SHC Community Health Needs Assessment Report

Shriners Hospitals for Children® — Spokane

Prepared by: Kristin Monasmith, PR Director, Nick Leute, PI Coordinator, Craig Patchin FACHE, Interim Administrator, Lynda Vilanova RN, Director of Operations, Paul Caskey MD, Chief of Staff
Mission and Vision

Mission:
- Provide the highest quality care to children with neuromusculoskeletal conditions, burn injuries and other special healthcare needs within a compassionate, family-centered and collaborative care environment.
- Provide for the education of physicians and other healthcare professionals.
- Conduct research to discover new knowledge that improves the quality of care and quality of life of children and families.

Vision:
- Shriners Hospitals for Children will be the unquestioned leader, nationally and internationally, in caring for children and advancing the field in its specialty areas.

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Shriners Hospitals for Children
911 W 5th Ave
Spokane, WA 99204
Tel: 509.455.8544
www.shrinershospitalsforchildren.org
Our Commitment to the Community

About the Hospital

For nearly 90 years, the Spokane Shriners Hospital has been providing pediatric Orthopedics; treating kids with orthopedic conditions ranging from serious issues requiring multiple surgeries to simple fractures easily corrected with a single surgery. In addition, the hospital staff performs thousands of radiology, physical therapy and casting appointments each year. Kids 0-18 years old from Washington, Idaho, Montana, Alaska and Canada receive care and services at the Spokane Hospital.

You will find the only fellowship trained pediatric orthopedic surgeons in the region at the Spokane Shriners Hospital. The medical staff includes four pediatric orthopedic surgeons, a pediatrician, three orthopedic physician assistants and five pediatric trained anesthesiologists. Consulting staff includes hand, total joint, plastic surgery, muscular dystrophy and thoracic specialists as well. Nursing staff, respiratory therapy, physical therapists and Recreational Therapist with expertise in the management of the inpatient and outpatient pediatric orthopedic patient complete our team.

Medical Staff

- Pediatric Orthopedic Surgeons
- Full-time Staff Pediatrician
- Pediatric Trained Anesthesiologists
- Pediatric Physician Assistants
- Recreation Therapists/Child Life Specialists
- Pediatric RNs
- Physical Therapists
- Respiratory Therapists
- Movement Analysis Gait Lab Experts
- Laboratory Technologists & Radiology Technologists

What We Treat

- Sports Injury
- Fractures/Dislocations (Stable)
- Scoliosis
- Knee & Hip Injury
- Foot & Hand Deformity
- Shoulder Injury
- Prosthetics & Orthotics
- Cerebral Palsy
- Club Foot
- Limb Discrepancy/Limb Loss
- Rehabilitation/Therapy
In-house Services

- Movement Analysis Lab
- Radiology
- Clinical Laboratory
- Casting

The Shriners Hospital mission is threefold, providing excellent pediatric orthopedic services, educating tomorrow’s physicians and other health care providers and performing research to ensure quality care, develop new knowledge and improve the quality of life for our patients.

The Spokane hospital is a great resource and safety net for children with pediatric orthopedic problems without insurance or ability to pay, regionally and globally as well. Caring for children beyond our borders is an important part of our mission as well as our Resident education. Our medical staff volunteers their time and expertise to patients in Mexico, Central America and Africa each year. In addition, every other month a team travels to our Nogales, New Mexico outreach clinic to evaluate kids from Mexico with orthopedic concerns. We see more than 100 patients a year in the clinic and those children requiring surgery are brought to our hospital in Spokane for treatment.

Access to care has never been easier. Contracts are now in place with most major insurance networks; Premera Blue Cross/Blue Shield, Group Health, Molina Healthcare, Cigna, Aetna and many others. We have active contracts with the top 15 Payors in the market. However, whether or not a family has insurance has never been a factor; acceptance for care is based only on medical need.

