

AB150. The use of the ambulatory care model for distal radius fractures in University Hospital Limerick

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Background: The Health Service Executive (HSE) National Model of Care for Trauma and Orthopaedics and the British Orthopaedic Association both recommend the use of an ambulatory care model for the management of distal radius fractures. The ambulatory care model recommends suitable patients should be discharged home following diagnosis and return as a planned day case admission for their definitive treatment to avoid unnecessary inpatient stays and bed blocking. We identified an issue as there is no current pathway to facilitate the ambulatory care model in University Hospital Limerick (UHL) and as such we conducted this audit to identify the impact of this service deficit on patients and the health system.

Methods: A retrospective audit of how many distal radius fractures were treated as per the ambulatory care model. Data was collected from theatre meridian logbook, the theatre imaging system and *Hospital In-Patient Enquiry*

(*HIPE*) database. Time of diagnosis, time of operation, inpatient duration and inpatient location were measured

Results: One hundred and seventy-six distal radius fractures were operatively managed in UHL in 2018. Only 8% had an inpatient stay less than 24 hours. The average wait time until surgery as an inpatient was 54 hours. Once admitted only 61% were managed on an orthopaedic ward which is also against current national and international guidelines. The most common reason for remaining an inpatient post operatively was for administration of post operative IV antibiotics despite local, national and international guidelines advocating the use of single dose intra operative antibiotics only.

Conclusions: The bed crisis is one which is not to be ignored and one which is not going away any time soon. Ambulatory cases should be identified and managed as such to improve both the quality of care received by patients and also to avoid unnecessary inpatient stays. The implementation of a dedicated ambulatory pathway along with ring fenced orthopaedic day beds is one method of decreasing patients waiting on trolleys and improves overall service provision

Keywords: Ambulatory care; trauma; distal radius fracture; day case; service improvement

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