

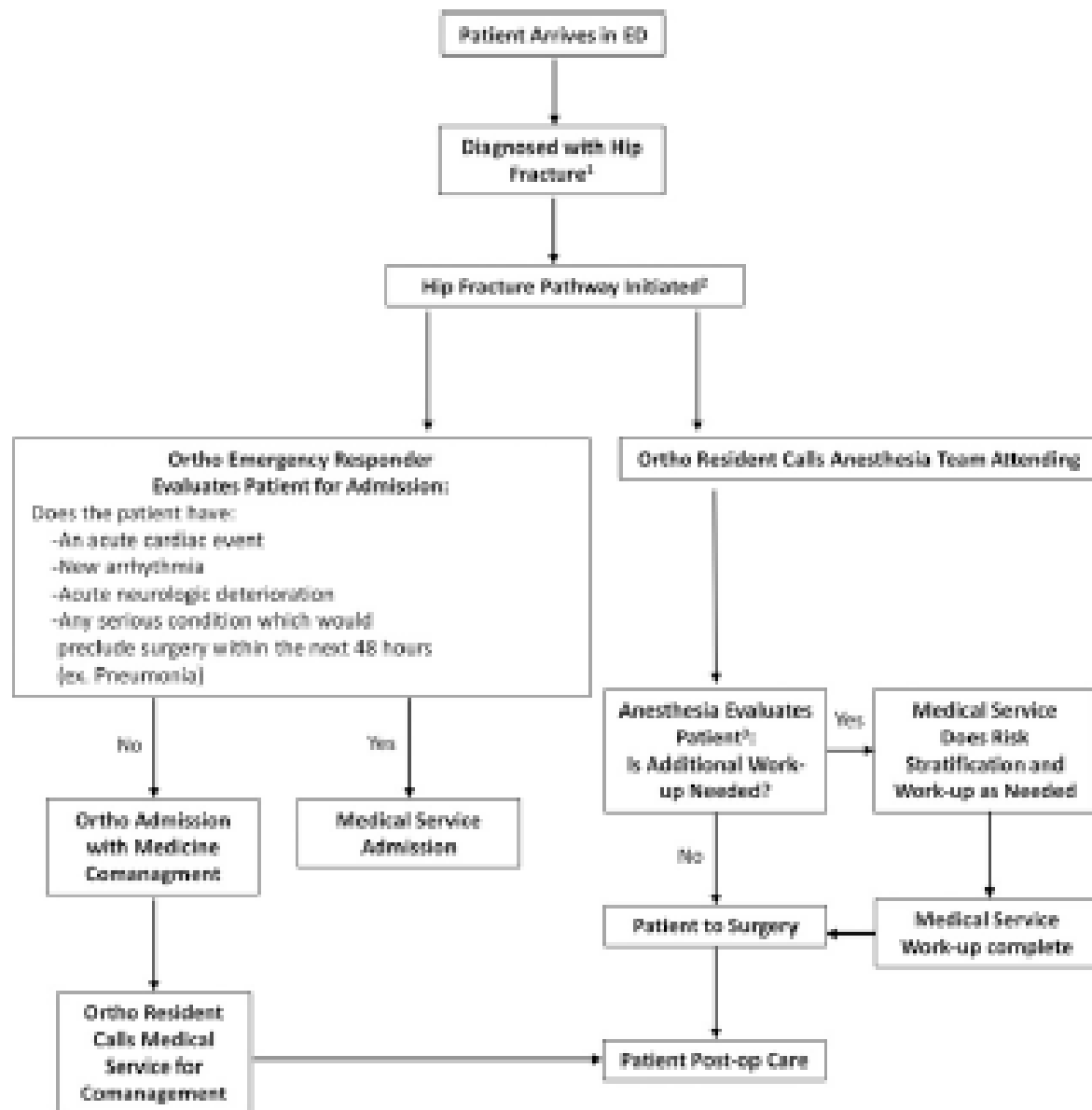
CURRENT CONCEPTS REVIEW

The Case for Comanagement and Care Pathways for Osteoporotic Patients with a Hip Fracture

Eric Swart, MD, Stephen Kates, MD, Sarah McGee, MD, and David C. Ayers, MD

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- Rapid preoperative evaluation and clearance is an essential component of hip fracture care. Evidence-based guidelines should be used to reduce unnecessary testing and minimize delays.
- Current practice guidelines recommend surgery within 24 to 48 hours of presentation, and a well-designed pathway can typically facilitate rapid surgery for all but the most medically unstable patients.
- Institutionalized initiation of osteoporosis management in patients with a hip fracture improves patient outcomes and is cost-effective but must overcome multiple barriers. Several pragmatic programs have been developed to help orthopaedic surgeons facilitate this process.
- Comanagement services need substantial work to establish, require teamwork among multiple engaged teams, and should create a culture of continuous process improvement.
- When implemented successfully, comanagement services with dedicated care pathways can improve outcomes, reduce complications, streamline care, and result in cost savings.



1. Refer to ED Order Set
2. Refer to Ortho Hip Fracture Admission Orders
3. Refer to Anesthesia Flow Sheet

Preoperative Anesthesia Screening and Triage Pathway for Patients with Hip Fracture