<table>
<thead>
<tr>
<th>Insurance Coverage</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Claims</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Insured</td>
<td>91.9%</td>
<td>92.6%</td>
<td>92.9%</td>
</tr>
<tr>
<td>Uninsured</td>
<td>8.1%</td>
<td>7.4%</td>
<td>7.1%</td>
</tr>
<tr>
<td>% of Charges</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Insured</td>
<td>78.3%</td>
<td>88.0%</td>
<td>81.2%</td>
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<tr>
<td>Uninsured</td>
<td>21.7%</td>
<td>12.0%</td>
<td>18.8%</td>
</tr>
</tbody>
</table>
Active Patient Map 2012

State Breakdown: Where our Patients Come From 2012

Patient Catchment Area 2012
Pediatric Orthopedic Market

According to the 2010 Spokane Regional Health District “Spokane Counts”, 23.4% of Spokane County children are under the age of 18. Spokane and surrounding communities are fortunate to have access to the regions only fellowship trained pediatric orthopedic surgeons’ right here at Shriners Hospitals for Children — Spokane. Because of this, the Spokane Shriners Hospital treats the majority of the pediatric orthopedic cases in Spokane County.

The Spokane Shriners Hospital has solid relationships with the two largest hospital systems in Spokane:

- Rockwood Health System (subsidiary of Community Health Systems)
  - Deaconess Medical Center
  - Valley Hospital
  - Rockwood Clinics
  - No Pediatric Orthopedists on Staff

- Providence Health & Services
  - Providence Sacred Heart Medical Center and Children’s Hospital
  - Holy Family
  - Providence Family Medicine and Providence Physician Services
  - No Pediatric Orthopedists on Staff

“When your child is injured, what is most important is finding an expert who understands the needs of growing bones and joints,” says Dr. Bryan Tompkins, one of Shriners Hospital Spokane’s pediatric orthopedic surgeons. The closest pediatric fellowship trained orthopedic surgeons are located in Eastern Montana and Seattle Children’s in Seattle, Washington.

The medical staff at our hospital cares for the full spectrum of pediatric orthopedic problems including: developmental dysplasia of the hip, slipped capital femoral epiphysis, upper and lower extremity deformity, spine deformity, pediatric amputations, benign bone tumors and neuromuscular problems such as cerebral palsy. In addition, our doctors treat stable fractures and sports injuries, non-surgical patients are see in the Outpatient Clinic, and those needing surgery are placed on our surgery schedule.
2013 will bring new services, changes and updates to the Spokane Shriners Hospital. Adding a fourth surgeon and a fifth Physician Assistant has created the opportunity to see more patients in the Outpatient Clinic and to perform more surgeries. In addition, as health care technology continues to support a less invasive approach towards treatment, the number of patients needing treatment on an inpatient basis has significantly decreased over the past decade. In 2012, roughly 62% of all of our surgeries were completed in an outpatient setting. This trend will only increase.

With these changes occurring and hospital efficiencies in place, our volumes are up. However, we still have availability to see more kids and are accepting new patients for pediatric orthopedic specialty care.

Shriners Hospitals for Children — Spokane has available capacity in:

- Inpatient Volume: 30 Licensed Beds (2012 Average Daily Census = 5.7)
- Outpatient Clinic Volume: 12 Exam Rooms (2012 Monthly Volume = 642 Outpatient Visits)
- Surgical Volume: 2 Operating Rooms (2012 53.3% Utilization)

### Shriners Hospitals for Children — Spokane: 2012 Patient Type Demographics

<table>
<thead>
<tr>
<th>Patient Type</th>
<th># of Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient</td>
<td>276</td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>510</td>
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<tr>
<td>Outpatient Clinic</td>
<td>7706</td>
</tr>
<tr>
<td>Outreach</td>
<td>122</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>138</td>
</tr>
</tbody>
</table>
Service Area Definition

This Community Needs Assessment focuses on Spokane County. The population in Spokane County is fairly evenly distributed with the oldest age group having the smallest proportion of the population.

