



Dementia as leading co-morbidity in homebound seniors: A retrospective look at first year of inception of an NP-led medical house call practice

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Background

21st century phenomenon: medical house call practice revivals by US Physicians and Nurse Practitioners (NPs). Medical treatment of homebound elderly in their own homes. US faces challenges how and where to care for its aging population. NP practice fills gap of home-based care as potential solution; evidence indicates care by advanced practice nurses reduces cost, decreases length of hospital stay, decreases readmission to hospitals, and improves patient quality of life.

Aims/Goals

- 1) Retrospective look of a NP-led medical house call practice.
- 2) Assess trends in the practice.

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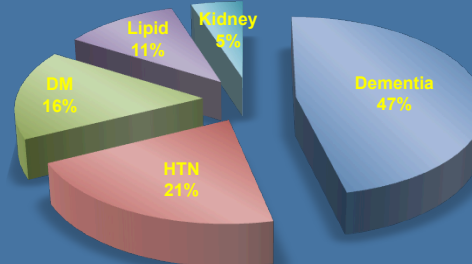
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Results

Dementia	47%
Hypertension	21%
Diabetes	16%
Hyperlipidemia	11%
Kidney Disease	5%

(Placer & Sacramento Counties, Northern California, USA, 2014 data)



Conclusion/Clinical Relevance

There is a resurgence of medical house call services by a combination of physicians and emerging practices by nurse practitioners.

House calls by a Nurse Practitioner opens up opportunities to address some of the challenges such as access to care for dementia patients.

Further exploration at how this practice model can lessen emergency room visits or hospital readmissions is recommended.

“The living room is your exam room.”

-Senior Care Clinic House Calls