

# International Conference on Orthopedics and Musculoskeletal Disorders

November 13-14, 2025 | Lisbon, Portugal



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## Standardizing Clerking Practice: An Orthopaedic Audit of Hip Fracture Proforma Compliance

### Background

With an aging population increasing demand on healthcare, standardization is crucial to ensure equitable and safe care. Clerking proformas in hip fracture management facilitate comprehensive assessment, reducing clinical errors, and optimizing outcomes (1). However, poor compliance undermines these benefits and risks patient safety. (2) This closed-loop audit evaluated adherence to a standardized hip fracture clerking proforma against national guidelines.

### Methods

We reviewed forty consecutive hip fracture clerking proformas over three months, assessing completion of twenty-two mandatory sections. Incomplete or incorrectly completed sections were marked as non-compliant. Following identified deficiencies, we delivered a dedicated teaching session during junior doctor induction and displayed educational posters across the department.

A month following the intervention, we re-audited the data. Forty further proformas over another three-month period using the same criteria.

### Results

Initial analysis revealed documentation gaps: fracture lateralization recorded in only 82.5% and orthogeriatric reviews in only 2.5% of cases. Post-intervention there was a mean increase in completion rate of 17.5% (range 7.5–60%). On analysing the data, we used a Wilcoxon signed rank test to assess the significance of the non-parametric data. Which demonstrated a  $p < 0.05$  meaning post-intervention scores were significantly higher than pre-training, demonstrating a meaningful improvement in completion.

### Conclusions

Clerking proformas are vital for standardized hip fracture care but depend on correct use. Targeted education at induction significantly enhanced compliance across multiple domains. Embedding proforma training in induction programmes is a cost-effective strategy to sustain high-quality care and should be adopted as best practice in orthopaedic departments.

### References

- (1) Jij Chow, Camille Yvon, Tim Stanger - How complete are our clerkings? A project aimed at improving the quality of medical records by using a standardised proforma.: BMJ Quality Improvement Reports 2014;2:u203012.w1388.
- Mark R. Chassin, Elise C. Becher. The Wrong Patient. Ann Intern Med. 2002;136:826-833. [Epub 4 June 2002].

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## **Biography**

I am a resident doctor at the Royal Shrewsbury and Robert Jones and Agnes Hunt Hospitals. During my orthopaedics rotation, I collaborated on research under Mr Ford and Professor Cool, evaluating hip fracture pathways. As Lead Medical Student Educator, I designed interactive musculoskeletal modules to boost learner engagement and clinical reasoning. I'm now preparing to publish data on specialty-specific training programs in orthopaedic centres. By combining frontline clinical practice, rigorous research mentorship, and innovative curriculum development, I aim to share strategies that enhance both patient outcomes and surgical education.