Introduction
Introduction: Osteoporosis is a progressive systemic skeletal disease, with a consequent increase in bone fragility and susceptibility to fracture. In Hong Kong, of every 1000 people who are aged 80 years or above, one man and two women may suffer from hip fracture each year. Hip fracture often resulting in impaired mobility, increased reliance on others, diminished health and sometimes death is a devastating injury for both patient and family. Increasing incidence of osteoporosis fractures, burden local health care system especially medical service demands and economic constraints. Fragility Fracture Nursing Clinic (FFNC) was established in December 2013 in UCH to meet to growing needs of patients with fragility hip fractures due to osteoporosis.

Objectives
Objectives: 1. To optimize care of fragility hip fracture patient 2. To provide continuity of care by close monitoring of fragility fracture hip patient's health progress and appropriate care management

Methodology
Methodology: FFNC is an initiative program jointed with Orthopaedic and Traumatology (O&T) Fragility Clinic every Monday afternoon session at UCH O&T SOPD. Since December 2013, it has already served over 100 hip fracture patients. The Clinic provides an extensive services: 1) medical consultation, 2) holistic nursing assessment on major physical, psychological and environmental risk factors of fall, 3)
caregiver education about changes on physical, mental, nutritional and functional status of hip fracture patients, 4) nursing consultation services on daily care, and 5) drug education and so forth.

**Result**
Results: From December 2013 to March 2014, 117 fragility hip fracture patients were recruited. Of them, 88 were females (73.5%) and 31 were males (26.5%). The mean age for female and male patients was 84.0 (55-108), and 82.9 years (69-95). 100% completed basic health assessment, 81.2% completed FRAX assessment and multifaceted health and lifestyle risk factor assessment. 111 patients (94.9%) hip fracture patients received anti-osteoporosis medications. All of them completed Falls Risk Assessment Tool (FRAT) and there was no repeated fall was reported by these patients. Conclusions: In each patient attendance, both O&T specialty nurse and O&T specialist jointly formulate the most suitable management plan. Patients and caregivers have a positive feedback of enhancing post operation education, assessing social support, promoting drug education and compliance. We target to achieve our services as a global practice framework in the future.