In 2010 the population was comprised of:

- 23.4% youth (0-17 years)
- 29.9% young adults (18-39 years)
- 33.2% older adults (40-64 years)
- 13.5% seniors (65+ years)

Among Spokane County residents in 2010, 89.2% were White, 1.7% Black, 1.5% American Indian/Alaska Native, 2.5% Asian/Pacific Islander and 3.8% were of two or more races. Residents of Hispanic ethnicity comprised 4.5% of the population (21,260). (Spokane Regional Health District Website)

<table>
<thead>
<tr>
<th>Race</th>
<th>% of Patients</th>
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<tr>
<td>White</td>
<td>79.2%</td>
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<tr>
<td>Black or African American</td>
<td>2.4%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>2.2%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.4%</td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td>0.7%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>14.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>% of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic - Latino</td>
<td>10.8%</td>
</tr>
<tr>
<td>Not Hispanic or Latino</td>
<td>78.9%</td>
</tr>
<tr>
<td>Other</td>
<td>9.5%</td>
</tr>
<tr>
<td>Unknown</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

Shriners Hospitals for Children – Spokane: 2012 Race/Ethnicity Demographics
Shriners Hospitals for Children — Spokane was part of collaboration of health care providers and health care agencies in creating a Community Health Needs Assessment for Spokane County. The purpose was to prioritize health care needs, especially among the most poor and vulnerable populations, and look for collaborative opportunities to improve the health of the community.

Led by Providence Hospital, the Spokane Shriners Hospital was a part of the team which engaged the community in a thought provoking process over a two-month period. More than 70 community organizations and individuals with expertise in community health issues came together to review both quantitative and qualitative data. Demographic and emergency room data, health measures on behavior, status and outcomes, and the results from a health inequity assessment were evaluated.

The data was ranked by trend, magnitude, comparison to state and national results, comparison to national Healthy People 2020 Goals, and the presence of health disparities indicating areas needing improvement.

In subsequent meetings, participants broke into five focus groups to explore data categories and test their professional observations against the research.

Finally, participants used the following criteria for selecting the community’s highest priority issues:

- Affects the greatest number of community members, particularly as it pertains to the poor and vulnerable;
- Is predictive of other outcomes; it’s an underlying cause of other issues;
- Impacts various aspects of community life;
- An area we, as community, believe we can make a difference; there are opportunities for partnerships; change can occur within three years.

By working together, we have an opportunity to coordinate efforts around larger holistic issues and make lasting changes that address many of our community’s greatest needs. In addition, the partners in this Community Health Needs Assessment see opportunities for additional research to update and validate data; to continue analysis of community resources; to provide community education and increase awareness of the issues; and to collaborate in finding creative solutions that improve the overall health of the community.
Key Findings

How the Collaborative Community Health Needs Assessment was conducted

- Quantitative data gathered by the Spokane Regional Health District through their Spokane Counts report, a health inequity assessment and Emergency Room data were presented to a gathering of over 70 participating individuals and agencies in the Spokane community.
- Participants were asked to attend one of five focus groups relating to the data presented.
- Qualitative information from the focus groups was compiled into a summary and presented to the larger meeting for a formal vote on the community highest priorities.

This information was presented to the Community Benefit Team along with Thomas Reuter’s zip code data and Providence hospital data to determine the plan to address the needs.

Identified Needs

1. Mental Health & Substance Abuse
   a. Child Abuse
2. Obesity & Diabetes
3. Care Coordination/Access to Care

From the three identified needs presented by the Providence led collaborative group, Shriners Hospitals for Children – Spokane utilized our internal Performance Improvement Council on a regular basis to determine how the Spokane Hospital can address the community needs.

Applicable Needs – What are we doing and can we do more?

1) Mental Health – Youth depression is 26.6%
   a. Child Abuse – Percentage of children bullied is 26.5% (Goal 17.9% for 2020) & CPS reports 40 p/1000 (Goal is 8.5 p/ 1000 for 2020).

Shriners Hospitals for Children — Spokane employs a full time Education Coordinator. She manages annual education for patient care staff in warning signs and identification of depression in children. Our
Social Workers and Care Coordinators are connected with each patient and their family, providing resources when needed.

Our Child Life Specialist and Recreation Therapy department have implemented a “Teen Group” of patients. They work with this patient population on preventing bullying, depression and promoting physical activity.

2) Nutrition & Physical Activity – Food insecurity is 18.2% (Goal is 6% by 2020) – Obesity & Diabetes – Overweight youth is 23.2%.

