**Discharge Instructions for Spanish-Speaking Patients:**

**A House Staff Perspective**

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**Background**

UC San Diego Health has a diverse patient population with a large portion of its hospitalized patients speaking Spanish as their primary language. Several measures have been taken to overcome barriers to quality healthcare in this subgroup of patients, including easy access to medical translators and post-discharge follow-up efforts; however, there may be room for further improvement. One barrier that remains is providing written hospital discharge instructions for Spanish-speaking patients in their native language. The purpose of this study was to measure the overall perspective of physicians practicing hospital medicine at UC San Diego regarding our ability to effectively provide discharge instructions to Spanish-speaking patients that maximize positive health outcomes after hospitalization.

**Methods**

A seven-question survey was designed to measure the perspectives of hospital staff, including resident and attending physicians, practicing hospital medicine within the UC San Diego healthcare system. In March 2023, the survey was distributed electronically to all resident physicians enrolled in and select administrative attending physicians involved in the UC San Diego internal medicine residency program. Participants were given a two-week period to complete the survey. All participation was voluntary, and responses were collected anonymously. The responses were subsequently analyzed using descriptive statistics.

**Results**

Thirty-five participants completed the survey in its entirety, representing approximately a quarter of the internal medicine residency program. Data analysis revealed that 74% of participants “always” or “often” write discharge instructions for Spanish-speaking patients in English. Furthermore, a majority 91% of participants felt that providing instructions in English to Spanish-speaking patients “always” or “often” represents a barrier to care. 100% of participants indicated that, at a minimum, they would “sometimes” use pre-written translator-approved Spanish phrases if provided, with over half of participants replying that they would “always” use these instructions. Lastly, a majority of participants felt that the use of these phrases in Spanish would improve overall follow-up and medication adherence, as well as reduce readmission rates.

**Conclusions**

Considering these data, it appears that the current method of providing discharge instructions written in English to Spanish-speaking patients is considered a barrier to adequate healthcare at UC San Diego hospitals by internal medicine house staff. Though unlikely to completely resolve the problem, using translator-approved Spanish phrases in discharge instructions may improve follow-up and medication use after discharge, and reduce readmission rates among Spanish-speaking patients. These data will help support current efforts to provide Spanish discharge instructions for Spanish-speaking patients.

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