P8130: Biostatistical Methods I Final Project (Fall 2017) Due, December 15<sup>th</sup> @ 12:00pm

## **Guidelines for Project Submission**

This group project must be submitted through Canvas before the deadline. Late email submissions WILL NOT be accepted and will receive a score of 'Zero' for all group members!!

All graphs, output and interpretations must be included in **ONE PDF** (not the R/SAS code), otherwise it will not be graded. You also have to submit the R/SAS code used in your project, but please add it at the end of the document or in a separate attachment.

#### **General Writing Instructions**

The PDF containing your summary should not exceed **5 double-spaced pages** using 11 or 12-point font, INCLUDING figures and tables, references, appendix, etc. However, you do not need to fill all 5 pages – a succinct, but comprehensive summary will be very much appreciated.

Your report should be structured as a publishable research article containing the following sections:

- Abstract.
- Introduction (context, background of the problem),
- Methods (data description and statistical methods),
- Results,
- Conclusions/Discussion

Your findings should be written as for an informed (but non-statistical) audience (no formulae!). Each figure and table should be of publishable quality and well notated, i.e., labeled and/or captioned.

## **Grading Instructions**

The rubric attached will be used to evaluate the project. This is a group project and collaborations within your group are essential. Therefore, 90% of your individual grade will be based on the group report, and 10% on group participation. Each member of the group will review his/her colleagues and give them a score from 1 (worst) to 5 (best). I will then average the ratings and use that score for your 10% group participation.

Academic dishonesty will be punished with a 'Zero' grade for this project.

The Data Analytics group from Good Health Corporation are interested in improving the overall hospital management and minimizing the cost/resources associated with patients' care. One of the most important outcomes that has a direct effect on these aspects is patient's length of stay (LoS) in the hospital. Thus, they would like to know which variables are associated with LoS, and ultimately build a predictive model to be used for future visits. The group has contacted you to study this problem and make a recommendation.

# **Data Description:**

A total of 3682 records from 3612 patients were collected in the 2016 calendar year. Only visits within 24 hours of hospital admission and for patients older than 17 years were considered relevant for this analysis. Below you have a selected list of variables that **need to be considered in your analysis.** Feel free to explore other variables as well, but make sure that you first address the ones below.

PatientID: unique identifier for each patient

VisitID: unique number for each admission (can be multiple per PatientID)

AdmitDtm: complete date of admission

LOSDays2: length of stay in the hospital (days)

Ls30DayReadmit: 1=admission into the hospital within past 30 days; 0=otherwise.

MEWS: The Modified Early Warning Score (MEWS) determines the degree of

illness of a patient based on respiratory rate, oxygen saturation,

temperature, blood pressure, heart rate, AVPU response;

0-1=normal, 2-3=increase caution, 4-5=further deterioration, >5

immediate action required

Cindex: Charlson comorbidity index (CCI) ranks patients based on severity of

comorbidity: 0=normal, 1-2=mild, 3-4=moderate and >5=severe

Evisit: number of times the patient visited an emergency department in the six

months prior to admission (not including the emergency department visit

immediately preceding the current admission)

ICU Flag: 1=if during hospitalization, the patient had a visit in the intensive care

unit (ICU); 0=otherwise. Note that ICU patients tend to have more

hospital related conditions and thus a longer length of stay.

AgeYear: patient's age in years
Gender: patient's gender
Race: patient's race
Religion: patient's religion

MaritalStatus: patient's marital status InsuranceType: patient's insurance

Vital Signs:

respiration rate, blood pressure diastolic (BPD), oxygen saturation (O2), blood pressure diastolic (BPS), temperature, heart rate, and body mass index (BMI).

<u>Note:</u> Each VisitID represents a unique visit. However, it is possible that a patient visited the hospital more than once. Summarize the number of visits per patient and if multiple visits per patient, select the first visit (by date) recorded.

# (Some) things you should consider:

- Data cleaning: replace any 'funny' characters with missing values
- Transformation(s) of the outcome
- Re-code/combine levels of categorical variables based on frequency and practical importance
- Check the predictive capability of the model
- In this course, we only covered linear regression models. Let us assume that even after exploring different combinations of predictors your model does not fit the data well and/or does not have a good predictive ability. What other statistical methods/models not covered in this course would you recommend for future steps?