

## OOH Process for orthopaedic patients if no FY2 covering orthopaedics

ED will deal with new patient orthopaedic referrals presenting through the emergency department. They will have direct admitting rights to ortho and will deal with straightforward acute orthopaedic management in ED, ensure patients are medically fit and stable, and admit patients to the ward with a basic clerk in as they would normally do, a kardex written/fluids prescribed/bloods taken(if appropriate) and results checked(or handed over to HaN ANP to check for gross abnormality requiring intervention), so the patient is safe and sorted till the morning if clinically ok to do so.

-Ortho registrar will be called for complex ortho issues/patients and will advise/attend ED to help in these circumstances, but will not be expected to attend for straightforward cases that can be admitted directly for review in the morning.

-Once a patient has left ED and is on the orthopaedic ward, ED will not retain any responsibility for them and any medical issues will be flagged to HaN and orthopaedic issues will be dealt with by the orthopaedic registrar

-ED will not deal with GP referrals or inter-hospital transfers arriving out of hours. This will be for the orthopaedic registrar/HaN team to manage.

-Medical complications in ortho patients/referrals will be referred to medical side of HaN for management of these issues