All under/over nourished patients are referred to a hospital dietician for consulting. In addition, research is being done by hospital medical staff on obesity and link to orthopedic issues. The Recreation Therapy department regularly plans events to promote activity for our patients, such as the annual Bloomsday race in Spokane, WA. Our Public Relations department promotes activity in children through a variety of tactics; print ads, patient stories, health fair participation, social media, educating kids and families about healthy bones and joints.

The primary need in which the Spokane Shriners Hospital is able to meet falls under the third category.

3) Care Coordination – The percentage of the insured population with a Primary Care Provider is 78.6%. Those without insurance or a personal doctor result in higher costs to the hospital and the community.

   a. Access to Care

Because the Spokane Shriners Hospital is a small, 30 bed hospital, we remain kid-focused in order to maintain individualized care for every child. Our Care Coordinators and Social Workers champion the total care management that ensures the patient and family are cared for, coordinating resources in and out of the hospital. Every Shrine patient is assigned a care coordinator.
Care Coordinators Assist By:

- Assessing the family’s strengths, needs, concerns and priorities.
- Coordinating family centered care for all children with Shriners Hospitals for Children® — Spokane and with community providers; including your child’s primary care physician
- Providing information and education about the child’s health condition and plan for care
- Providing information about growth and development
- Providing information about services and resources within their community
- Integrating inpatient and outpatient services
- Helping families to understand how to use insurance benefits within the community
- Helping with discharge planning
- Coordinating transportation and lodging during a hospital inpatient stay
- Advocating for the child’s needs
- Answering questions and working with families to solve problems.
- Helping you to plan the child’s future care needs

From the need for **Access to Care**, a work group within the Spokane Shriners Hospital defined a specific community need we could immediately address with regard to access to care.

**Work Group:**

- Dr. Bryan Tompkins, Pediatric Orthopedic Surgeon
- Lynda Vilanova, Director of Operations/Patient Care Services Director
- Kristin Monasmith, Director of Public Relations
- Michele Dieter, Director of Inpatient and Outpatient Services
- Trina Olson, Physician Relations Liaison
- Nick Leute, Performance Improvement Coordinator
- Rich Armstrong, Revenue Cycle and Patient Access Manager

**Shriners Hospitals for Children — Spokane** can meet the unmet needs in our community for timely care of stable fractures.
In a recent article published in *The Journal of Pediatrics*, research found that orthopedic surgeons are less likely to see children now for fracture care compared with 10 years ago.

Fifty randomly selected orthopedic practices were contacted twice with an identical scenario to request an appointment for a fictitious child with an arm fracture, once the staff told the child had private insurance and once with Medicaid. Access to appointments on the basis of insurance was compared with rates 10 years earlier.

**Results:** Forty five practices were contacted successfully. An appointment was offered within 7 days to a child with private insurance by 42% of the practices and to a child with Medicaid by 2% of the practices. There was no difference in timely access for children with Medicaid in this study compared with 10 years ago. *There was a significant decrease in timely access for children with private insurance in the past decade with a rate of 42% in this study, compared with 100% 10 years ago.*


Fractures are common in children. And because a child's bones are subject to a unique injury called a growth plate fracture, it is important that broken bones in kids are treated properly. According to the *American Academy of Orthopedic Surgeons*, approximately 15% to 30% of all childhood fractures are growth plate fractures.

Children are not just small adults, their bones heal faster than adult's bones. Even for the same problem that an adult might have, the evaluation and treatment is usually quite different. This means that a child with an injury should see an experienced pediatric orthopedic specialist. The child needs proper treatment before the bone begins to heal, because the long-term consequences may include limbs that are crooked or of unequal length.

