**Appendix 1: LACE index for the quantification of risk of death or unplanned readmission within 30 days after discharge**

|  |  |  |
| --- | --- | --- |
| Attribute | Value | Points\* |
| Length of Stay, d (“L”) | <1 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4-6 | 4 |
| 7-13 | 5 |
| ≥14 | 7 |
| Acute (emergent) admission (“A”) | Yes | 3 |
| Comorbidity (Charlson comorbidity index score1 ) (“C”) | 0 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| ≥4 | 5 |
| Visits to emergency department during previous 6 mo (“E”) | 0 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| ≥4 | 4 |

\*A patient’s final LACE score is calculated by summing the points of the attributes that apply to the patient.

1 The Charlson comorbidity index score was calculated using 1 point for history of myocardial infarction, peripheral vascular disease, cerebrovascular disease or diabetes without complications; 2 points for congestive heart failure, chronic obstructive pulmonary disease, mild liver disease or cancer; 3 points for dementia or connective tissue disease; 4 points for moderate to severe liver disease; 6 points for metastatic cancer.

van Walraven C, Dhalla IA, Bell C,  et al.  Derivation and validation of an index to predict early death or unplanned readmission after discharge from hospital to the community. *CMAJ*. 2010;182(6):551-557

**Appendix 2: Proposed high risk predictors -Univariate Analysis of ED or IP Admissions-General Internal Medicine**

|  |  |
| --- | --- |
| **Effect** | **Adjusted Odd’s Ratio (95% CI)** |
| Age (continuous) | 1.00 |
| Sex (M vs F) | 1.130 (1.02-1.25) |
| Number of medications on Discharge (continuous) | 1.02 (1.01-1.03) |
| LACE Index score (continuous) | 1.11 (1.09-1.13) |
| High Alert Medication (Y/N) | 0.94 (0.83-1.07) |