## AMERICAN OSTEOPATHIC BOARD OF ORTHOPEDIC SURGERY

## Hip Fracture Consecutive Case Surgical Record Screening Form

Candidate	D.O.	Medical									
Exam Year		Record >									
Screened By		Number									
Reviewed By	D.O.										
Age											
Sex											
Date of Surgery											
Length of Surgery (in minutes)											
Fracture Pattern											
S=Subcapital N=Femoral Neck I=Intertrochanteric ST=Subtrochanteric											
Surgical Procedure											
E=Endoprosthesis I=Internal Fixation											
1-Preoperative History & Physical and/or Note by Surgeon			100%								
2–If Present, Pathology/Radiology Report Consistent with Abnormality			100%								
3-Documentation of Appropriate Informed Consent			100%								
4-Adequate Postoperative Discharge Instruction Documentation			100%								
5–No Local nor Remote nor Systemic Infection			100%								
6–Thromboembolic Prophylaxis or Discussion of its Contraindication			100%								
7–Perioperative Antibiotic Prophylaxis			100%								
8–Physical Therapy Instruction			100%								
9–Satisfactory Postoperative X-Ray			100%								
10–Hospital Length of Stay Great than Seven Days			0%								
11–Mortality			0%								
12-Prior or Subsequent Surgery Associated with this Event			0%								
11–Mortality 12–Prior or Subsequent Surgery Associated with this Event 13–Postoperative Neurovascular Compromise			0%								
14–Postoperative Medical Complications			0%								
15–Wound Infection or Healing Difficulty			0%			T				T	

DATA RETRIEVAL CODES 1=Met Elements 2=Variation