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## Can WE improve the Standards of Care& Proforma for Neck of Femur(NOF) Fractures in the Emergency Department(ED) during COVID

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### PURPOSE of STUDY

Approximately 65000 patients with NOF# presented to hospitals in 2021. During the Covid pandemic, there has been a backlog of cases and operations, which puts the NHS under tremendous strain as well. On average 35% of NOF# will stay in hospital for more than 4 weeks. Delays in surgery due to i.e. (anticoagulation care, volume depletion, chest infections) are associated with negative outcomes for mortality and morbidity-NICE guidelines CG 124.

### STATEMENT of METHODS

#### AIM

1) This prospective audit aims to measure the level of compliance and clinical standards in managing Neck of Femur fractures peri-operatively in ED compared to National guidelines and standards & reduce surgical delays.

2) To promote education to all healthcare staff in ED, by developing a NOF Proforma in ED department.

#### METHODS

Data was collected prospectively from 36 patients from the orthopaedic wards over a period of 1 month (November 2021-December 2021). Source of information were the ED & Orthopaedic admission notes, PACS system (Radiology) and Patient centre.

#### Inclusive criteria

All Neck of Femur# patients admitted into Orthopaedic Wards from Nov-Dec 2021. Compared standards in ED with National Guidelines on the following 7 criteria:

- 1) Routine Bloods (FBC, EP, CRP, Coag),
- 2) Group & Hold,
- 3) ECG,
- 4) CXR,

5) IV Fluids,

6) Fascial Iliac (FI) Block. (If No FI block, were they on anti-coagulation or not?)

7) Catheter

### RESULTS

From this prospective audit, we gathered demographics of 23 Female and 13 Male patients, ranging from 56-96 years old. 19 patients had Intracapsular fracture and 17 patients had Extracapsular fractures (almost even), with respective surgeries noted.

It was concluded that only 5/36pts (13.8%) had checked all 7 criteria whereas the majority 31/36pts (86.1%) had incomplete adherence which is very poor. A mean value of only 4.7/7 criteria (67.14%) were achieved. Female patients received a higher adherence compared to male patients ( $p < 0.05$ ). Patients with Extracapsular fracture (EC) showed a higher adherence than Intracapsular (IC), of 72.86% compared to 50.5% respectively.

Routine bloods showed the highest adherence of 34/36pts (94.4%), IV Fluids in the middle 23/36pts (63.80%), and FI block was the lowest adherence of just 9/36pts (25%). It was found that a total of 26/36pts (72.2%) were NOT receiving anticoagulation, but only 9/26pts (25%) received the FI block, which is a very poor result.

### LEARNING POINTS

Overall poor documentation and adherence of criteria has been met (Only 5/36 patients achieved all 7 criteria). It is pivotal to ensure consistency of care when managing NOF fractures in A&E to avoid complications.

Prospectively, we are creating a (i) NOF# proforma to ensure easy documentation and compliance in ED. We also aim to promote (ii) Healthcare education- ex. Fascia Iliac block training to ED if required.

We aim to achieve a 50% increase in adherence criteria for NOF# pathway for future re-audit cycles.

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## BIOGRAPHY

Dr Hushil Sandhu(Lead Author) is currently a foundation trainee doctor working in Altnagelvin Hospital, [Western Trust](#), Northern

Ireland. He attained his MBBS degree from the [University of Glasgow](#). He is also currently completing, Masters of Surgical Sciences(MSc) at the University of Edinburgh as well .

Dr Caoimhe McCarthy and Dr Ethan Toner are Senior Foundation Trainee and Core Orthopedic Trainee respectively, who were working at Altnagelvin Hospital during this audit period. Mr. Andrew Foster is an [Orthopedic Consultant](#) who practices at Altnagelvin Hospital and privately for many years now. Dr. Chai Hong Yeong is an Associate Professor of School of Medicine and Medical Sciences at Taylors University Campus, Malaysia and Chair to the Professional Relation Committee(AFOMP). She is very experienced statistician and assisted in data analysis for this Audit Project.

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