



FRACTURED HIP CLINICAL PATHWAY

GREY BRUCE HEALTH SERVICES

- Lion's Head
 Markdale
 Meaford
 Owen Sound
 Southampton
 Tobermory
 Wiarton

PATIENT ID _____

COMORBID CONDITIONS: _____

Diabetes

PROCESS	PHASE 1 (0-3 Days) WAITING FOR SURGERY	DATE	DATE	DATE
		<i>July 10 02</i>		
ASSESSMENT (OBSERVATIONS/ MEASUREMENTS/ ELIMINATION)	VITAL SIGNS WITH O ₂ SATS Q4H UNTIL STABLE THEN ACCORDING TO UNIT PROTOCOL	<i>D</i>		
	CHEST ASSESSMENT	<i>D</i>		
	CIRCULATION / SENSATION / MOTION	<i>D</i>		
	ASSESS NEED FOR DVT PROPHYLAXIS ACCORDING TO RISK FACTORS	<i>D</i>		
	MONITOR INTAKE / OUTPUT	<i>D</i>		
	MONITOR BOWEL MOVEMENT	<i>D</i>		
	MENTAL STATUS—ORIENTED TO TIME/PLACE/PERSON	<i>D</i>		
	NURSING HISTORY INCLUDING BRADEN RISK ASSESSMENT TOOL	<i>D</i>		
	OTHER:			
CONSULTS	INTERNIST AS ORDERED	<i>N/A</i>		
	ANAESTHETIST AS ORDERED	<i>N/A</i>		
	CCAC IF BLAYLOCK DISCHARGE PLANNING RISK ASSESSMENT SCREEN INDICATES	<i>N/A</i>		
DIAGNOSTICS/ LABORATORY	HIP X-RAY	<i>D</i>		
	CHEST X-RAY	<i>D</i>		
	ECG	<i>D</i>		
	COMPLETE ANY PRE-OP BLOOD WORK OR TESTS ORDERED (I.E. FBS)	<i>D</i>		
	OTHER:	<i>/</i>		
MEDICATIONS	SEE MAR SHEET	<i>D</i>		
	OTHER:	<i>/</i>		
	OTHER:	<i>/</i>		