

# Devising a novel Triage system to identify high risk patients undergoing joint replacement surgery

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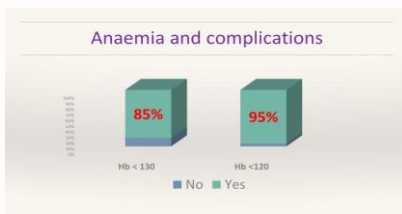
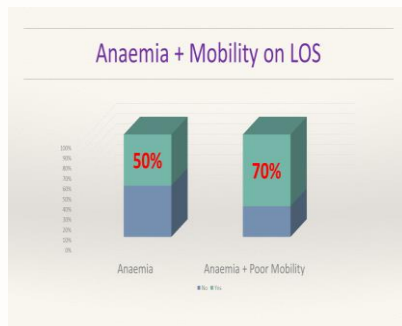
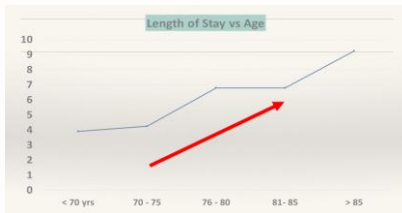
## Introduction

- National Joint Registry data suggests that Sandwell & West Birmingham Hospitals NHS Trust (SWBH) patients are more complex with increased comorbidities and yet have good outcomes for hip surgery.
- The Getting It Right First Time (GIRFT) national review in 2015 identified key areas for units to focus on which included length of stay and prolonged recovery. Length of stay (LOS) had huge variation among patients adding to increased burden due to increased resource use and poorer patient experience and outcomes

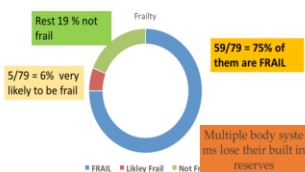
## Methods

- We did a detailed analysis of 588 patients undergoing elective joint replacement surgeries over a period of 1 year at our trust.
- We looked for correlation between premorbid conditions and postoperative outcomes such as complications and length of stay.

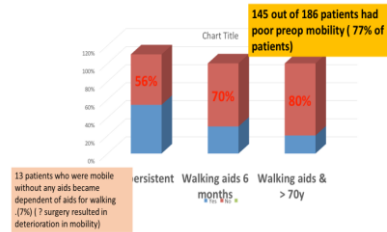
## Results and Findings



Clinical Frailty ( 79 patients had LOS > 7 days)



## Outcomes 6 months; Mobility & Analgesia



## Strongest Predictors of Complications & Increased LOS

- Anaemia
- Poor Mobility
- Frailty

Expect to have POOR outcomes

## Discussion

- From this data we have devised a triage system to identify patients that may benefit from pre-optimisation prior to elective surgery. This system is based upon a surgical triage system for consultant led anaesthetic clinic.
- This is a simplified tool which allows surgeons and other health care providers to identify the cohort of patients who are likely to have poor outcomes early in the journey and refer them to the preassessment clinic where realistic expectations are set for the patients and opportunities are provided for pre-optimisation and prehabilitation prior to surgery.

## Action Plan: Simplified referral criteria to Preassessment Clinic

### Elective Joint Replacement referral criteria

Please find referral criteria for Preassessment Clinic. These were derived from analysis and findings from the local data over one year.

- Clinical Discretion (If surgeon believes the patient is high risk for any reason / complex medical issues)
- All patients > 80 years old
- All patients > 70 years and taking > 4 medications (or) using a walking aid
- All patients > 65 years and taking > 4 medications and using a walking aid.

Referral criteria for pre assessment clinic				
Age > 80			Refer to Preassessment Clinic	
Age > 70	> 4 medications	OR		Using walking aid
Age > 65	> 4 medications	AND		Using walking aid
Clinical Discretion				

## Acknowledgement

We would sincerely like to the department of anaesthesia at SWBH.