This study is now in active data collection. By the time of presentation, I anticipate there will be sufficient data to demonstrate a significant decrease in grip strength in hip fracture patients relative to normative value. Further data collection is ongoing and required to have an adequate sample size of home discharge patients to directly compare the groups. Using the pilot data in hip fracture patients and study design, I am proposing a follow-on study to aid in assessment of patients who are candidates for outpatient surgery. Specifically, can measurement of grip strength be applied in a decision making algorithm when selecting patients for outpatient hip arthroplasty.

Background:
Decreased hand grip strength has been established as a marker of frailty in peri-operative patients\textsuperscript{1,2}. Prior studies have found decreased pre-operative grip strength to correlate with an increased risk of complications following surgery for hip fractures and a longer hospital stay in primary arthroplasty patients\textsuperscript{3,4}.

Clinical question:
Does grip strength correlate to length of stay or likelihood of nursing facility discharge in patients undergoing surgical fixation of proximal femur fractures?

Study type:
Prospective, observational

Method and materials:
After obtaining informed consent, a hand dynamometer will be used to measure the dominant hand grip strength of patients seen in consultation for proximal femur fractures. Chart review will used to collect additional data including pre-operative laboratory values, patient height/weight, and medical comorbidities.

Inclusion criteria:
- age >55
- fracture of proximal femur (femoral neck or intertrochanteric fractures)

Exclusion criteria:
- pathologic fracture
- significant functional impairment limiting use of hand (stroke, prior hand injury with residual impairment)
- residence in nursing facility at time of injury (excluded from discharge to nursing home analysis)

Data analysis:
Statistical analysis will be performed to determine if there is a significant difference in grip strength that correlates to:
- ambulation on POD 1
-length of stay
-discharge to nursing facility

Some patients in the pilot group

Subgroup analysis will also be performed as appropriate for age groups, gender, etc.

Additional analysis will integrate control group (normative reference data) to determine if there is a threshold predictive for the outcome measures.