

FAST TRACK NECK OF FEMUR FRACTURES IRH

The aim of this guideline is to facilitate the admission of patients with a definite fractured neck of femur to the orthopaedic ward at IRH under the care of the orthopaedic surgeons. The guidance does not apply to patients where there is an element of clinical/radiological doubt.

- All appropriate patients should be assessed by a member of the medical staff.
- IV access should be established and IV analgesia given.
- Routine bloods such as FBC, U and Es, LFTs and a group and save should be requested.
- Maintenance fluids should be commenced as appropriate.
- Relevant x rays will have been requested and those patients with a definite fracture should also have a CXR requested.
- An ECG will be carried out.

Once it has been established that the patient has a fractured neck of femur the bed manager should be contacted and a bed found on the orthopaedic ward.

Once this has taken place then the patient can be admitted directly there without an orthopaedic review in the emergency department.

The orthopaedic receiving doctor should be informed of the patient's details and where they have been admitted to.

Where there are concerns that a patient who fulfils the above criteria but is not being managed accordingly then the duty Emergency Medicine and Orthopaedic consultant should be informed.