



An Audit of Patients with Suspected Scaphoid Fractures in the **Emergency Department of Sligo University Hospital**

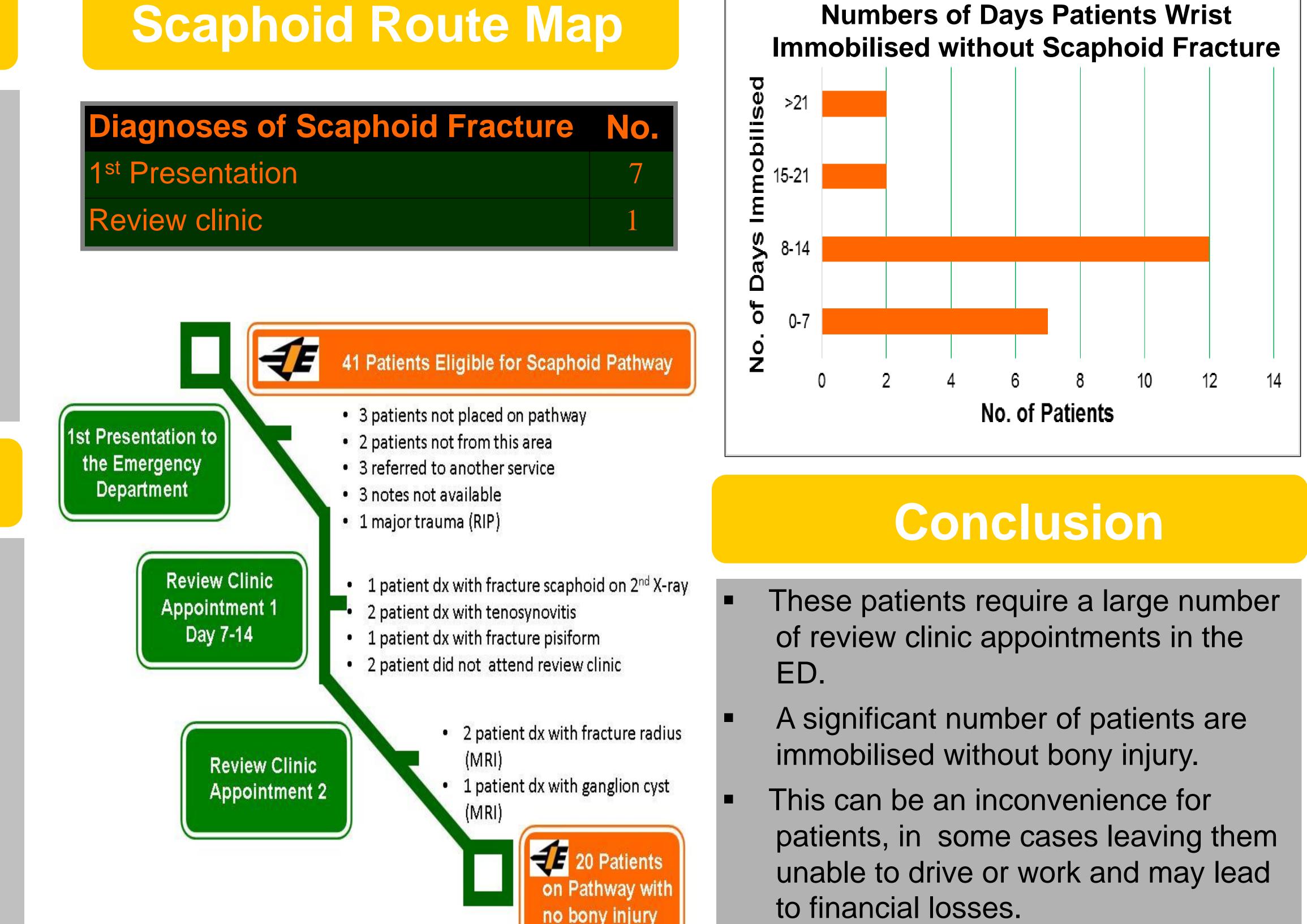
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Introduction

A patient referred for a scaphoid x-ray is akin to a passenger going on a train journey. Once started it's a very specific pathway with only certain points down the line where patients can disembark. This poster highlights the journey of patients referred for scaphoid x-rays in Sligo Emergency Department from June to August, 2015.

