## Did Implementation of the HIP ATTACK Protocol Change Time to Surgery and Mobilization for Hip Fracture Patients?

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**Purpose**: We sought to determine if the implementation of the HIP ATTACK protocol for hip fracture patients decreased delays in surgical fixation or postoperative mobilization. Our hypothesis is that since implementation of the HIP ATTACK protocols, time to surgery and time to mobilize have improved.

**Methods**: This was a retrospective review of patients who underwent hip fracture surgery between January 2011 and January 2021. Patient demographics, injury characteristics, and floor of admission were collected and analyzed. Time of diagnosis was defined as the time of the initial presenting radiograph, and time of mobilization was defined as the time the patient stood at edge of bed with physical therapy (PT). HIP ATTACK implementation at our institution was September 2016.

**Results**: A total of 781 patients (average age 78 years) were included in our analysis. 395 patients were operated on prior to September 2016, while 386 were operated on after HIP ATTACK implementation. Times from injury and diagnosis to surgery were significantly decreased following HIP ATTACK implementation compared to prior on average by 17 hours and 9 hours respectively (P = 0.012 and P < 0.0001). Time from surgery to PT evaluation was on average 4 hours faster following HIP ATTACK implementation (P = 0.049). Time from surgery to mobilization was not significantly different pre- and post-HIP ATTACK implementation (P = 0.63).

**Conclusion**: Time to surgery and PT evaluation was significantly improved following implementation of HIP ATTACK at our institution, while time to mobilize from surgery was nonsignificantly different. At our institution, implementation of HIP ATTACK yielded notable improvements in patient time to surgery and PT evaluation that could point to improved long-term patient outcomes.

	Pre Hip ATTACK	Post Hip ATTACK	
Time from diagnosis to surgery	30.08 ± 34.00	21.67 ± 15.51	p < 0.0001
Time from Surgery to PT Evaluation	30.30 ± 24.25	26.90 ± 21.73	p = 0.0491
Time from surgery to OOB	59.49 ± 49.70	57.62 ± 42.33	p = 0.6310

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