

After-Hours Patient Calls Following Total Joint Arthroplasty: A Retrospective Review

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INTRODUCTION: Early discharge after total joint arthroplasty (TJA) may place increased responsibility on care teams to manage postoperative concerns, especially outside clinic hours. Unresolved issues may lead to emergency department (ED) visits and/or readmissions. This study evaluated the frequency, reason for, and outcomes of after-hours patient phone calls within 30 days postoperatively and assessed how often these calls are documented in the electronic medical record (EMR).

METHODS:

After-hours calls from January to September 2024 following primary and revision TJA were retrospectively reviewed. Collected data included patient demographics, surgical characteristics, reasons for and outcomes of calls, and EMR documentation. Descriptive statistics, T-tests, and linear regression were used to identify patterns and predictors of patient calls and ED visits.

RESULTS: 520 after-hours calls were analyzed. Most callers were female (62%), age 60–79 (67%), college educated (77%) and had high health literacy (73%). Calls occurred most frequently on Friday (30%) and within 3 days postoperatively (30%). Total knee arthroplasty (TKA) patients were more likely to call than total hip arthroplasty (THA) patients (OR 1.48, CI 1.11-1.97). Common concerns included pain or swelling (19%), medication questions (17%), and other postoperative issues (21%). 55% of calls were resolved with advice or reassurance, and only 6% resulted in an ED visit. EMR documentation was found for 25% of calls. Calls regarding falls/injuries and those where an ED visit was recommended were significantly more likely to be documented ($p < 0.001$). No significant predictors for after-hours calls were identified on multivariate analysis.

DISCUSSION AND CONCLUSION: After-hours calls are common following TJA, primarily involving issues that can be managed over the phone and infrequently resulting in ED visits. Despite their clinical relevance, most calls are not documented, revealing a gap in communication. These findings demonstrate the need for systems to address patient concerns after clinic hours and improved documentation practices.