



# CAPTURE THE FRACTURE®

## ANNUAL REPORT 2025

Breaking the worldwide fragility fracture cycle

# FOREWORD



*Professor Nicholas Harvey*



*Professor Maria Luisa Brandi*

It is with great pride that we present the **first-ever Capture the Fracture® Annual Report**, marking an important milestone for our global movement to improve patient care and reduce spiralling fracture-related healthcare costs worldwide.

We are publishing this inaugural report to **demonstrate impact and document the accelerating global momentum** behind coordinated post-fracture care. More importantly, it reflects

our commitment to guiding healthcare systems in implementing their own Fracture Liaison Services (FLS) and provides a platform for the global exchange of existing projects and resources on FLS and local implementation strategies.

Osteoporosis remains **underdiagnosed and undertreated**, with the majority of fragility fracture patients still failing to receive appropriate assessment and treatment. Yet we know that the period following a first fracture represents a critical window for intervention. By implementing structured Post-Fracture Care Coordination Programs, such as FLS, healthcare systems can significantly reduce secondary fractures, improve patient outcomes, and lower long-term costs.

Throughout 2025, we have witnessed remarkable progress across regions, which was all thanks to our committed Capture the Fracture® governance members, mentors and our highly engaged FLS network.

In the **Asia Pacific** region, momentum has continued to build, with **significant growth** in the FLS network and increased engagement. Regional collaboration has strengthened knowledge exchange and implementation support, reflecting a growing recognition that fragility fractures represent a major and preventable public health burden.

**Across Europe**, increased **focus on quality standards** and benchmarking has supported the improvement of established FLS networks, as well as the motivation for the establishment of FLS in countries in which none were established. Specifically, in the **United Kingdom**, policy developments have reinforced the importance of systematic fracture prevention, with **continued integration of FLS within national service frameworks** and strengthened accountability for secondary prevention. These advances demonstrate how policy alignment can drive sustainable improvements in patient care.

Meanwhile, countries in the **Middle East** have expanded programmes into **structured national initiatives**, with strong national guidelines, demonstrating the adaptability of the FLS model across diverse healthcare systems.

In **Latin America**, 2025 has been marked by the development of the **Capture the Fracture®** dataset, a regional initiative to strengthen data collection and benchmarking across Fracture Liaison Services. This effort is helping to improve outcome measurement, support quality improvement, and **provide stronger evidence to inform policy and investment** in secondary fracture prevention.

Globally, in 2025, we have also seen important advances shaping the next phase of fracture prevention. There has been a **growing push towards quality improvement of care**, which was reflected in improved ratings of already-mapped FLS centres. The expansion of national and regional registries has strengthened data collection and outcomes measurement, supporting quality improvement and policy advocacy.

While significant gaps remain, the progress documented in this first Annual Report demonstrates that **change is underway**. Capture the Fracture® continues to serve as a catalyst, guiding implementation, fostering collaboration, and promoting excellence in secondary fracture prevention.

**A significant care gap persists** following fragility fractures: many patients are not systematically **risk-stratified or treated in accordance with established clinical guidelines**, leaving them at a high risk of subsequent fractures. Ensuring that patients are **consistently assessed and managed based on evidence-based recommendations remains a critical priority**.

**A first fragility fracture should never be the beginning of a fracture cascade**. Together, we are working to ensure it becomes the starting point for effective secondary fracture prevention.

We thank all healthcare professionals, coordinators, policymakers, and partners who are driving this progress forward. The journey continues — and this report marks just the beginning.

