

Type of procedure	Often elderly and comorbid patients. May be very frail.
Key considerations	Assess frailty using the Clinical Frailty Scale. Check anticoagulation status, fasting time and level of care.
Perioperative notes	Consult ward physician and orthopedist in acute cases. Remember hip fracture pathway perioperatively.
Tips for the anesthesiologist	Adapt monitoring to procedure type. Consider positioning, pain control and PONV prophylaxis.
Recommended vascular access	Peripheral IV ×1–2 (18–20G). Arterial line if major procedure or ASA ≥3.