

# After the Hospital: Understanding the 30-Day Risk Window

For many older adults, hospitalization is not just a temporary interruption — it is a tipping point.

Research shows that adults over 70 can lose **5–10% of muscle strength in a single week of bed rest**. Even short hospital stays often involve reduced mobility, disrupted sleep, poor appetite, and medication changes. The result is something clinicians call post-hospital syndrome — a period of heightened vulnerability that can last 30 days or more after discharge.

This is why recovery is rarely automatic.



## Here is what commonly happens:

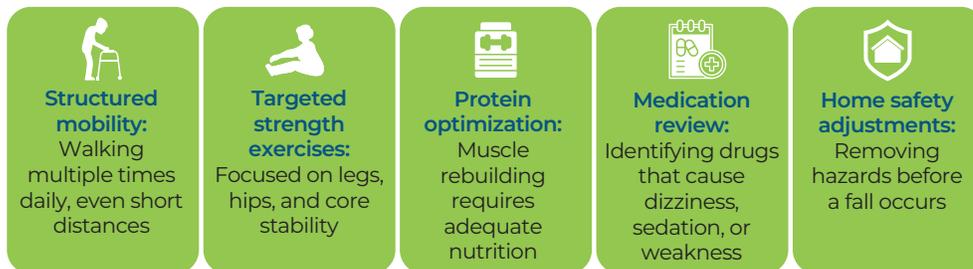


Without intervention, this cycle can accelerate functional decline.

The first 30 days after discharge carry the highest risk for complications. During this period, older adults are more susceptible not only to recurrence of the original issue, but to entirely new problems — infections, medication side effects, dehydration, or delirium.

Intentional recovery planning is critical.

## Effective rebuilding includes:



Equally important is monitoring subtle warning signs: increasing confusion, poor appetite, unsteadiness, or withdrawal. These are not “normal recovery.” They are red flags.

Older adults do not typically “bounce back” without support. Recovery must be deliberate.

With early coordination, guided exercise, nutrition oversight, and proactive monitoring, many individuals regain stability and avoid preventable readmissions.

The goal is not simply discharge. The goal is restoration.

