



Consensus Position Statement on Short Stay Arthroplasty

Australian Orthopaedic Association, Australian Knee Society & Arthroplasty Society of Australia

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Background

The Australian Knee Society is the peak body representing clinicians and researchers in the science of knee surgery and knee conditions in Australia with the aim of advancing the standard of surgery and management of conditions of the knee joint in Australia.

The Arthroplasty Society of Australia is the peak body representing clinicians and researchers in the management of hip and knee arthroplasty in Australia, dedicated to the exchange of scientific and clinical knowledge with the aim to advance the standard of joint replacement procedures in Australia.

This consensus position statement deals with the Short Stay model of a reduced period inpatient stay after Hip and Knee Arthroplasty in Australia. It was achieved using a Delphi technique, a systematic structured communication technique to achieve consensus using the executive of The AKS and ASA as the expert panel in a two-round process. All statements received 100% consensus in agreement unless otherwise stated.

1. Short stay arthroplasty can be an appropriate option for many patients, but not all patients undergoing knee and hip replacement, depending on their personal circumstances.
2. Short stay arthroplasty refers to a care model with a shorter length of stay in hospital (<48 hours) than a traditional model of 4 days or more as a routine length of stay.#
3. Appropriate patients have strong social support networks, are younger and have less co-morbidities.
4. When performed appropriately and in appropriate patients, short stay arthroplasty can reduce arthroplasty costs with similar or superior outcomes to traditional care.
5. The decision to use a short stay model of care should be a shared clinical decision-making process between patient, surgeon, anaesthetist and other treating specialists to enable a discussion to the risks and benefits.
6. Australian patient's average length of stay over the past decade has been reducing due to a variety of peri-operative improvements, such as ERAS (Enhanced Recovery After Surgery).
7. Patients who are not suitable for SSA in the private health care system should not be penalised financially or in any other manner due to their inability to participate in SSA.
8. SSA models should be transparent with ethical relationships between hospital providers, health funds and surgeons that always act in patients' best interests.



9. Day-stay arthroplasty is a type of SSA that refers to a care model where the patient spends less than 24 hours in a surgical facility.
10. Short stay arthroplasty models need to extend the post-operative care model into the home environment.#
11. Currently, there are disincentives against short stay arthroplasty in some private health insurance funding arrangements.#

#86% Agreement