More than 1,000 preventable deaths every day

An estimated 440,000 avoidable deaths take place in American hospitals each year due to adverse events that proper nursing care can often prevent.* These can include surgical-site infections, bloodstream infections, shock or cardiac arrest, ventilator-acquired pneumonia, gastrointestinal bleeding, deep venous thrombosis (blood clots) after surgery, patients falls, missed diagnoses, and missed, delayed or incorrect medication.

Here’s just a few of the dozens of scientific studies showing the link between low registered nurse staffing and higher rates of serious patient complications and death in our hospitals:

People who go into cardiac arrest while hospitalized are 5 percent less likely to survive for each additional patient assigned to their nurse. *Medical Care, January 2016*

ICU patients are 3.5 times more likely to die when the nurse-patient ratio is higher than 1 to 2.5. *Critical Care Medicine, August 2015*

Stroke patients are up to 35 percent more likely to die on units with fewer nurses on duty. *PLOS Medicine, August 2014*

Adding one surgical patient to a nurse’s workload increases the likelihood of patient death within 30 days of admission by 7 percent. *The Lancet, 2014*

Hospitals with better nurse staffing levels had 25 percent lower odds of being penalized for preventable readmissions. *Health Affairs, October 2013*

Death rates are 60 percent lower for patients with aortic abdominal aneurysm in hospitals with better nurse-to-patient ratios. *Health Services Research, June 2013*

Likelihood of readmission for children within 30 days of surgery is 48 percent higher when just one child is added to the staffing ratio. *BMJ Quality & Safety in Health Care, May 2013*

Patients in hospitals with higher RN staffing levels were 68 percent less likely to acquire an infection. *Medical Care, June 2007*

**“A new, evidence-based estimate of patient harms associated with hospital care,” Journal of Patient Safety, September 2013**