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A Review of Efficacy and Patient Experience in Virtual Fracture Clinics in the UK

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Abstract

Background: The traditional face-to-face fracture clinic model, heavily dependent on diagnostic radiography, faces mounting pressures from increasing patient numbers and overstretched resources. In the UK, Virtual Fracture Clinics (VFCs) have emerged as a contemporary solution to these challenges, yet the extent of their impact on patient care and imaging service efficiency remains under-evidenced.

Method: A comprehensive analysis of VFC implementation was conducted, examining patient pathways, imaging requirements, and service user experiences across multiple UK/Irish healthcare sites. In this narrative review, a number of UK/Irish studies on the discussion of VFCs were screened for suitability with a 10-year publishing threshold, 12 papers were deemed appropriate for review. The investigation focused particularly on the role of diagnostic radiography in supporting virtual consultations and patient outcomes.

Results: Analysis of sources revealed significant benefits including a reduction in unnecessary radiographic examinations, with significant decreases in follow-up imaging. Patient satisfaction rates reached 97% for virtual consultations, while also demonstrating a 75% reduction in non-attendance rates. Key challenges identified in these studies included communication barriers for service users and the need for clear protocols in determining cases that would - or would not - be suitable for virtual management.

Conclusions: VFCs represent a potentially transformative approach to fracture management in the UK and Ireland, with the promise of significantly reducing radiography service pressures while maintaining high patient satisfaction. The findings of this study demonstrate that careful patient selection and imaging protocol optimisation are crucial for successful implementation, which would significantly benefit both service providers and users.