Additional research results found that access to emergency orthopedic care in the Unites States is problematic and may get worse. At present there is variable access to orthopedic emergency care in many communities in the United States. Factors contributing to the emergency orthopedic care access problem include:

- An increasing patient population seeking emergency orthopedic care.
• A shortage of physicians available to take emergency orthopedic call in certain parts of the country\textsuperscript{2}
• Unique difficulties in pediatric orthopedic coverage.\textsuperscript{3}
• Government health care programs that do not provide adequate coverage for emergency care
• Inadequate hospital facilities and insufficient resources to support emergency care services\textsuperscript{4}
• A decrease in the number of hospital emergency departments\textsuperscript{5}
• Decreasing professional reimbursement and increasing professional practice costs\textsuperscript{6}
• An increasing volume of uninsured patients, uncompensated care, underinsured patients\textsuperscript{7}
• A challenging medical liability environment\textsuperscript{8}
• Changing practice patterns with increased orthopedic sub-specialization
• An anticipated orthopedic manpower shortage\textsuperscript{9}

At present, from time to time, trauma centers become overburdened with transfers of patients for routine urgent orthopedic care which can lead to impairment of the trauma center’s ability to care for legitimate acute trauma victims. 

\textit{Source: aaos.org/about/papers/position/1172}

In order to meet the need of timely access to pediatric fracture care, with no regard to insurance status, the group chose to develop, implement and manage an Urgent Pediatric Fracture Clinic to treat documented, stable fracture patients under the age of 18. The hospital has dedicated the first part of each morning in our Outpatient Clinic to these kids. Patients are put into priority scheduling and will receive total fracture care at that could include reduction, surgery, casting post-fracture follow up and rehabilitation as needed.

The Urgent Pediatric Fracture Clinic hopes to also provide a solution to help to decrease unnecessary return trips to Emergency Rooms. A study published by \textit{Pediatric Emergency Care} found that for fractures not requiring emergent surgery, children are typically placed in immobilizing splints or casts in the emergency department (ED) and instructed to follow up with their primary care provider for a referral to orthopedic surgery.
It has been reported in the past that there are multiple barriers to this follow-up, particularly in patients with Medicaid.\textsuperscript{10-12} Patients who lack private insurance or are uninsured are even less likely to be compliant with follow-up referral.\textsuperscript{13, 14} This can potentially lead to patients unnecessarily returning to the ED for follow-up.\textsuperscript{15-17} It has been shown previously that this decreased access causes delays in accessing definitive orthopedic treatment.\textsuperscript{18}

Source: Pediatric Emergency Care, Volume 28, Number 7, July 2012

Shriners Hospitals for Children – Spokane coordinates all follow-up care for patients accessing the Urgent Pediatric Fracture Clinic, eliminating the need for additional referrals to other providers. Our goal is that through our Urgent Pediatric Fracture Clinic, the easy access to care alleviates perceived or real barriers to obtaining necessary outpatient follow-up for fracture care which may lead to increased returns to an Emergency Department for orthopedic management.
**Action Plan**

**Shriners Hospitals for Children – Spokane**

**Urgent Pediatric Fracture Clinic**

**Introduction:**

*Urgent Care* is defined as “within 12 hours to 10 days”. The Spokane Shriners Hospital does not have an Emergency Room; our plan is to provide “Urgent Care” for pediatric fractures. To meet the needs of our community for timely access to orthopedic care, the Urgent Pediatric Fracture Clinic was developed.

The Shriners Hospitals for Children — Spokane Urgent Pediatric Fracture Clinic is offered Monday – Fridays, 7:30 am - 9:00 am (excluding holidays), giving patients with a documented fracture priority scheduling. These patients will be seen the next business day without an appointment.

*Those patients arriving after 9:00 am may be moved to the following day.*

A streamlined and easy process was created for ease of referral from the Urgent Care, Emergency Room or Provider Clinic.

**Easy Provider Referrals and Patient Access**

1. Referring provider will fax the referral form directly to our Outpatient Clinic registration team.
2. Referring provider gives the “Patient Instruction Sheet” to the family to bring with them to the Fracture Clinic.
3. Patient comes to the Fracture Clinic the next business day.
4. Patients do not need an appointment and will be placed in a priority schedule developed by the Outpatient Clinic. Primary contact is the Physician Assistant, MD available when needed.
5. The patient will be scheduled for surgery same day when required based on availability.

**Marketing Plan:**

Our Physician Relations Liaison educates physicians in face to face meetings in emergency room, urgent care centers and family and pediatric clinics about the Fracture Clinic and the process to refer their stable fractures to the Spokane Hospital.
Media:
- Print Ads
- Broadcast TV
- Radio

Messaging is consistent across all mediums, focusing on easy access to care, fracture care services and medical expertise.

