

 AO Foundation AO Clinical Investigation and Documentation Clavadelerstrasse 8 CH-7270 Davos	Form 03.014/04	Valid from: 01.02.2013
	Telephone Contact Report	Revision: -- Version: 04 Replaces:03

Name of project/study short title	Person calling (name, institution)	Call to
GFC	xxxx	Name of PI Name(s) of additional persons attending the call Name of hospital
Subject	Date	Contact
Follow-up call – Site selection questionnaire GFC / UCC (specify)	xx.xx.xxxx	<input type="checkbox"/> Person-to-person <input type="checkbox"/> Voice-mail message

1 Summary of discussion	
Question (scripted questions will be asked to every clinic – individual comments are in italic)	Answer
<p>Introduction:</p> <p>Based on the objective criteria that were defined by the AOTrauma Research Commission, your hospital has been pre-selected to be in the Geriatric Fracture Center (GFC) / Usual Care Clinics (UCC) group of clinics. In order to make the final decision about the participating study sites, we would like to discuss with you some questions related to the site selection questionnaires which you have submitted a few weeks ago.</p> <p>Tell them the criteria for GFC / UCC (whatever applies) upon request</p>	
<p>Regarding question 1.5 on the site selection questionnaire:</p> <p>How many patients with the listed inclusion and exclusion criteria can be included per year? <i>Questionnaire shows the following answer: xx patients per year.</i> → Check with the site if statement is realistic</p>	
<p>Unrelated to questionnaire: Informed consent <i>Regarding informed consent procedure: Please note that in this study also patients may be included which are mentally not capable to understand the content of the patient information sheet or give informed consent. We will discuss with you and your ethics committee about the process of including such vulnerable patients and adapt the informed consent form accordingly.</i></p>	

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<p>Regarding question 2 on the site selection questionnaire:</p> <p>Are all requested clinical examinations standard of care at your clinic?</p> <p>→ <i>If not, can they be performed for the study? (e.g. Australia: John Hunter Hospital: FU visits)</i></p> <p>→ <i>If yes, confirm everything is standard</i></p>	
<p>Regarding an additional question about follow-up rates:</p> <p>How would you estimate the percentage of patients who will come back to the 12 weeks follow-up visit?</p> <p>→ <i>What about the 1-year visit</i></p> <p>→ <i>Reasons for dropouts</i></p> <p>→ <i>% of deaths, % lost to FU</i></p>	
<p>Regarding question 3.1 on the site selection questionnaire:</p> <p>Is there a geriatrician available at your hospital?</p> <p>→ <i>If ortho-geriatrician or general geriatrician is ticked, please describe the qualification</i></p> <p>→ <i>How long has the geriatrician been working in the orthopaedic environment?</i></p>	
<p>If a geriatrician is available, discuss the following questions:</p>	
<p>Regarding question 3.1.5 on the site selection questionnaire:</p> <p>Does the geriatrician see the patient at your hospital within 1 hour after admission?</p> <p><i>Comment: We would like to change this question to be more generally worded:</i></p> <p>Does the geriatrician see the patient at your hospital prior to surgery?</p> <p>→ <i>Check first the answer from the questionnaire.</i></p> <p>Option A:</p> <p>→ <i>If patient is seen within 1 hour after admission, clarify if this is always the case, or depending on day time, week day, other circumstances?</i></p> <p>→ <i>Ask the question if the patient is always seen prior to surgery.</i></p> <p>→ <i>If no, can this procedure be implemented for the study (to set this as a standard of care for this clinic?)</i></p>	

