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Retrospective Chart Review of Metastatic Solid Tumor Discharges to Subacute Rehab

Sarah Svetec, Molly Hanson CRNP*, Brooke Worster MD

Introduction and Objective

- <u>Background:</u> regaining strength through subacute rehabilitation (SAR) as a mechanism to return cancer patients to therapy is poorly understood
- <u>Rationale</u>: provide realistic advice to patients when cancer-directed therapy must be stopped
- Inquiry question: what are cancer patients able to accomplish following referral to SAR?
 - *Hypothesis:* majority of patients will not return to cancer-directed therapy following SAR; high functional status at discharge will be the best predictor of return

Methods

- **<u>Population</u>**: metastatic solid tumor patients discharged to SAR (2018-2020)
 - Partnership: Neu Center Research Team
- **Collection methods:** retrospective chart review
- Main predictors & outcomes:
 - Primary outcome = patient return to anti-cancer therapy
 - Main predictor = PT functional status score (AMPAC)
- <u>Analysis:</u> descriptive statistics of patient outcomes + logistic regression of AMPAC score and return to therapy

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Results

• Results are pending!

• Example results:

Only 31 of the 112 patients (28%) returned to cancerdirected therapy within 60 days of discharge to SAR. Functional status score was positively associated with return to cancer-directed therapy. The average survival for patients was 36 days from original discharge and 40% of patients were readmitted to the hospital within 30 days.



Conclusions

- Potential impact: guidance to patients during difficult turning point in care
- Limitations: sample only includes SKCC patients, decision is highly individual
- <u>Next steps</u>: receive data through EPIC extraction \rightarrow run analysis with statistician \rightarrow assist in writing paper



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