Primary -
- Emergency Room Physicians
- Urgent Care Center Physicians

Secondary -
- Pediatric Clinics
- Family Practices
- Orthopedic Clinics

In addition the Spokane Shriners Hospital has created additional processes and hired additional staff in order to ensure easy and timely access to care for all patients.

- Revision of internal processes to improve applications, referrals, feedback to physicians and medical home follow up.

The Urgent Pediatric Fracture Clinic was launched in April 2013. Early results of the Fracture Clinic have been positive. We are receiving a higher quantity of patients than initially anticipated, proving that there was a need and we are capturing those kids in our community who require urgent fracture care.

In the first 60 days of the program, we have seen an increase in new patients, follow-up appointments and surgical procedures as a result of the Fracture Clinic.
Access to care continues to be a focus for our hospital and as you can see from the graph above, since the hiring of a fourth orthopedic surgeon and the implementation of a fracture clinic, we have been able to drive down our average time to be seen in the outpatient clinic from when a referral is received from 83 days in January, 203 to 53 days in May '13.

Based on the success of the Fracture Clinic, the Spokane Shriners Hospital is planning on implementing additional clinics targeted to specific pediatric orthopedic conditions. Our goal remains consistent, treat any child up to age 18 with an orthopedic concern.

“Shriners Hospitals for Children — Spokane has been treating kids with orthopedic conditions for nearly ninety years and we are definitely poised for the next ninety,” said J. Craig Patchin, Shriners Hospital Spokane Interim Administrator. “We are proud to be a part of this community and to continue to care for the families in our region.”
Acknowledgements

Shriners Hospitals for Children – Spokane
Charlotte Preuschoff, Clinical Research Coordinator

External Organizations:
Providence Health Care
Spokane Regional Health
Empire Health Foundation
Exhibits

FRACUTRE CLINIC REFERRAL FORM

SHRINERS HOSPITALS FOR CHILDREN - SPOKANE
Urgent Pediatric Fracture Clinic Referral Form
Clinic Hours: 7:30 a.m. - 9:00 a.m. Monday - Fridays (excluding holidays)

For an immediate referral, complete this form and fax to: 509-623-0472
Patients will be seen the following business day.

Fracture Referral Guidelines:
- Children and adolescents 18 years and younger.
- Documented fracture by radiograph.
- Stable patients only who do not require immediate intervention (e.g. open fracture).
- If you are concerned the patient may require surgery, please instruct the patient to be NPO after midnight and check the necessary box on the Patient Instruction Sheet.
- Please instruct the patient to bring Patient Instruction Sheet with them to Shriners Hospital.

Please do not hesitate to contact one of our physicians for other pediatric orthopaedic issues or questions.
Business hours: 509-623-0428
After Hours: 509-623-0430

Shriners Hospitals for Children is now part of most major insurance networks. No insurance? No problem. We treat any child regardless of the family’s ability to pay.

DATE:

<table>
<thead>
<tr>
<th>Type of Fracture</th>
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</thead>
<tbody>
<tr>
<td>Documented fracture on radiograph.</td>
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<table>
<thead>
<tr>
<th>Referring Provider</th>
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<tbody>
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<td>Name:</td>
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<table>
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<tr>
<th>Patient Information</th>
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<tr>
<td>Please include patient Facesheet or complete the following information.</td>
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</table>

<table>
<thead>
<tr>
<th>Child's Last Name:</th>
<th>Child's First Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Age</td>
</tr>
<tr>
<td>☐ Male</td>
<td>☐ Female</td>
</tr>
</tbody>
</table>

| Family Phone Number: | Alternate Phone Number: |

NOT PART OF THE MEDICAL RECORD

This fax may contain privileged or confidential information protected by law. Any unauthorized dissemination, distribution, or copying of this communication is prohibited. If you have received this fax in error, please destroy the attached document(s) and notify us immediately by telephone.

