The Synthes Geriatric Fracture Program (GFP) is a quality improvement program designed with one objective: Getting geriatric patients back to their previous level of function. To meet this objective, we have a simple solution: Establish a standard, streamlined approach to caring for a patient from the time of admission through discharge. The GFP program promotes a co-managed approach to caring for geriatric fracture patients through a multi-disciplinary team including emergency medicine, case management, anesthesia, nursing, perioperative services, physical therapy, and more, tailored to each hospital’s resources.

The Situation Today
With the rising aging population in the United States, the likelihood of a fracture continues to increase and the demands on hospitals will continue to increase. Approximately 1.6 million hip fractures occur worldwide each year; by 2050, this number could reach between 4.5 million and 6.3 million.

Today, hip fractures cause the most morbidity with reported mortality rates up to 20–24% in the first year after a hip fracture, and greater risk of dying may persist for at least 5 years afterwards. Loss of function and independence among survivors is profound, with 33% totally dependent or in a nursing home in the year following a hip fracture. Hospitals also face a different reality: they can no longer be reimbursed for preventable hospital-acquired conditions such as infections and falls. The pressure is on to effectively deploy all reasonable quality improvement techniques available. Future reimbursement reform will reward providers for quality and outcomes.

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“Poorly executed hip fracture care negatively impacts health care cost. Since implementing the GFP we have saved over $1,000 cost per case, reduced 30 day all cause readmission rates, managed delirium and earned a 5-star rating.”

Melody Dillman, RN, MSN
Lancaster General Health’s Orthopaedic Program Coordinator

The Future of Patient Care. With Synthes GFP, patients and hospitals can expect better outcomes. Patients can expect that their needs are met. Hospitals can expect an evidence-based program that meets their demands. Through standardized processes and procedures, emerges the future of patient care.

Our standardized approach reduces variations in care, reduces anxiety and stress for both patient and staff and improves the patient experience. Clearly defined roles and responsibilities are the benchmarks of this program, ensuring superior performance and measurable clinical results.

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The goals of Synthes GFP include:
- **Improved Patient Satisfaction** with clear, consistent communication to the family and patient
- **Reduced Cost of Care** resulting from shorter length of stay, increased efficiencies and avoidance of complications
- **Improved Care Transitions** involving emergency medical services, skilled nursing facilities and rehabilitation facilities through education of our program to prevent avoidable readmissions
- **Improved Patient Outcomes** resulting from reduced length of stay, improved preoperative patient optimization, prudent ancillary consults, standardized treatment of pain and avoidance of hospital acquired conditions
- **Standardized Care** reduces variation in admission, testing, optimization and pain management
- **Avoidance of Adverse Events** through increased communication, coordination of care and education on inappropriate medications
- **Enhanced Outcomes Tracking** using measures such as length of stay, infection, time to surgery, mortality, complication and readmission rates all of which are compared against a performance benchmark and national averages

### The phases of Synthes GFP

- **ACCESS**
- **PLAN**
- **EVALUATE**
- **IMPLEMENT**

### 20% decrease in readmissions

<table>
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<tr>
<th>Pre-implementation</th>
<th>1-year post-implementation</th>
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<tbody>
<tr>
<td>Readmissions</td>
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<tr>
<td>15%</td>
<td>10%</td>
</tr>
<tr>
<td>10%</td>
<td>5%</td>
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<tr>
<td>5%</td>
<td>0%</td>
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### Mortality reduced by over 50%

<table>
<thead>
<tr>
<th>Pre-implementation</th>
<th>1-year post-implementation</th>
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<tbody>
<tr>
<td>Hip Fracture</td>
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</tr>
<tr>
<td>Mortality Rate*</td>
<td>3%</td>
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<tr>
<td>2%</td>
<td>1%</td>
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<tr>
<td>1%</td>
<td>0%</td>
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</table>

### Average length of stay decreased by a full day

<table>
<thead>
<tr>
<th>Pre-implementation</th>
<th>1-year post-implementation</th>
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<tbody>
<tr>
<td>Average Length of Stay</td>
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</tr>
<tr>
<td>Fragility Hip Fractures*</td>
<td>8</td>
</tr>
<tr>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Sample data gathered from model hospital

### Learn More

The Synthes Geriatric Fracture Program is applicable to any hospital involved in treatment of geriatric and elderly fracture patients. The program can be adapted to any care setting and fully scalable. To learn more about program benefits, contact GeriatricFractureProgramUSA@Synthes.com.