AB153. ED presentations within 30 days of discharge from trauma and elective orthopaedic surgery: an exploration of findings to develop emergency department avoidance measures

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Background: Readmissions within 30 days following discharge is used as a quality metric for health care services. Patients also re-present at their local emergency department (ED) with concerns following discharge that don’t require readmission. With acute hospitals in Ireland, and Limerick in particular working at full capacity, speciality services need to examine why patients re-present and how to create alternative pathways for patients.

Methods: A six month retrospective analysis of all patients re-presenting to our ED within 30 days of discharge from the orthopaedic service was undertaken. All patients would have experienced an orthopaedic in-patient in either the trauma or elective setting between January and June 2019.

Results: One hundred and ten patients presented within the time frame 49 were ultimately admitted and 61 presented to ED and were not admitted. Thirty-one of these presented with orthopaedic issues, such as pain or cast/ bracing issues. Fifteen of patients presented with medical issues, the majority of these came from our elective orthopaedic hospital. This hospital is covered exclusively by orthopaedic non-consultant hospital doctors (NCHDs) and most of these were for medical reviews.

Conclusions: Presentations could have been avoided either by simple interventions, such as a medical review prior to discharge or by having access to orthopaedic services via a dedicated telephone helpline service and/or access to an acute fracture Unit with the capacity to offer unscheduled follow up for patients who require it post discharge. This would also offer continuity of care as they would be managed by the most appropriate member of their Consultants team and free up key ED staff.

Keywords: Orthopaedics; complications; emergency department; service enhancement

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