ORTHOPAEDIC GUIDELINES
FOR
NON-TRAUMA ORTHO CALL

Listed below are musculoskeletal injuries that may be referred to non-trauma credentialed orthopedic surgeons. These injuries must be isolated, closed, and unassociated with any other fracture or injury potential. The acute injury assessment must be performed by an emergency department physician. Any patient meeting Level I or II trauma alert criteria cannot be evaluated under this guideline. Regardless of injury, all alert status patients must have trauma team involvement and consultation only to trauma credentialed sub-specialists. This list is intended as a guideline to be used in reference for referrals to non-trauma credentialed orthopedic specialists. Any questions should be directed to the on-call trauma attending.

SHOULDER
- Fracture proximal humerus
- Fracture clavical
- AC dislocation
- Glenohumeral dislocation

ARM
- Fracture diaphysis humerus
- Fracture supracondylar humerus

ELBOW
- Fracture radial head
- Fracture ulna (olecranon)
- Fracture coronoid process

FOREARM
- Colles fracture
- Fracture carpal bones
- Dislocation carpal bones

HIP
- Femoral neck fracture
- Intertrochanteric fracture

FEMUR
- Supracondylar fracture of femur

ANKLE
- Fracture medial malleolus, lateral malleolus, posterior malleolus or any combination of these.
- Fracture talus

Original: 06/1999
Revisions: 06/2004
Revisions: 06/2007
Revisions: 11/2008