**Professor Nicholas Harvey**

*IOF President*

**Professor Maria Luisa Brandi**

*Capture the Fracture® Governance  
Chair & IOF Board Member*

# CAPTURE THE FRACTURE<sup>®</sup>

## A GLOBAL NETWORK OF FRACTURE LIAISON SERVICES

1'252

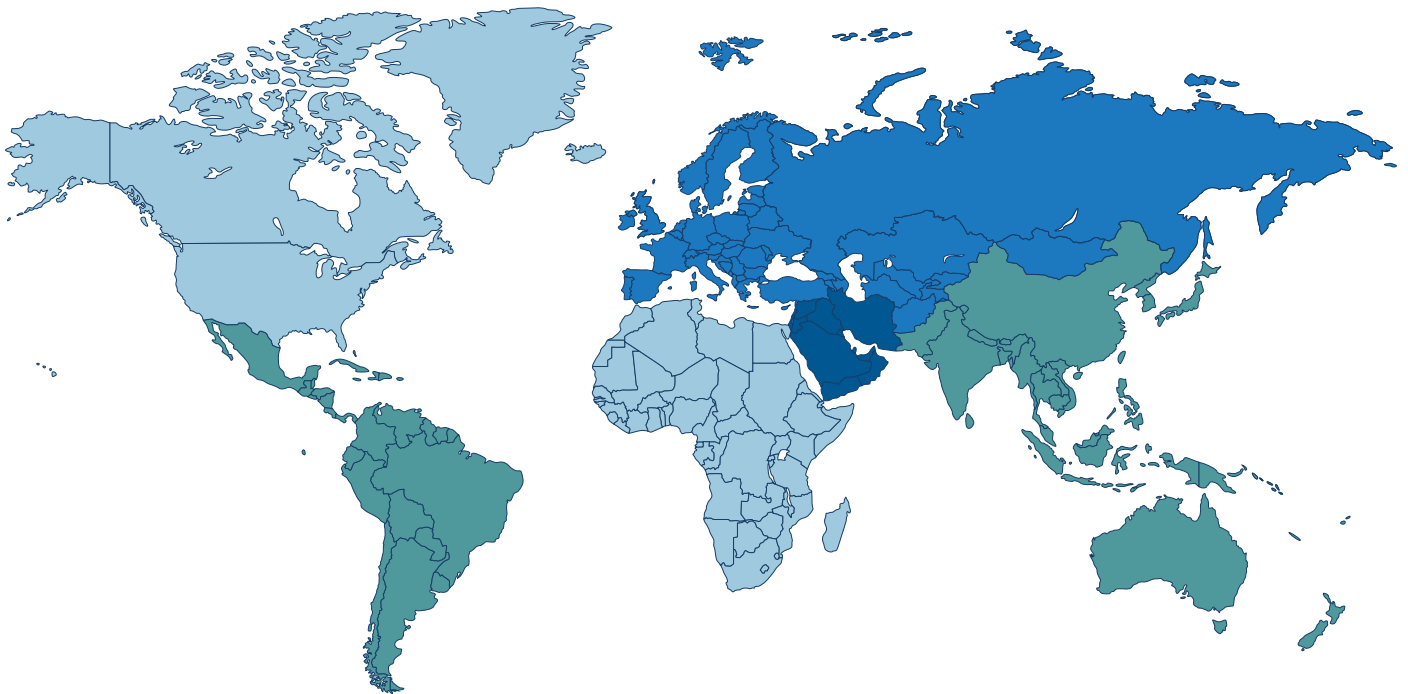
Fracture Liaison Services

915'167

Patients identified/year

62

Countries



26 Africa



457 Asia Pacific



26 Middle East



499 Europe



89 North America

