\*

Process

## DEFINITION AND SOURCE INFORMATION

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### Unit of Measurement\*

Percentage

### Calculation Methods\*

The percentage is calculated as: numerator divided by the denominator times 100

### Numerator (short description i.e. not inclusions/exclusions)\*

The number of patients in the denominator discharged from acute care hospitals after an admission for chronic obstructive pulmonary disease (COPD) who had at least one doctor visit within 7 days after discharge

### Denominator (short description i.e. not inclusions/exclusions)\*

The number of patients aged 40 and older discharged from hospital after an admission for chronic obstructive pulmonary disease (COPD)

### Adjustment (risk, age/sex standardization)- generalized

Age and sex standardized

### Data Source

Ontario Health Insurance Plan (OHIP) Claims History Database  
Registered Persons Database (RPDB)  
Physician Database (IPDB)  
Discharge Abstract Database (DAD)

### Data provided to HQO by

Institute for Clinical Evaluative Sciences (ICES)

### Reported Levels of comparability /stratifications (defined)

Time  
Region

## OTHER RELEVANT INFORMATION

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### Caveats and Limitations

The indicator captures a visit with a doctor for any reason and may not necessarily have the same reason as the hospitalization. Follow up by non-physician providers (i.e., nurse practitioners in family health teams) or providers that do not provide billing or shadow billing will not be captured. It is hard to interpret the results as there is some variation in recommended time period for the follow-up (ranging from one week to one month).

### Comments Summary

The admissions are unique by episode (e.g., one patient can have more than one admission during the fiscal year).

## TAGS

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### TAGS\*

Primary Care  
Process  
Access  
Chronic Disease  
Integration  
Effective  
Timely  
Ontario Health Insurance Plan (OHIP) Claims History Database  
Registered Persons Database (RPDB)  
Physician Database (IPDB)  
Discharge Abstract Database (DAD)

## PUBLISH

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### PUBLISH DATETIME\*

20/11/2018 15:21:00