

Routine 6-weeks outpatient visit in patients treated surgically for upper extremity fractures: Is it truly necessary?

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Introduction

Assessing the utility of standard six-week outpatient follow-up post-surgery for common upper extremity fractures (clavícula, proximal humerus, humerus shaft, olecranon, radial shaft, distal radius)

Method

This retrospective study included surgically treated upper extremity fracture patients at a trauma center. We assessed two outcomes: 1) Incidence of abnormalities detected in the 6-week outpatient X-ray compared to intra-operative X-ray. 2) Incidence of deviations from the local postoperative treatment and follow-up protocol based on the clinical/radiological findings during the 6-week outpatient visit.

Results

A total of 267 patients were included. Abnormalities on X-ray at 6-weeks were found in only 10 (3.7%) patients of which only 4 (1.5%) had clinical implications (in three patients extra imaging was required and in one patient it was necessary to deviate from standard weightbearing/ROM limitation regime). The clinical/radiological findings during the 6-weeks outpatient visit led to a deviation from standard in only 8 (3.0%) patients.

Conclusion

The routine 6-weeks outpatient visit and X-ray, after surgery for common upper extremity fractures, rarely has clinical consequences. It should be questioned whether these routine visits are necessary and whether a more selective approach should be considered.