


Rotherham
Trauma Co-ordinator and
Hip fracture patients



Rotherham Trust


- 2 adult Orthopaedic wards 66 beds total
 - 1 Trauma ward
 - 1 Elective ward (admits booked trauma patients)
 - Orthopaedic paediatric beds

 - Trauma lists daily
 - 4 days extended trauma lists
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History of Trauma Coordinator role

- # Neck of femur collaborative 2002
- The Trauma Coordinator role would be beneficial to the trust
- 1 Full time Trauma Coordinator
Cover provided for days off and annual leave

#Nof Pathway


- Improve the pathway
 - Standards of the Blue Book
 - Working groups
 - Rapid improvement events (R.I.E)
 - Best practice and NHFD
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Pathway A+E

- History of fall (mechanical)
 - Bloods
 - ECG
 - I.V fluids
 - Analgesia (F.I.B)
 - Inform ward of potential admission
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#NoF Pathway


Orthopaedic ward

- Mattress
 - PAR score (catheterised)
 - Analgesia Pain team if FIB needed
 - Nutrition
 - Falls
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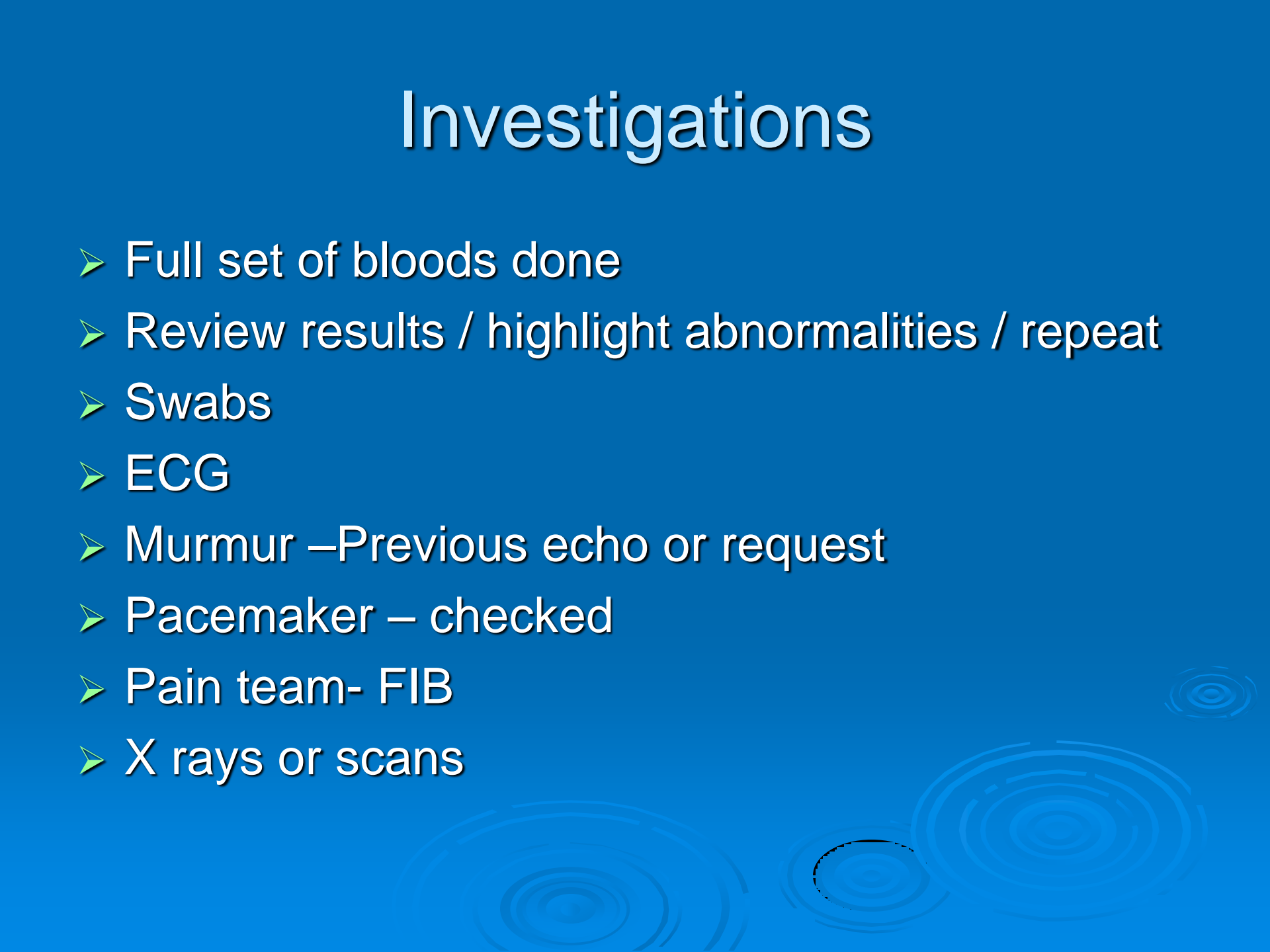
Geriatrician

- Hip # patient assessed the day after admission.
- Ortho-geriatrician visits the ward daily Mon-Fri
- On call medical team at weekend.
- Reviews new patients and patients of concern.
- Ward round weekly.
- He is wonderful!

Trauma Coordinator

- Involved from admission or trauma meeting the following morning
 - Review patient
 - Establish type of fall
 - PMH
 - Medications
 - Allergies
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Investigations

- Full set of bloods done
 - Review results / highlight abnormalities / repeat
 - Swabs
 - ECG
 - Murmur – Previous echo or request
 - Pacemaker – checked
 - Pain team- FIB
 - X rays or scans
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Liase

- Patients
- Relatives
- Ward
- Theatres (Trauma /Emergency/Elective)
- Surgeon
- Anaethetist
- X ray

- Consented
- Documentation completed / AMTS
- Medical review / Bone health assessment
- Commence data collection form for ALL hip fracture patients

- On going collection of data
 - Administrative support for data input.
 - What next : Length of stay
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