



AB111. 178. Time-to-XR in acute hip fracture care: a modifiable factor in the hunt for improved hip fracture performance targets

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Background: Admission to an acute orthopaedic ward within 4 hours of presentation is one of the six blue book standards for the management of acute hip fractures. This is consistently amongst the poorest performing of the standards with a nationwide achievement rate of 14% in Ireland in 2016. Delays in the time-to-XR of these patients may contribute to this poor performance and impact on patient care.

Methods: A retrospective review of all acute hip fractures presenting to the emergency department (ED) of University Hospital Limerick over a 3-month period was performed using local Irish hip fracture database (IHFD) and national

integrated medical imaging service (NIMIS) data. The time-to-XR interval, time-to-XR request interval and time from XR request to completion of XR were all calculated.

Results: Mean time-to-XR was 159 minutes (range, 35–808 minutes) with only 4 of the 59 cases included for analysis having had an XR within 1 hour of presentation to ED. Over half of cases (33/59) had a time-to-XR of more than 2 hours. Mean time-to-XR request (79 minutes) and mean time from XR request to completion (80 minutes) were similar. Admission to an orthopaedic ward within 4 hours occurred in only 9 of 59 cases, of which 7 had their XR performed in less than 2 hours from presentation.

Conclusions: Time-to-XR in acute hip fractures is a measurable and modifiable factor in the pursuit of improved care for hip fracture patients and warrants further attention at a local and national level.

Keywords: Hip fracture; performance; X-ray

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