

CLINICAL AUDIT DISTAL RADIUS FRACTURES MANAGEMENT AND DOCUMENTING THE RIGHT WAY!

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INTRODUCTION:

Distal radius fractures are common entity but their management is still to be standardized and has lots of different management protocols.¹ DRFs are second most frequent and they consume major resources so their management has to be according to proper guidelines.²

METHODS:

Study Type: Closed loop audit.

Duration: Feb-April 2021.

Setting: Orthopedics Department Benazir Bhutto Hospital, Rawalpindi, Pakistan.

Size: 100 cases.

Data Collection: Proforma based.

Intervention: PDSA cycle.

Data analysis: Fischer Exact Test.

After observing practices deficiencies were highlighted in light of parameters. **PDSA** cycle was introduced which included proformas, brochures, presentations, panaflexes and re-evaluation was done by collecting data from the patient notes and improvements were seen.

RESULTS:

Data was compared to 13 **BOAST guidelines** and documentation was observed. Few are;

| IMPROVEMENT DOCUMENTATION | | | IN |
|---------------------------|----------------------|----------------------|---------|
| BOAST Parameters | 1 st Loop | 2 nd Loop | p-value |
| Mechanism of injury | 14% | 90% | <0.00 |
| Clinical findings | 92% | 98% | <0.36 |
| Counselling about return | 10% | 80% | <0.00 |

to

work/recovery

Wrist position 38%

neutral

0.003

Manipulation 72%

in OT

<0.00

DISCUSSION:

DRFs are frequent in ER setting so to improve their documentation and management in according to set standards we carried it out.¹ Due to their high incidence major reserves are spent on them, so there should be some proper criteria to deal with them effectively and efficiently.³

CONCLUSION:

Although these parameters were checked but documentation was deficient due to high patient turnover which leads to issues during future referencing. Significant improvements in documentation of parameters according to protocols was observed leading to better patient care, counseling and management. Study will also serve as an initiative to carry out more audits for better compliance to standards.

REFERENCES:

1. The current evidence-based management of distal radial fractures: UK perspectives
2. Knight R, Elliott L, Brewster M, Spiteri M, Power D. Distal radius fractures—A volar plate is not just a volar plate. Trauma. 2018 Jul;20(3):203-7.