

CHAPTER 6

CONCLUSION AND RECOMMENDATION

6.1 Conclusion

This study is a descriptive retrospective study of unit cost of the Diagnosis - Related Group (DRG) for Appendectomy of King Chulalongkorn Memorial Hospital which was performed during October 1, 2000 to December 31, 2001 at King Chulalongkorn Memorial Hospital. The main objective of this study was to determine the unit cost of DRG for appendectomy of King Chulalongkorn Memorial Hospital.

This study asked permission from King Chulalongkorn Memorial Hospital to utilize some results of the study **“Cost Analysis of Patients Services at King Chulalongkorn Memorial Hospital”** to represent some costs information for this study.

The departments concerning this study are the IPD-ordinary female and male surgical wards (Arthorn 1 and Panchamarachinee 1) and the emergency OR (OR. Phor.Por.Ror.5).

There were 120 in-patient history records were enrolled for this study. The average age of the samples was 29.93 years. Every case had to pass the eligibility and ineligibility criteria to meet the criteria of appendectomy without any underlying disease and complication. Their LOS varied from 2 days to 5 days. The mode of LOS was 3 days. The average operation duration of appendectomy of the samples was 70 minutes and the unit cost of RSC of emergency OR for appendectomy was 5,911.66 baht.

For the medical care cost information, the study found that the most common investigations for appendicitis patients were Routine CBC, Anti HIV and routine urinalysis. The average cost of investigations of the samples was 502.35 baht. The most common injected antibiotic used for the sample was Metronidazole and the secondary was Gentamicin. The average cost of medicines used for the samples was 199.44 baht.

The unit cost of IPD-ordinary surgical ward of appendectomy was 8,994.31 baht. The unit cost of RSC of IPD-ordinary female surgical wards of appendectomy was 8,543.37 baht and for IPD-ordinary male surgical ward was 9,445.25 baht .

The unit cost of DRG for appendectomy was 15,607.76 baht. The unit cost of DRG for appendectomy of female patient was 15,156.82 baht and for male patient was 16,058.70 baht.

6.2 Recommendation

1. During the process of data collection of this study, the researcher found that many materials, medicines and intravenous fluids used for each patient were requested centrally by using the requisition forms of the unit that each patient was admitted. Therefore it is difficult to identify clearly the relevant costs used by the hospital for each patient and difficult to compute the real cost per DRG and difficult to reflect the resource consumption of each DRG.

To study the real cost of each DRG, all relevant range of costs of the individual patient must be clearly identified for measure and value. However if it is possible, all materials, medicines and intravenous fluids used for each patient should be requested and charged directly to each patient because it is easy to be traced, checked, and studied for their costs, budgets and the profitability analysis.

Apart from that the information system of the whole organization such as the records, the documentary system should be processed and kept by the same method and procedure. To use the computer system to collect the data as much as possible, it can help the hospital to save the papers and times to trace the information and much more easy to use the information for the departmental and the organization development.

2. Since the Ministry of Public Health of Thailand is trying to use DRGs system for the prospective reimbursement rates for the Social Security Fund, the Vehicle

Insurance Fund, the Civil Service Health Insurance Fund, Health Card project, 30 baht project and other health care policy decisions. Therefore the further DRG studies should be performed continuously by the hospital to settle the appropriate charge price and to be always updated with the current economic situation. Apart from that, the administrators can use the results for estimating the cost saving associated with reduction in the resource consumption

3. During the process of data collection of this study, the researcher founded that many medical records were not filled out completely and lacked of much important information such as the operating procedure, the records of medication providing.

A large number of errors and blanks of important information can effect the results of some studies that have to be estimated by a review of patients charts. They therefore should be always randomly checked to arouse the concerning staffs realize the important of filling out all of important information completely.

4. King Chulalongkorn Memorial Hospital has an important responsibility to participate the health personnel training such as medical students, nursing students and pharmacy students. Since many departments have to be responsible for providing training and practice to them, the hospital therefore has to spend a great amount of budget for these teaching procedures. To study the real budgets and the cost-effectiveness concerning these responsibilities should be performed to assist the administrators to allocate and administrate these budgets effectively and efficiently. Furthermore, to settle the clinical practice guidelines or the treatment maps can lead the practitioners for the appropriate treatments and can reduce the rate of over investigations.

Apart from that, the hospital should provide the cost-effective training to the staffs and students continuously because all of them acquire responsibility for budgets. First of all, they have to realize the important of the budget saving and the economic crisis status of Thailand.