Appendix D Table 25. Benefits of Primary Care Interventions for Child Maltreatment Prevention From Randomized, Controlled Trials in the Sensitivity Analysis (KQ1) – Hospitalization, Categorical Outcomes

| Author, Year  Quality  Overall Sample Size (Analyzed) | Outcome Definition | Followup Timing | Hospitalization Events, G1  No. (%) | Hospitalization Events, G2  No. (%) | Hospitalization Events, G3  No. (%) | Hospitalization Events, G4  No. (%) | Effect Estimate or Other Outcome Measure |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Duggan et al, 1999145  Poor  Total N=730 mothers randomized (N analyzed=564) | Ever hospitalized for any reason in first year of life; based on maternal reports because review of pediatric medical records and claims files was still in progress when study was published | 1 year | NR (18) | NR (17) | NA | NA | p=0.69 |
| Duggan et al, 1999145  Poor  Total N=730 mothers randomized (N analyzed=534) | Ever hospitalized for any reason in first 2 years of life; based on maternal reports because review of pediatric medical records and claims files was still in progress when study was published | 2 years | NR (22) | NR (19) | NA | NA | p=0.44 |
| Duggan et al, 2004146  Poor  Total N=730 mothers randomized (N analyzed=573) | Trauma admissions among patients with complete hospitalization data; measured by maternal interview and review of the child’s primary care records. Hospitalizations for trauma might indicate inadequate safety precautions or physical abuse and /or hospitalizations that might have been avoided with adequate primary care that might indicate medical neglect. | 3 years | NR (1.7) | NR (1.5) | NA | NA | p=NS |
| Hardy et al, 1989173  Poor  Total N=290 infants randomized (N analyzed=263) | Children with hospital admission; determined by (1) computerized record system with summaries of visits to the C&Y clinic, the pediatric ED, and other JHU clinics, and brief descriptions of inpatient hospital care, (2) review of medical records, (3) data collected by home visitor on final visit, and 4) telephone interview | G1: 22.9 months  G2: 23.4 months | 20 (15.2) | 8 (6.1) | NA | NA | p<0.01 |
| Infante-Rivard et al, 1989174  Poor  Total N=47 mother-child dyads randomized (N analyzed=47) | Percentage of children hospitalized during the previous year; obtained from questions asked during followup visit | 15 months | NR (19.2) | NR (14.3) | NA | NA | p=NS |
| Koniak-Griffin et al, 2002175  Poor  Total N=144 caregivers randomized (N analyzed=102) | Number of children hospitalized; based on maternal reports and verified with medical records when possible; medical record used in cases of discrepancy | 12 months | 13 (28) | 12 (22) | NA | NA | p=NS |
| Koniak-Griffin et al, 2003171  Poor  Total N=144 randomized (N analyzed=101) | Number of children hospitalized; based on maternal reports and verified with medical records when possible; medical record used in cases of discrepancy | 24 months | 16 (35.6) | 12 (21.4) | NA | NA | p=NS |

\* Of the 1,139 mothers randomized, 743 were enrolled for followup.

† Calculated based on author-reported diagnoses for hospitalizations in which injuries and ingestions were detected.

**Abbreviations:** C&Y=children and youth; ED=emergency department; G=group; JHU=Johns Hopkins University; KQ=key question; N=number; NA=not applicable; NR=not reported; NS=not sufficient.