Date: 3/15/2013
PATIENT INSTRUCTIONS FORM

Shriners Hospitals for Children - Spokane: Urgent Pediatric Fracture Clinic
Clinic Hours: 7:30 a.m. - 9:00 a.m. Monday - Fridays (excluding holidays)

Patient Instruction Sheet: Please bring this form with you.
Your child will receive total fracture care at Shriners Hospital that could include reduction/re-alignment, surgery, casting, post-fracture follow up and rehabilitation as needed. All care is provided regardless of patient’s ability to pay.

Clinic Hours: 7:30 am - 9:00 am Monday - Friday (excluding holidays)
Check-in at the Outpatient Clinic on the 3rd Floor. Your child will be placed in a priority schedule to be seen by our medical staff. If you arrive after 9:00 am, you may be required to return the following day.

If you have questions, concerns or changes in your child’s condition or you are unable to keep your appointment, please call our Outpatient Clinic: 509-623-0400.

Location:
• The Spokane Shriners Hospital is located on the corner of 5th Avenue and Monroe Street in Spokane. Parking is located in the parking garage on the first floor.

What To Bring:
• Patient Instruction Sheet
• Parent/Guardian photo identification and insurance card (if applicable)

911 W. 5th Ave, Spokane, WA 99204

What if my Child Needs Surgery?

☐ Please follow the instructions below if your referring provider checked this box or there is a concern your child might need surgery.

No solid foods after midnight!
Your child should not have ANY solid foods, milk products, including infant formula, or juice with pulp (orange juice) after 12:00 Midnight.

Breastfed Children:
• 3:00 am: You may breastfeed your child as usual up to 3:00 am the morning of surgery.
• Between 3:00 am and 4:00 am only: Offer only clear fluids (water, apple juice, white grape juice or clear Gatorade).
• NO RED DRINKS.
• After 4:00 am: Your child should not have anything by mouth.

Children under age five should be awakened and offered clear fluids (water, apple juice, white grape juice or clear Gatorade, NO RED DRINKS) at 4:00 AM only.

All age children: Do NOT give your child ANYTHING by mouth after 4:00 am. Candy, gum, cigarettes are not permitted during the fasting period. May brush their teeth, but shouldn’t swallow.

Date: 3/15/2013
FRACTURE CLINIC FLYER

SHRINERS HOSPITALS FOR CHILDREN — SPOKANE
Urgent Pediatric Fracture Clinic
Clinic Hours: 7:30 a.m. - 9:00 a.m. Monday - Fridays (excluding holidays)

Shriners Hospitals for Children — Spokane’s Urgent Fracture Clinic is the place to refer your stable fractures. We have dedicated the first part of each morning in our Outpatient Clinic to these kids. Your patient will receive total fracture care at Shriners Hospital that could include reduction, surgery, casting, post-fracture follow up and rehabilitation as needed.

We have created a streamlined and easy process for you and your patients.
• All you have to do is fax us the Referral Form (provided).
• All the families need to do is arrive at the Spokane Shriners Hospital the next business day by 9:00 a.m.

Fracture Referral Guidelines:
• Children and adolescents up to age 18.
• Documented fracture by radiograph.
• Stable patients only who do not require immediate intervention (e.g. open fracture).
• Provide the patient with the Shriners Hospital Patient Instruction Sheet. (provided)

Please do not hesitate to contact our physicians for pediatric orthopaedic issues or questions.
• Business hours: 509-623-0428
• After Hours: 509-623-0430

Shriners Hospitals for Children is now part of most major insurance networks.
No insurance? No problem. We treat any child regardless of the family’s ability to pay.

Getting your patient in to see the experts is easier than ever.
References


3. Emergency Care for Children; Growing Pains. Institute of Medicine, June 14, 2006. [http://www.iom.edu/?id=48897](http://www.iom.edu/?id=48897)


5. Hospital-Based Emergency Care; At the Breaking Point. Institute of Medicine, June 14, 2006.


8. To address the medical liability crisis, the AAOS was the founder and current chair of Doctors for Medical Liability Reform. [www.ProtectPatientsNow.org](http://www.ProtectPatientsNow.org).

9. To address this issue, the AAOS Board of Directors created an Orthopaedic Work Force Project Team.