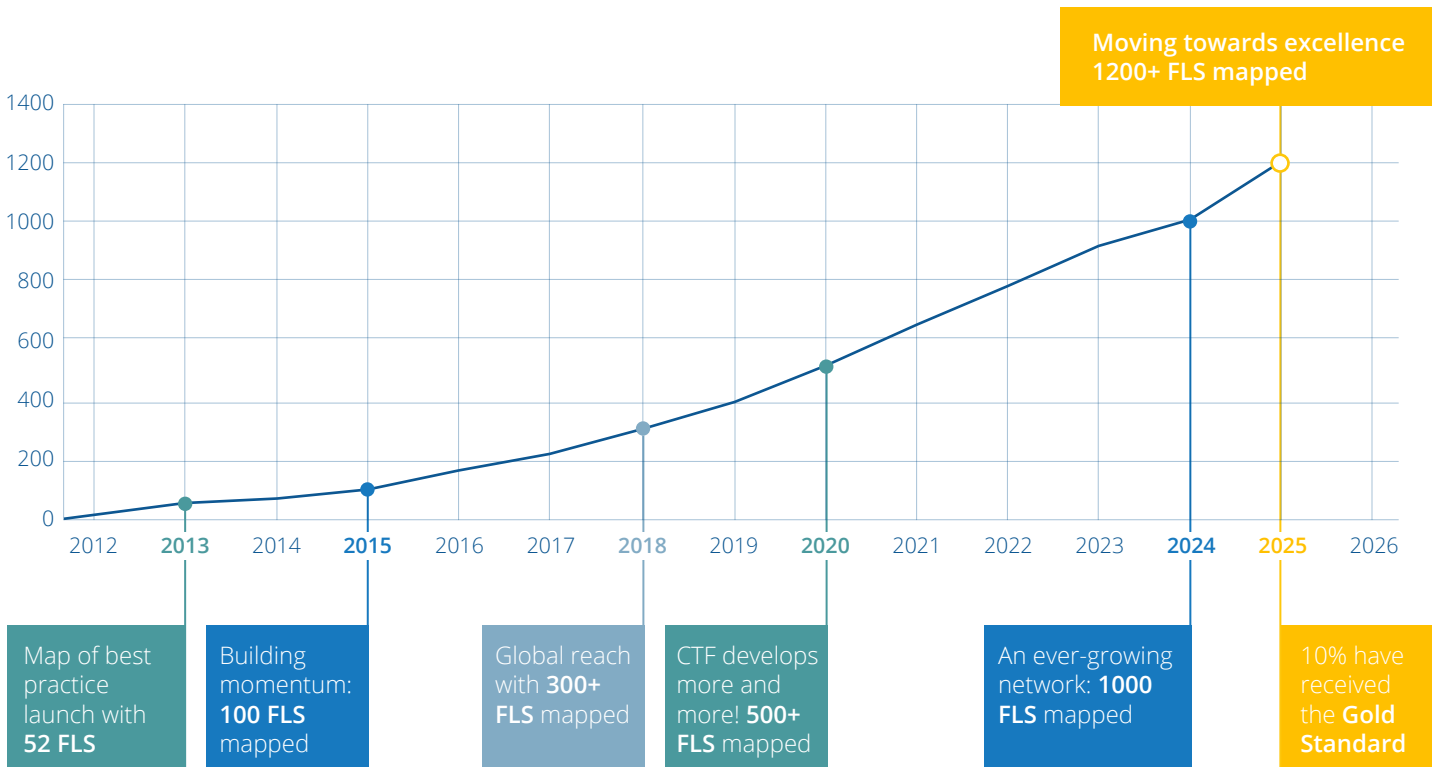


155 Latin America

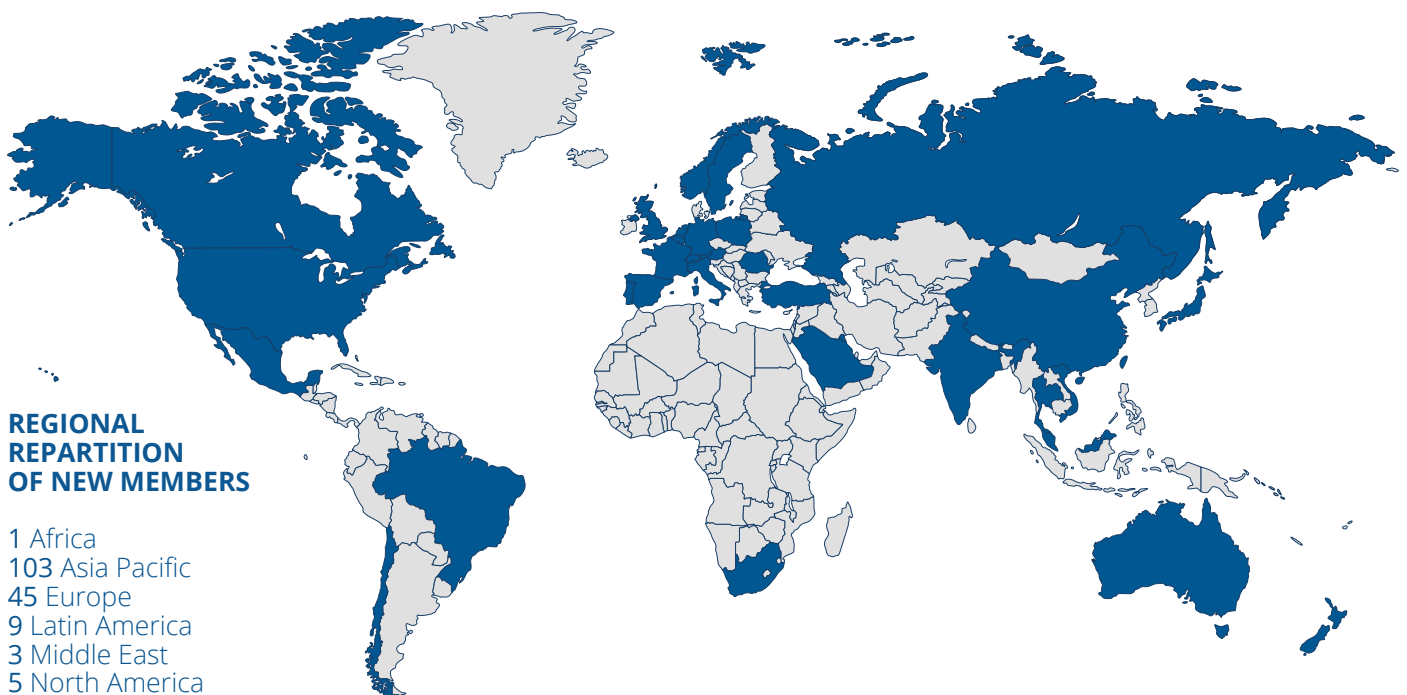


# CONTINUED MOMENTUM IN EXPANDING THE FLS NETWORK

Launched in 2012 with 50 FLS, the Capture the Fracture® network has grown tremendously over the years, reaching the milestone of **1000 FLS** in 2024.



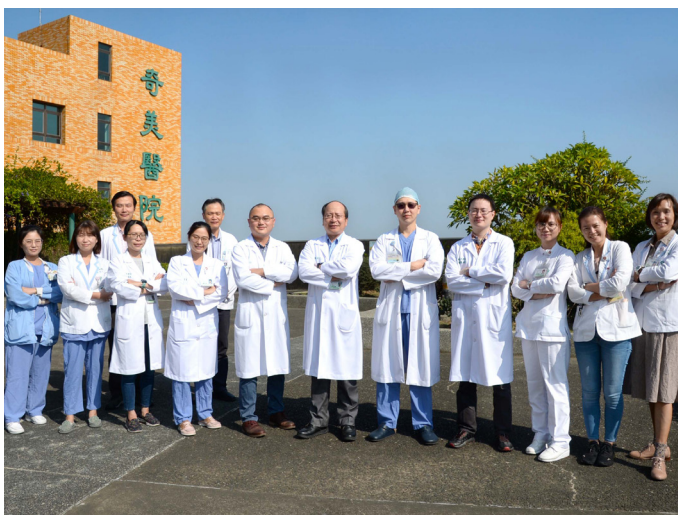
In 2025, Capture the Fracture® welcomed **166 FLS from 34 countries in the network.**



# FLS MOMENTUM IN ASIA PACIFIC AND THE RAPID GROWTH OF THE NETWORK IN THE REGION

2025 was marked by a **tremendous growth** of the FLS Network in **the Asia Pacific region**, notably in China and Japan. Since the launch of the Capture the Fracture® programme in 2012, the Asia Pacific region has played a significant role in the development of FLS, with a peak reached in 2025.

As of December 31<sup>st</sup>, 2025, 457 FLS were mapped in the region.

