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A survey of patients referral between orthopaedic surgeons and physiatrists after hip fractures

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Objective

To investigate awareness about patients referral for rehabilitation and identify current barriers between orthopaedic surgeons and physiatrists after hip fracture surgery.

Methods

A comprehensive survey was conducted for 16 orthopaedic surgeons and 24 physiatrists nationwide. The questions were about the necessity of rehabilitation and transfer to the rehabilitation department, and any conflict or difficulty during the consultation or transfer in inpatients as well as outpatients clinic.

Results

Among orthopaedic surgeons, 50% of doctors acknowledged the necessity of rehabilitation, but 37.5% had negative point of view for collaboration with physiatrists. Main causes of negative opinions were lack of discussion with surgeons about specific rehabilitation plan (60% of responses). The cause of difficulty with consultation was mainly due to lack of specialized rehabilitation program suitable for hip-fractured patients. Among physiatrists, most doctors admitted the necessity of rehabilitation and tried to adopt surgeons' opinions, but had difficulty with rehabilitation or transfer to the rehabilitation department. Main causes of this difficulty were lack of communication with surgeons, paucity of information on the postoperative status, differences in treatment plan, and short length of hospital stay. From these survey results, we established the practical referral information sheet for interdisciplinary collaboration between orthopaedic surgeons and physiatrists.

Conclusion

Standardized rehabilitation after fragility fracture is the initial step of integrated orthogeriatric care system and a core of fracture liaison service. Sufficient and successful rehabilitation may be achieved by the consensus and cooperation between orthopaedic surgeons and rehabilitation specialists.

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