

# Scottish Hip Fracture Anaesthesia Recommendations (SHARE)

## Pre-Op

Early Anaesthetic Assessment

Risk Stratify; Nottingham Hip Score,  
4AT/Covid status

Discuss high risk cases  
with critical care team

RA: FIB/FNB - consider  
repeating if >8hrs

Pre-optimize in theatre as nec

Spinal or GA + FIB or FNB

## Intra-Op avoid ↓ BP

**Spinal Anaesthesia;** 10mg - less ↓BP

Avoid long acting spinal opioids

Minimal or no sedation

**GA** - consider depth of  
anaesthesia monitor

Tight BP control MAP > 70 mmHg

**vasopressor\*** infusion

15 mg/kg Tranexamic Acid

**Analgesia:** FIB/FNB minimise opioids  
& avoid NSAIDS

## Post-Op

Prescribe IV fluids

Continue & wean **vasopressor\***

Point of Care Hb Check in Recovery -  
transfuse if < 90\*\*

Critical care for high risk cases

VTE prophylaxis >6h hrs post-op

Phone next of kin from recovery

\* phenylephrine or metaraminol

\*\* < 100 in ischaemic heart disease