Diagnoses of Scaphoid Fracture	No.
1 st Presentation	7
Review clinic	1



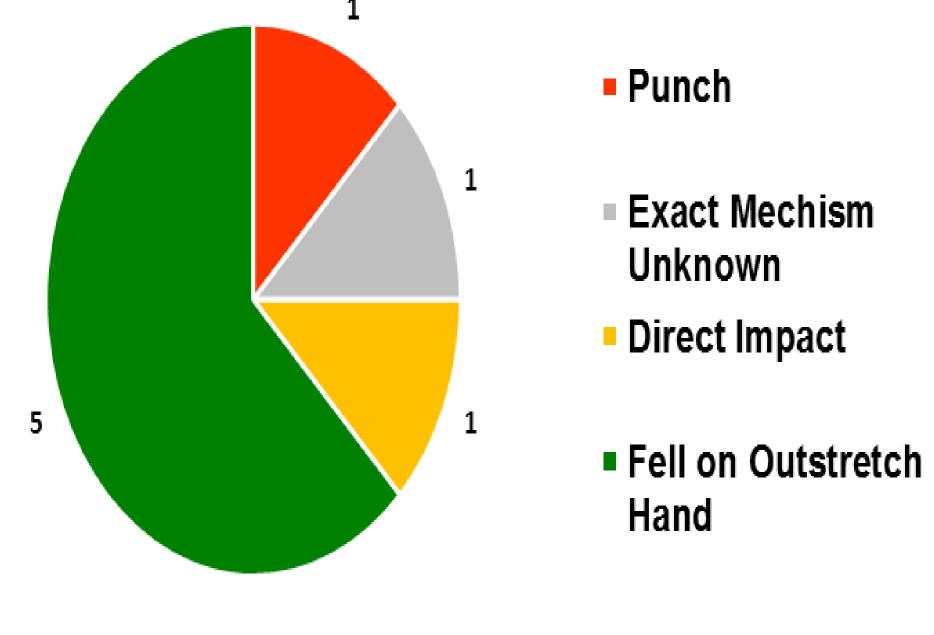
Aims & Objectives

- To quantify the time patients, without a fracture, spent immobilised.
- To identify the number of review clinic appointments utilised for each patient.
- To document mechanism of injury of patients who had a fracture of the scaphoid bone.
- To identify number of MRI scans completed.
- To identify areas of improvement in our management of patients with suspected scaphoid fractures.

Methods

- Audit of 60 patients with suspected scaphoid fractures presenting to the ED, identified using the radiology PAC system.
- Data was collected retrospectively from patients ED notes.

Mechanism of Injury of Scaphoid Fracture



Punch



Number

Recommendations

- Introduction of a Clinical Scaphoid Score to help improve identification of patients with suspected scaphoid fractures.
- A re-audit to evaluate the effectiveness of the clinical scaphoid score.

Actions

- This audit was presented to staff within Sligo Emergency Department.
- Educational sessions have taken place.

Fracture Scaphoid	0
Fracture Radius	2
Ganglion Cyst	1
No Abnormality	11
Total MRI of Scaphoid	14

Diagnoses on MRI

No. of Reviews

30

25

ents 20

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Clinical information posters on the Clinical Scaphoid Score have been placed in clinical areas. References Bergh, T.H., Lindau, T., Soosaipillai, L.A.S., Bernardshaw, V., Behzadi, M., Steen, K. & Brudvik, C. (2015) Clinical scaphoid score (CSS) to identify scaphoid fracture with MRI in patients with normal x-ray after a wrist trauma. Emergency Medical Journal, 00:1–6,

doi:10.1136/emermed-2012-202219.