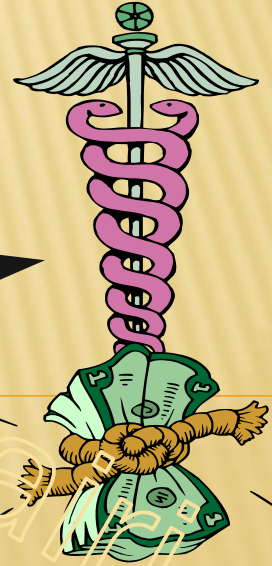


Prof Dr



Prof Dr Jamal Alkudhairi 2025

HOSPITAL ECONOMICS

HOSPITAL INCREASE



Industrialization



Urbanization



Wealth



Population densities



Outbreaks

HOSPITAL ECONOMICS



Modern hospitals emerged in 20th century with discovery of antiseptics, anesthesia, X ray.

✦ **Iraq Hospitals:** 2017 → 400, 2020 → 450

2017: 273 Gov hospitals (7 hospitals /million),
44,527 gov beds (12 bed /10000 pop)

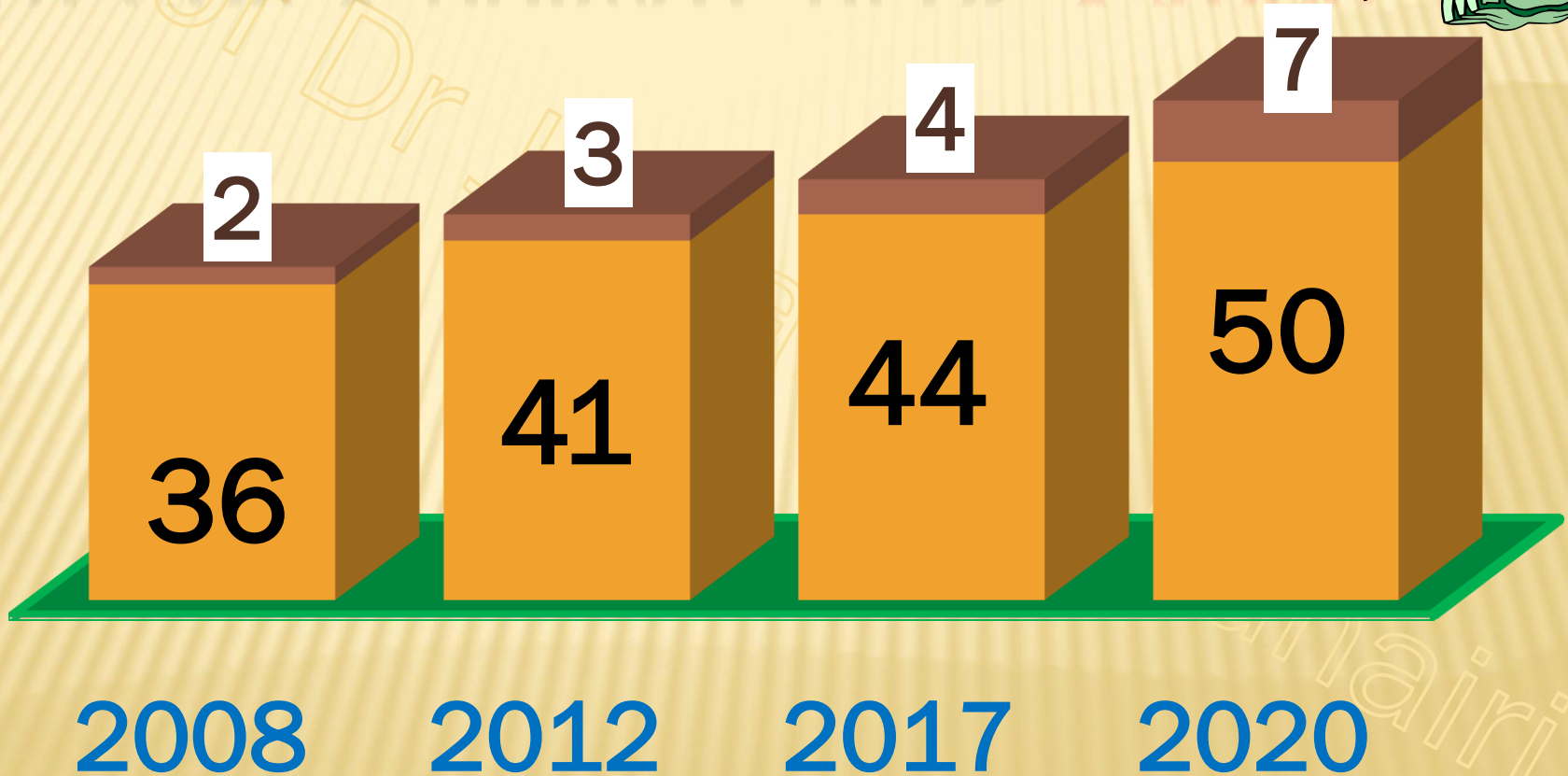
✦ Hospital costs (big capital & enormous running costs) leaves little for PHC.

How many thousands serve one hospital?

IRAQI HOSPITALS GOV/PRIVATE



TOT GOV & PRIVATE BEDS X 1000



HOSPITAL CLASSIFICATION



- **Types:** community (usually teaching), mental, TB, maternity, orthopedic, rehab.
- **Ownership:** private, public (central, governorate, local).
- **Length of stay:** \leq or $>$ month.
- **Size:** ≤ 200 , $200 - 500$, ≥ 500 beds.

