



Research Brief

Rehospitalization during the first five years after the onset of traumatic spinal cord injury: A population-based study using administrative billing records

Introduction

Our objective was to identify the number, length of stay, and charges of rehospitalizations during the subsequent 5 years after discharge from the initial hospitalization by using administrative billing records from a population-based cohort with spinal cord injury (SCI) in the southeastern United States.

Key Findings

- Seventy percent of participants were re-hospitalized during the first 5 years after initial discharge, and the highest rehospitalization rates were in the first year (54%), being relatively stable in years 2-5 (21%-22%).
- Adjusted to 2019 US dollars, the average total rehospitalization charges were \$214,716 per person during the 5 years.
- Participants who could walk independently had fewer rehospitalizations, fewer rehospitalization days, and less rehospitalization charges than the non-ambulatory participants.
- College education was also associated with less rehospitalization charges.

Conclusion

Rehospitalization is a significant cost after SCI. Further longitudinal study on the population cohorts and billing data are needed to quantify these changes over time.

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