

AMERICAN OSTEOPATHIC BOARD OF ORTHOPEDIC SURGERY

Operative Ankle 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) _____ | | | | | | | | | | | | | | | | | | | |
| 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% | | | | | | | | | | | | | | | | | | |
| 13-Postoperative Neurovascular Compromise | 0% | | | | | | | | | | | | | | | | | | |
| 14-Postoperative Medical Complications | 0% | | | | | | | | | | | | | | | | | | |
| 15-Wound Infection or Healing Difficulty | 0% | | | | | | | | | | | | | | | | | | |

DATA RETRIEVAL CODES 1=Met Elements 2=Variation