

Hip Fracture Service Agreement between Departments of Orthopedic Surgery, Internal Medicine, and Family Medicine

August 2024

Purpose: To outline a care pathway for geriatric patients with hip fractures who require admission to the hospital.

Process: Geriatric hip fracture patients will be admitted to Hospital Medicine (Academic or Sound teams) or Family Medicine, with Orthopedic consultation. Initial admission History & Physical will include pre-operative risk stratification. The admitting team will use the Adult Hip Fracture order set to ensure timely referrals to rehab services and Acute Pain Service. Recommendations should always be communicated to the primary team. Professional interactions between services is expected.

Definition: Hip fractures are defined as proximal fractures. Patients need not be over 65 years old to be included in this service line. Individualized decisions are appropriate based on the patient's status, mechanism of fall, and if any active medical issues are concurrent to the hip fracture.

Pre-Operative Risk Stratification: Hospital Medicine or Family Medicine will complete an expedited history & physical that will include pre-operative risk stratification. RCRI and NSQIP are the two cardiac risk stratification tools that are recommended to be utilized for all admissions. If additional labs or studies are needed (which would impact OR scheduling), then this information should be communicated to Orthopedic Surgery via TigerText.

Consulting service (Orthopedic Surgery) responsibilities: Orthopedic Surgery will consult on all hip fracture patients admitted to Hospital Medicine or Family Medicine. For non-operative cases, Orthopedic Surgery may sign off after final activity restrictions and follow up recommendations are placed and communicated to the primary team via TigerText. For operative cases, Orthopedic Surgery should follow through at least post-operative day 3. Patients may require additional consultative services beyond POD 3 so utilize clinical judgment to best care for these patients.

Effective 8/19/2024.

Agreed to:



Eva Angeli, MD

Chief, Division of Hospital Medicine



Kali Graham, MD

Medical Director, Family Medicine Inpatient Service

Department of Family and Community Medicine

A handwritten signature in black ink, appearing to read "A. Veitch, MD", is written over a horizontal line.

Andrew Veitch, MD

Clinical Vice Chair, Department of Orthopedic Surgery