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# The disease burden of ENT in-patient cases in 2020 according to My-DRG code at a teaching hospital

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## Introduction



UNIVERSITI SAINS ISLAM MALAYSIA  
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- UMMC is the first teaching public hospital in Malaysia having 1,617 beds, serving estimated 3 million of the population surrounding it.
- It is also a referral centre for Otorhinolaryngology (ENT) cases among other complicated cases.
- ENT cases accounted for 2% of the total cases admitted with tonsillectomy as the most common ENT procedures at MOH hospitals. (MOHE, 2018)
- ENT – one of the top global diseases (2015) with hearing loss and Otitis Media as the 4<sup>th</sup> 3<sup>rd</sup> most common chronic and short-term diseases, respectively. While head and neck neoplasm incidence had also increased (Saunders et al., 2018).

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## Aim of study



To establish the most common ENT in-patient cases according to My-DRG classification at UMMC in 2020.

To understand the disease burden of ENT cases and the relevance of such admission for future management.



## Methods



- Patients' data on hospital admissions were extracted from the Hospital Information System (HIS) and discharge summaries.
- The data include:
  - Sociodemographic characteristics of patients such as patient identification, date of birth, age, admission date, discharge date, gender and discharge status
  - ICD-10 codes for the diagnoses (Primary and secondary diagnoses)
  - ICD-9-CM (Clinical procedures)
- Extracted data were imputed into the case-mix grouper to obtain the DRGs

Patient Information

Patient No: 1 Name: akmaludin Insurance No: 1

Patient Type:  Inpatient  Outpatient

Gender:  Male  Female

Admission Date: 13/05/2013  
Discharge Date: 27/05/2013  
Length of Stay: 15  
ADL Index: 12

Birth Date: 04/06/1950  
Ages (in Years): 63  
Age (in Days): 0  
Weight: 0

Discharge Status: Home and Self Care  
Tariff Class: CLASS\_3

Diagnoses

Code	Description
G01	Meningitis in bacterial diseases classified elsewhere
R51	Headache
R509	Fever, unspecified
R11	Nausea and vomiting

Procedures

Code	Description
0332	Biopsy of spinal cord or spinal meninges
0331	Spinal tap
9921	Injection of antibiotic

Result Summary

UNU-CBG: G-1-30H SPINAL OPERATION - Minor  
UNU-SC: NONE NONE  
ALOS (Acute): 12 Tariff: 4,330,366

Sociodemographic characteristics

ICD-10

ICD-9-CM

- DRGs were arranged according to the number of cases seen and top five DRGs were identified.
- The details of the top five DRGs were reported which include:
  - DRG codes
  - Description of the code
  - Number of cases
  - Mean age (years)
  - Average length of stay (days)

- Total episode of hospital admissions in 2020 was **42,804**
- Total admission for ENT were **1099 (2.6%)** with a total of **32 DRGs**.
- 5 top ENT DRGs were
  - Epiglottitis Upper Respiratory Tract Infection Laryngotracheitis & Otitis Media - Mild (U-4-13-I)
  - Other Ear Nose Mouth & Throat Disorders - Mild (U-4-15-I)
  - Oral & Dental & Oral Disorders – Mild (U-4-14-I)
  - Other Ear Nose Mouth & Throat Operations - Minor (U-1-20-I)
  - Ear Nose Mouth & Throat Neoplasms - Mild (U-4-10-I)

#	Selected DRG	Number of cases	Mean Age (years)	ALOS (days)	Range (days)
1	Epiglottitis Upper Respiratory Tract Infection Laryngotracheitis & Otitis Media - Mild (U-4-13-I)	271 (24.7%)	20.61	3.58	1 - 18
2	Other Ear Nose Mouth & Throat Disorders - Mild (U-4-15-I)	176 (16.1%)	53.5	6.8	1 – 22
3	Oral & Dental & Oral Disorders – Mild (U-4-14-I)	142(12.9%)	18.53	9.7	1 – 731
4	Other Ear Nose Mouth & Throat Operations - Minor (U-1-20-I)	87 (7.9%)	48.66	16.03	1 - 82
5	Ear Nose Mouth & Throat Neoplasms - Mild (U-4-10-I)	72 (6.6%)	60.9	4.78	1 - 55

- Majority mild cases – it doesn't reflect true workload of UMMC as a tertiary centre
- WHY??
  - Poor coding/ uncoding/ coding error
  - No clinical pathway – variations in management
    - Procedures were cancelled, patients were not fit (should screen thoroughly)
    - Admit patients unnecessarily



- Establishment of clinical pathway is crucial to ensure standard management for all patients
- Training for coders, medical personnel that involve in coding to minimize coding error
- Use casemix as the assessment for the quality of care



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