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A simple intervention to increase VTE prophylaxis compliance in neck of femur fracture patients

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Fragility and hip fractures are increasingly more common due to an ageing population. They represent a significant healthcare burden due to the high morbidity and mortality associated with each fracture. VTE is one of the dangerous and significant complications, thus prevention is key. Thromboprophylaxis has shown to significantly reduce the incidence of fatal VTE complications. We assessed compliance with VTE prophylaxis in post-operative neck of femur fracture patients. NICE guidance recommends all patients with hip fractures should have 28-35 days of thromboprophylaxis starting 6-12 hours after surgery provided there are no contraindications.

We analysed 95 patient records between April and June 2018 and looked at 82 records following a strict inclusion/exclusion criteria. We found 77/82 patients were covered with anticoagulation at discharge. We set up a simple intervention with the new cycle of junior doctors by creating posters in key prescribing areas of wards to remind them of the NICE guidance. We repeated the methodology between August and October 2018 and found 64/64 patients were covered with anticoagulation at discharge. Our findings show a simple intervention can radically improve compliance to national guidance. This is in keeping with a previous similar study conducted in 2014 where compliance to thromboprophylaxis prescribing following neck of femur fractures improved following a simple intervention of small labels on prescribing computers.