HOSPITAL TENT / ITALY

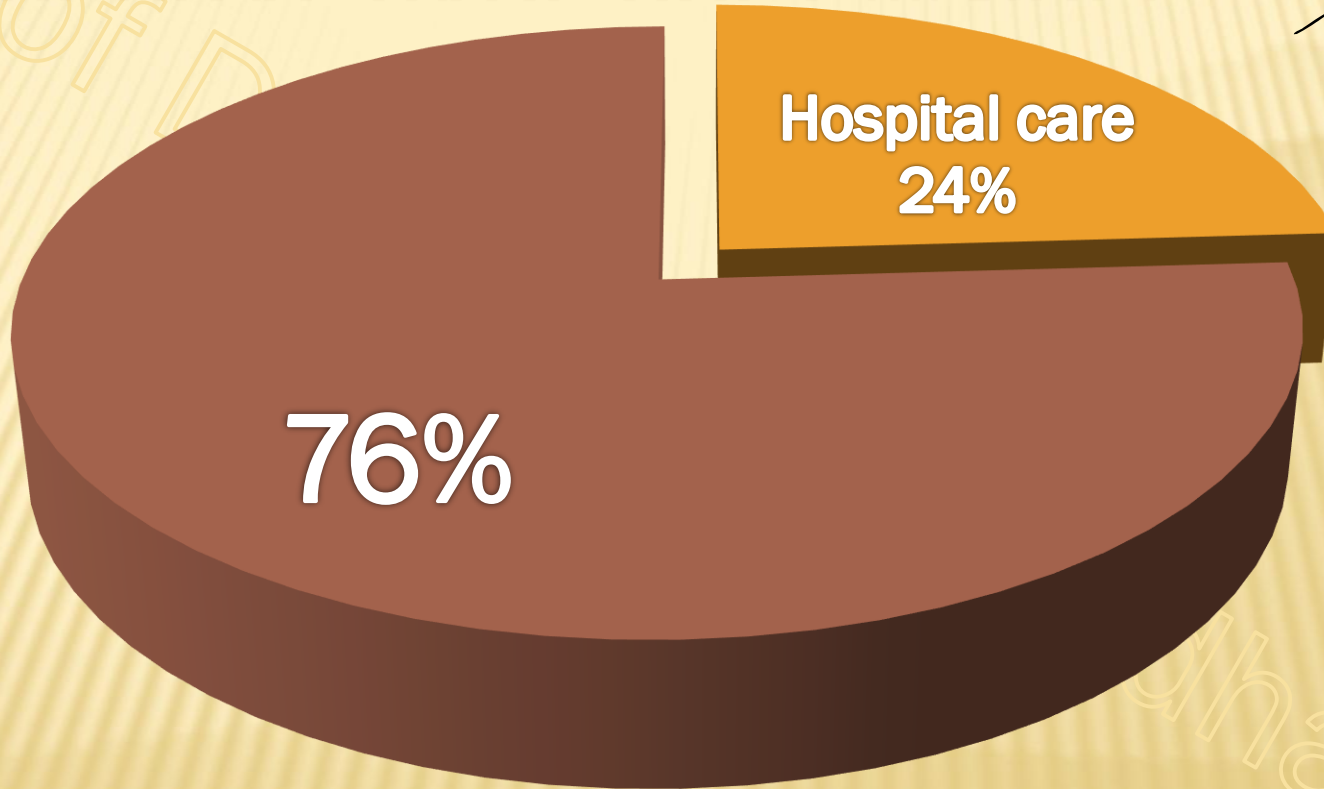


HOSPITAL SHIP / NEW YORK



CORONA PANDEMIC 2020

US HOSPITAL CARE COST (%NHE)



US government pays 60% of costs (2000)

Hospital costs

(US 2000)



Average hospital cost/day

\$ 1000

Average hospital cost/stay

\$ 6250



PRACTICAL: CLOSING US HOSPITALS

US hospitals	1980	2000	Closing
< 200 beds (2 nd care)	4100	3500	600(15%)
200 – 500 (2 nd care)	1400	1200	200(14%)
<i>≥ 500 beds</i> <i>(teaching & 3rd care)</i>	320	250	100* (31%)

Describe & Explain

PRACTICAL: BIG HOSPITALS



Big hospitals are facing serious financial pressure

- ✘ New OP technologies
- ✘ New drugs
- ✘ In spite of low returns, they may still be open to provide emergency care.
- ✘ Updating in-patient tech is costly.

HOSPITAL ALTERNATIVES



- × **PHC**
health centers, health house
- × **Nursing homes**
long care: elderly & disabled
- × **Hospices**
improves life quality in terminally ill
- × **Domiciliary services**
nursing sick at home.
- × **Ambulatory service**
less hospital need & time.

WORLD WAR I AMBULANCE



iri



MOBILE
CLINIC

MOBILE LAB FOR COVID-19 SCREENING



iri

PRACTICAL: MATERNITY WARDS



A 100-bed peripheral maternity hospital with 10 wards costing half million ID day/patient. What would be the daily hospital cost if:

- ✘ Half full hospital = ID
- ✘ Nine wards are full = ID
- ✘ 91 women are admitted = ID

ECONOMIC HOSPITAL



- **Size**: (200 - 600) differentiated beds:
Bigger hospitals are unmanageable, resource waste,
<100 beds unnecessary, uneconomical.
- **Building** shouldn't be highly structured.
- **Flexibility** to decrease unfilled beds.
- **Admission policy**: Admit patients on need, Schedule admissions, not waste stay time, no stabilized patient in intensive/emergency unit, & early discharge.
- **Effective utilization**

Prof



*Today we have more knowledge,
but less judgment*

idiri