

Q2. Patient ID number □□□□/□□/□□ -□□□□
Year, month, day and 4 digit security number

Q4. Side of fracture □
1= left side 2 = right side.

Q7. Sex □ 1= Male 2= Female.

Q14. Type of Fracture □ (see figure on the back of this form)
1=Undisplaced cervical fracture 2=Displaced cervical fracture 3= Basocervical fracture 4= Trochanteric two fragments fracture
5= Trochanteric fracture multi fragments 6=Subtrochanteric fracture

Q5. Date of Fracture □□□□/□□/□□
Year/ Month/ Day (if it is not known use day of admission)

Q374. Time of fracture □□.□□
24 hours clock

Q8. Date of admission □□□□/□□/□□
Year/ Month/ Day

Q139. Time of admission □□.□□
24 hours clock

Q140 Time of first pain relief □□.□□
24 hours clock

Q141. Time of Xray □□.□□
24 hours clock

Q9. Admitted from: □
1 Own home 2=Sheltered housing 3= Institutional care 6=Rehabilitation unit 7= Acute hospital 8=Other

Q10. Living alone □
1=Yes 2=No 3=Institutional care (category 3-7 above).

Q11. Walking □
1= Walked alone out of doors 2= Walked out of doors only if accompanied 3= Walked alone indoors but not out of doors
4= Walked indoors only if accompanied 5= Unable to walk

Q12. Walking aids □
1 – Can walk without aids 2= One aid (stick, crutch, tripod or hemiwalker) 3 = Two aids 4=Frame/Rollator 5=Wheelchair/bedbound

Q13. ASA grade □
1-5 Se back on this form

Q15. Pathological fracture □
1=No 2=Metastatic fracture.

Q16. Date of operation □□□□/□□/□□
Year/ Month/ Day

Q142. Time □□.□□
24 hours clock

Q17. Primary operation □.□□
1 Single screw, pin or nail 2= Two screws, pins or nails 3= Three or more screws, pins or nails 4= Single screw, pin or nail with side plate 5= Intramedullary nail 6= Hemiarthroplasty 7= Total hip arthroplasty 8= Conservative 9= Other (for more detailed se back on this form)

Q18. Date of Discharge or death from admission ward □□□□/□□/□□ Year/ Month/ Day

Q19. Discharged to □
1 Own home 2=Sheltered housing 3= Institutional care 6=Rehabilitation unit 7= Acute hospital 8=Other 9=Deceased

	At admission	During hospital	At discharge
Occurrence of pressure ulcers on buttock or sacrum	Q144. □	Q120. □	Q163. □
Occurrence of pressure ulcer on heel	Q145. □	Q121. □	Q164. □
Occurrence of pressure ulcer any other area	Q146. □	Q122. □	Q165. □

Q166 Is a validated risk assessment scale used? □ 1=Yes 2= No

At admission

Q153. On Warfarin □ 1=Yes 2=No

Q154. Kognitive status □ 1= Normal mental functioning 2= Suspect dementia/delirium 3=Dementia diagnose

Q147. Kognitive screening SPMSQ □□ (see on the back of this form)

During hospitalization

Q127. Superficial woid infection □ 1=Yes 2=No

Q378. Lengthcm

Q128. Deep wound infection □ 1=Yes 2=No

Q 379. Weightkg

Q 380 .BMI □□,□

Own Questions (only analyzed by the own clinic)

Q148. □□ **Q149.** □□ **Q150.** □□ **Q151.** □□ **Q152.** □□ **Q375.** □□ **Q376.** □□ **Q377.** □□

Q158. □□□□/□□/□□ (Year/ Month/ Day) **Q159.** □□□□/□□/□□ (Year/ Month/ Day)

Q160. □□□□/□□/□□ (Year/ Month/ Day) **Q162.** □□□□/□□/□□ (Year/ Month/ Day)

Q371. □□.□□ (24 hours clock)

Codes for ASA classification

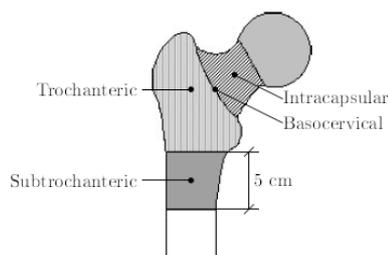
1. A Completely fit and healthy person who is on no medication and has no medical illness (other than the hip fracture). They obviously may have had medical problems in the past but these are now resolved.
2. The patient has some illness but this has no effect on normal daily activity and the patient has no symptoms related to this condition. Examples of this are things such as hypertension on treatment.
3. These are patients who suffer from conditions such as diabetes mellitus, asthma, angina, respiratory diseases. Providing however these conditions can be described as mild to moderate and only result in minimal symptoms with little restriction on the patients lifestyle.
4. This is more symptomatic illness causing everyday and severe restriction on the patients' life style. Examples of such conditions are severe chronic bronchitis, unstable diabetes, frequent angina.
5. Moribund. The patient is in such a poor physical state that he/she is not expected to live more than a few days.

Additional codes for Primary operation

- | | |
|------|---|
| 2.10 | Two screws (type unspecified) |
| 2.11 | Two Cancellous threaded screws (e.g. AO, Asnis) |
| 2.12 | Two Hansson pins |
| 2.14 | Two Olmed screws |
| 3.10 | Three screws (type unspecified) |
| 4.10 | Telescoping implant (type unspecified) |
| 4.12 | Sliding hip screw with trochanteric side plate |
| 4.13 | Sliding hip screw with Medoff side plate |
| 5.10 | Short intramedullary nail (type unspecified) |
| 5.11 | Short Gamma nail |
| 5.20 | Long intramedullary nail (type unspecified) |
| 5.21 | Long Gamma nail |
| 6.10 | Unipolar hemiarthroplasty (type unspecified) |
| 6.20 | Bipolar hemiarthroplasty (type unspecified) |
| 7.10 | Total hip replacement (type unspecified) |
| 8.10 | Conservative treatment (indication or method not specified) |

Codes for Pressure ulcer classification

- | | |
|-----|---|
| 0= | None |
| 1.= | Non blanching erythema of intact skin. |
| 2= | Partial thickness skin loss. The skin surface is broken resulting in an abrasion or crater. |
| 3= | Full thickness skin loss and extension into subcutaneous fat but not through underlying fascia. |
| 4= | Extensive destruction involving damage to muscle, bone or tendon. |



Pfeiffer test Short portable mental status questionnaire (SPMSQ)

Scores below 7 (max = 10) are generally considered to be indicative of impaired mental function. This test should be administered to the patient on admission to the acute orthopaedic ward, if possible prior to operative procedure.

1. What is the date today?
2. What day of the week is it?
3. What is the name of this place?
4. What is your street address?
5. How old are you?
6. When were you born?
7. Who is the prime minister in Sweden now?
8. Who was the prime minister before him/her?
9. What was your mother's maiden name?
10. Count backwards 20-1, (score 1 if no mistakes or subject corrects themselves spontaneously).