

Implementation of a Complex Revision Hip Proforma at a District General Hospital in London reduces outpatient clinic appointment time.

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Introduction

Although revision total hip arthroplasty (THA) is an established procedure, some cases still remain complex. Careful attention to detail regarding the primary procedure and the techniques involved and imaging should be reviewed by the orthopaedic surgeon and in a Multi-Disiplinary Team (MDT) meeting in order to identify the failure mechanism for the primary THA.

To date, there is substantial variation across facilities in adherence to evidence-based care processes and information provided to the orthopaedic surgeon when a patient is first referred from the General Practitioner (GP) or another orthopaedic surgeon for review of a potential failed THA.

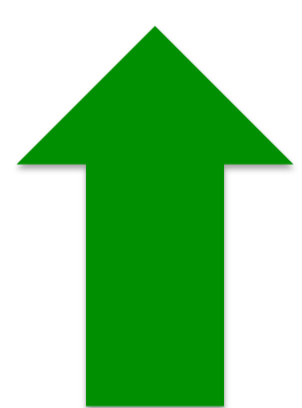
Methods

A new complex revision arthroplasty referral proforma was put into the place at our District General Hospital. The complex arthroplasty referral proforma requested all referring doctors include information on patient demographics including **primary operative details, clinical examination findings, imaging and pathology.**

We report results from two study periods; the control period (1st July 2019 –31st July 2019) and following the introduction of the Complex Arthroplasty proforma (6th January 2020 – 31st January 2020).

Results

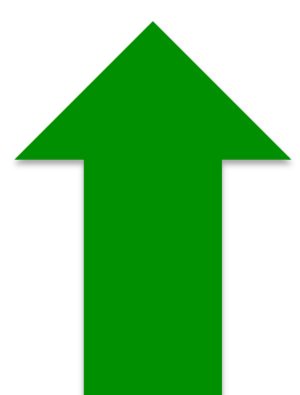
Upon implementation of the complex revision arthroplasty referral proforma, there was improvement in all three domains.



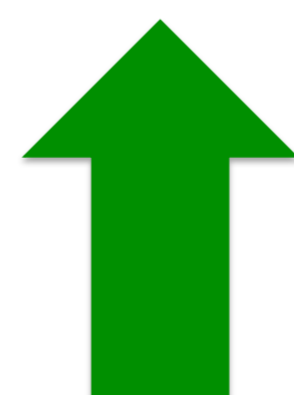
14.29% improvement in **primary operation details** being provided to the orthopaedic surgeon.



77.35% improvement in **imaging** being provided to the orthopaedic surgeon.



9.52% improvement in **clinical examination findings** being provided to the orthopaedic surgeon.



56.25% improvement in **pathology** being provided to the orthopaedic surgeon.

Implementation of this complex revision arthroplasty referral proforma reduced outpatient clinic appointments by 7 minutes.

Conclusions

To provide optimal clinical care to patients with complex needs, all information should be available to surgeons.

Awareness and implementation of our complex revision arthroplasty referral proforma could be a useful tool for surgeons when undertaking an outpatient clinic or reviewing the patient in an MDT meeting.