

## Distal Radius Fracture in Adults Questionnaire

1. Which hospital do you work at?

Darlington Memorial
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2. Does your hospital accept or manage trauma patients? 

Yes	✓	No	
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3. Is your hospital a designated major trauma centre? 

Yes		No	✓
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4. How many adults with closed distal radius fracture does your hospital manage in a month?

20 or so
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5. Does your department have a written guideline for the investigation and management of potential closed distal radius fracture following trauma?

Yes	
No	✓
Verbal Only	

6. If yes, where is your guideline taken from? (For example, BOAST, locally derived guideline etc.)

N/A
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7. For patients requiring a closed manipulation of their fracture that present *during the day*, where is this manipulation carried out?

Plaster room	
In the emergency department (excluding resuscitation area)	✓
Resuscitation bay in the emergency department	
Operating Theatre	
Other (please specify)	

Please specify:
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8. Which specialty is responsible for the initial manipulation of the fracture?

Emergency Medicine	✓	Trauma and Orthopaedics		Other (please specify)	
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9. What form of analgesia is most commonly used for the manipulation procedure?

Regional nerve blockade	
Regional intravenous anaesthesia (Bier's block)	
Local haematoma block	✓
Procedural sedation and analgesia (please specify)	
General anaesthetic	
No specific method of analgesia specified	

Please specify:
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10. If a Bier's block is performed, which specialty performs the Bier's block?

Emergency Medicine		Anaesthetics	
Trauma and Orthopaedics		Other (please specify)	

Please specify: N/A

11. What grade of doctor is most commonly responsible for performing the Bier's Block?

N/A

12. For patients requiring a closed manipulation of their fracture that present *overnight*, where is this manipulation carried out?

Plaster room	
In the emergency department (excluding resuscitation area)	✓
Resuscitation bay in the emergency department	
Operating Theatre	
Other (please specify)	
Manipulation not carried out overnight	

Please specify:

13. Overnight, which specialty is responsible for the initial manipulation of the fracture?

Emergency Medicine	✓	Manipulation not carried out overnight	
Trauma and Orthopaedics		Other (please specify)	

Please specify:

14. Overnight, what form of analgesia is used for the manipulation procedure?

Regional nerve blockade	
Regional intravenous anaesthesia (Bier's block)	
Local haematoma block	✓
Procedural sedation (please specify)	
General anaesthetic	
No specific method of analgesia specified	
Manipulation not carried out overnight	

Please specify:

15. If patients do not receive manipulation out-of-hours where and when do they return?

<i>Where</i>		<i>When</i>	
Emergency Department		Following morning	
Fracture clinic		Next working day (i.e. on Monday if seen over the weekend)	
Plaster room		Next available routine fracture clinic	
		Next trauma clinic, held every day	✓

16. Following presentation to hospital with a distal radius fracture, how soon after the injury are patients seen in the Fracture Clinic?

Within 24 hours	<input checked="" type="checkbox"/>
Within 48 hours	<input type="checkbox"/>
Within 72 hours	<input type="checkbox"/>
More than 3 days later	<input type="checkbox"/>