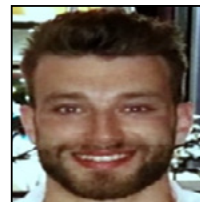


Length of stay comparison in patients requiring surgical intervention for wrist fracture: A small study from a trauma centre

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Abstract

Background: Isolated wrist fractures are one of the most common fractures in both children and adults. In 2008 the overall fracture incidence for the UK population was calculated at 3.6%(1). However, studies comparing patient length of stay (L.O.S) for fracture surgery are sparse.

Method: A small retrospective study examining 90 patients with isolated wrist fractures requiring surgical intervention between Sept 2018-Sept 2019. Exclusion criteria included multiple fractures, polytrauma and concomitant medical conditions on admission. Patient Demographics and admission dates (Winter/Non-winter and Weekday/Weekend) were compared by calculated L.O.S averages.

Results: Patients >60 (n=2.1), patients requiring ORIF (n=2.0) ASA Grade >1 (n=1.9) had the highest average L.O.S. Seasonal and weekly variation was noted, with patients having a higher L.O.S if they were admitted during winter (n=1.7) or over the weekend (n=1.6), in comparison to Non-Winter and Weekday admissions.

Discussion: Our results suggest that L.O.S for wrist fracture increase with age, consistent with other demographic studies (2). Older patients tend to have higher incidence of medical comorbidities, reduced mobility and social issues prolonging length of stay. Regardless of age or ASA grade, patients stayed longer if admitted during winter or over the weekend. A Standardised Pathway for Day case wrist surgery could be used in low risk patients to help reduce barriers to discharge and reduce L.O.S.

References

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Biography

Alexander Frost-Younger attended newcastle university and graduated in 2016 with a bachelor of medicine and surgery. I hold a GMC registration with 'full license to practice' and completed my foundation programme training in the northern deanery 2016-2018. During my medical education, I have developed an interest in emergency/acute medicine, surgery and radiology.



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