

Hip Fractures in the Elderly

-Preoperative Checklist-

Clip this checklist to the patient chart and upon completion, insert in file.

Patient's Name: _____

Medical Record Number: _____

Date of Birth: ____/____/____

(Apply patient sticker over header if available)

Date of Surgery: ____/____/____

- Should not routinely undergo preoperative traction
- Co-management, including medical optimization and risk stratification
- Do not delay for patients on anti-platelet therapy.
- Operate within 48 hours of admission when patient has been medically optimized.
- Acutely manage Warfarin reversal with vitamin K and/or, for short durations, FFP
- Goals of care discussion around the procedure and expected outcomes
- Pre-operative skin assessment (identify present areas of skin breakdown and at risk areas for decubiti)
- Pre-operative activity level and gait status has been evaluated and assessed
- Home environment has been discussed with patient and family for post-op DC planning
- Secondary survey and concomitant injuries have been assessed
- Initiation of discharge planning discussions
- Optional: Preoperative regional analgesia**

Clinician Signature: _____

Date/Time: _____