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<p>Option B:</p> <ul style="list-style-type: none"> → If patient is not seen within 1 hour after admission, ask the question if the patient is always seen prior to surgery. → If no, can this procedure be implemented for the study (to set this as a standard of care for this clinic?) 	
<p>Regarding question 3.1.6 on the site selection questionnaire: Is there a daily round by the geriatrician starting from the first postoperative day until discharge?</p> <ul style="list-style-type: none"> → Does this include the weekends as well? → Purpose of the daily round (e.g. medical/diagnostic, psychological, etc)? → Is this round combined with the visit by the orthopaedic surgeon? → If yes/no, why? 	
<p>Regarding question 3.2 on the site selection questionnaire: Does the orthopaedic surgeon see the patient within 1 hour after admission?</p> <ul style="list-style-type: none"> → What type of orthopaedic surgeon? (e.g. registrar, consultant etc) 	
<p>Regarding question 3.3 on the site selection questionnaire: Is there a daily round by the orthopaedic surgeon starting from the first postoperative day until discharge?</p> <ul style="list-style-type: none"> → Is this done by the same person for an individual patient? → Function (registrar, consultant etc) → Is this person the surgeon who operated on the patient? 	
<p>Regarding question 3.4 (3.4.1 or 3.4.2) on the site selection questionnaire: Are there local medical guidelines for orthogeriatric patients, which have been consented by the orthopedic surgeons, geriatrician (if available) and anesthetist?</p> <ul style="list-style-type: none"> → Please send us these guidelines (if a draft only, give timeline for finalization and implementation) → Should be a formal document → Functions mentioned (geriatrician, orthopaedic surgeon, anaesthesist) <p><i>For UCC: Tell the clinic that they stated that there are no</i></p>	<p>In case of medical guidelines: Please send the guidelines to xxxxx by xx.xx.xxxx</p>

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<p><i>medical guidelines which would have been specifically consented by other specialists (which is fine, as "No guidelines" is a criterion for a UCC)</i></p>	
<p>Regarding question 3.5 on the site selection questionnaire: Does a pre-defined patient pathway exist to guarantee a fast track in the emergency room?</p> <p>Give examples e.g.</p> <ul style="list-style-type: none"> → <i>If patient 70 year of older, call the geriatrician</i> → <i>Patients sent directly to the ward etc</i> 	
<p>Regarding question 3.6 on the site selection questionnaire: Is a pre-defined order set for assessing laboratory values in place?</p> <ul style="list-style-type: none"> → <i>Are they part of the medical guideline?</i> → <i>Please send these order sets to AOCID</i> 	<p>In case of pre-defined order sets: Please send the order sets to xxxx by xx.xx.xxxx</p>
<p>Regarding question 3.7 on the site selection questionnaire: Does the patient receive physiotherapy every day during the postoperative phase?</p> <ul style="list-style-type: none"> → <i>What about weekends?</i> 	
<p>Regarding question 3.9 on the site selection questionnaire: Does the patient have access to social workers, if required?</p> <ul style="list-style-type: none"> → <i>Automated guideline to involve social workers?</i> → <i>Initiated by whom? (geriatrician, nurses, orthopaedic trauma surgeon)</i> 	
<p>Regarding question 3.10 on the site selection questionnaire: Is there a well-defined involvement of the staff nurses in the patient treatment process?</p> <ul style="list-style-type: none"> → Specify more clearly with following questions: <ul style="list-style-type: none"> → <i>Are there guidelines for nursing of patients (emergency, OR, ward, ICU etc)?</i> → <i>The same as the medical guidelines mentioned above?</i> → <i>Was the nursing staff involved in the development of these guidelines?</i> 	
<p>Regarding question 3.11 on the site selection questionnaire: Does a daily communication among involved</p>	

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<p>specialists take place?</p> <ul style="list-style-type: none"> → <i>If yes, who is involved in these discussions?</i> → <i>Fixed daily meetings or only if needed (upon request)?</i> 	
<p>Regarding in addition to the site selection questionnaire:</p> <p>How is the communication with the patient and family organized?</p> <ul style="list-style-type: none"> → <i>Who communicates how and when with the patient and relatives?</i> → <i>How often do these discussions take place?</i> 	
<p>Regarding questions 4.4 and 4.5 on the site selection questionnaire:</p> <p>Check if necessary:</p> <ol style="list-style-type: none"> 1. Contact details of your local ethics committee / IRB (do we have it?) 2. Did you have any issues with ethics approvals in the past? 3. If yes, what was the reason? 4. Any questions related to the languages needed for the patient information sheet / informed consent forms? 	
<p>Regarding question 4.7 on the site selection questionnaire:</p> <p>Check if necessary:</p> <p>Contractual agreement:</p> <p>Are there any issues?</p>	

2 Action required

3 Further comments

Signatures

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Author of telephone contact report		
Name, function	Date (dd.mm.yyyy)	Signature

Confirmed by (if applicable and required)		
Name, function	Date (dd.mm.yyyy)	Signature