

Hip fracture care clinical care standard indicators: 8a- Re-operation of hip fracture patients within 30-day follow-up

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Hip fracture care clinical care standard indicators: 8a-Re-operation of hip fracture patients within 30-day follow-up

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Indicator 8a-Re-operation of hip fracture patients within 30 day follow-up
METEOR identifier:	628360
Registration status:	Health! , Standard 12/09/2016
Description:	Re-operation of hip fracture patients within 30-day follow-up.
Rationale:	Hip fracture re-operations substantially increase the burden of hip fractures on society and the individual, and are potentially preventable (Luthje 2014).
Indicator set:	Clinical care standard indicators: hip fracture Australian Commission on Safety and Quality in Health Care , Superseded 18/06/2018 Health! , Standard 12/09/2016
Outcome area:	Indicators of effectiveness Health! , Standard 12/09/2016

Collection and usage attributes

Computation description: The numerator includes patients with a hip fracture requiring re-operation within 30 days following admission for the acute hip fracture episode of care. Include patients with any of the following procedures:

- reduction of dislocated prosthesis
- washout or debridement
- implant removal
- revision of internal fixation
- conversion to hemiarthroplasty
- conversion to total hip replacement
- girdlestone/excision arthroplasty
- periprosthetic fracture.

Include only patients who were followed up at 30 days. The 30 days should be calculated from the [Episode of admitted patient care—admission date, DDMMYYYY](#), from the initial episode for the definitive treatment of the hip fracture.

Note that re-operation may be to the hospital at which the patient had surgery for their hip fracture, or to another hospital. This relies on linked data and/or the use of a unique identifier preferably across a geographic region at which patients are likely to re-present (for example, a [Local Hospital Network](#)).

Both the numerator and the denominator exclude patients who died during the hip fracture episode, that is, where [Episode of admitted patient care—separation mode, code N = 8 Died](#)) or were deceased at the 30-day follow-up.

Computation:	$(\text{Numerator} \div \text{denominator}) \times 100$
Numerator:	Number of patients with a hip fracture requiring re-operation within 30 days from admission for the acute hip fracture episode of care.
Denominator:	Number of patients admitted to hospital with a hip fracture in a period that is at least 30 days prior to the period for which re-operations are being counted.
Comments:	For hospitals collecting the Australian and New Zealand Hip Fracture Registry (ANZHFR) data set (ANZHFR Steering Group 2013), the variable <i>Re-operation within 30-day follow-up</i> can be used for the numerator of this indicator.

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Service event
Format:	N[NN]

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Reference documents: Luthje P, Helkamaa T, Nurmi-Luthje I, Kaukonen JP & Kataja M 2014. An 8-year follow-up study of 221 consecutive hip fracture patients in Finland: analysis of reoperations and their direct medical costs. *Scandinavian journal of surgery: SJS: Official Organ for the Finnish Surgical Society and the Scandinavian Surgical Society* 103(1):46-53.

ANZHFR (Australian and New Zealand Hip Fracture Registry) Steering Group 2013. Data dictionary. Sydney: ANZHFR. Viewed 5 May 2016, <http://www.anzhr.org/images/resources/Data%20Dictionary%20v8%20Dec%202013.pdf>.