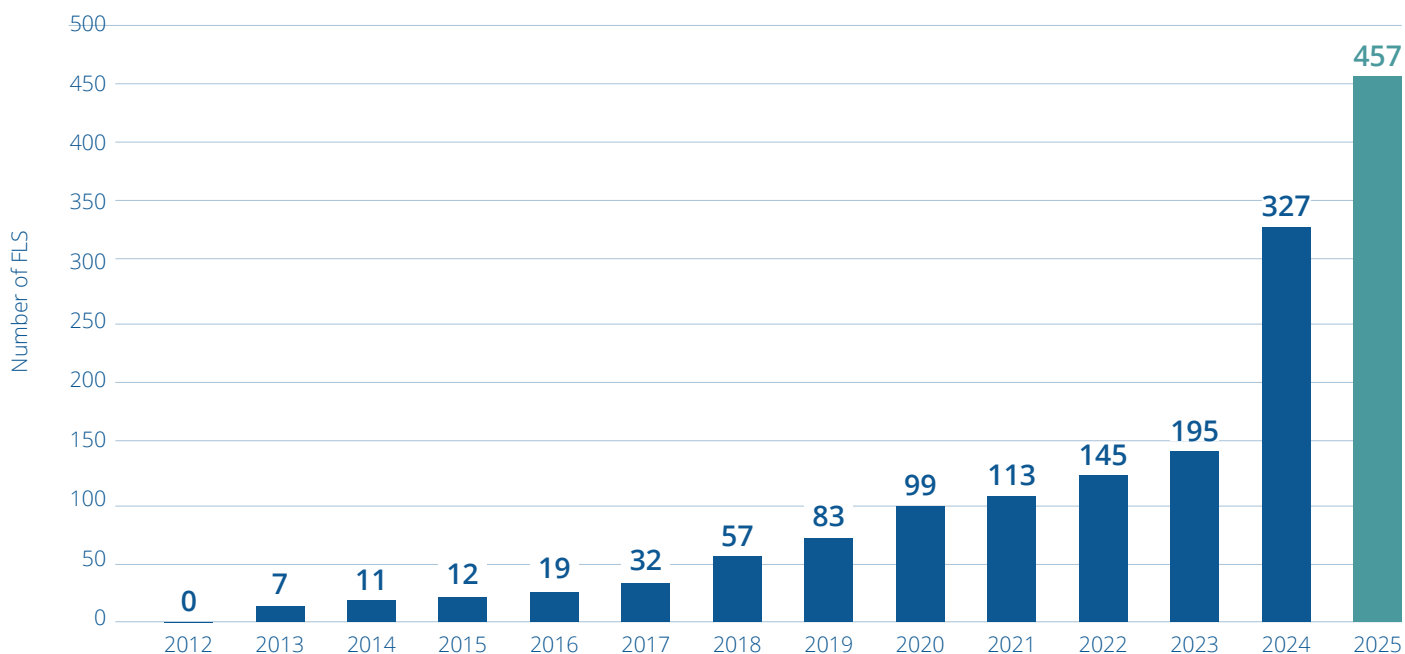


FLS of Chi-Mei Hospital  
*Liouying, Taiwan*



FLS of Hagashyamato Hospital  
*Tokyo, Japan*

## FLS GROWTH IN THE ASIA PACIFIC SINCE THE DEVELOPMENT OF THE CTF PROGRAMME



# 2025 MILESTONES AROUND THE WORLD

## COUNTRIES ACHIEVING 100 FLS MAPPED

In 2025, CTF was proud to welcome the 100<sup>th</sup> FLS from **China** and **Spain**, joining the **United Kingdom** and **Japan** as countries with 100 or more FLS within the network.

## NEW COUNTRIES IN THE NETWORK

CTF welcomed **2 new countries** to the Map – **Kuwait** and **Romania**, bringing the total number of countries to **62**. A warm welcome to Al Adan Hospital (Kuwait) and Reumadiagnostic (Romania).

## ADVANCES IN SERVICE QUALITY RATINGS

Two **notable milestones** were reached by the following FLSs in **South Africa and Vietnam**:



**Charlotte Maxeke Johannesburg General Hospital** was the first FLS to reach the **Silver** rating in South Africa.



**Thong Nat Hospital** was the first FLS to reach the **Gold** rating in Vietnam.

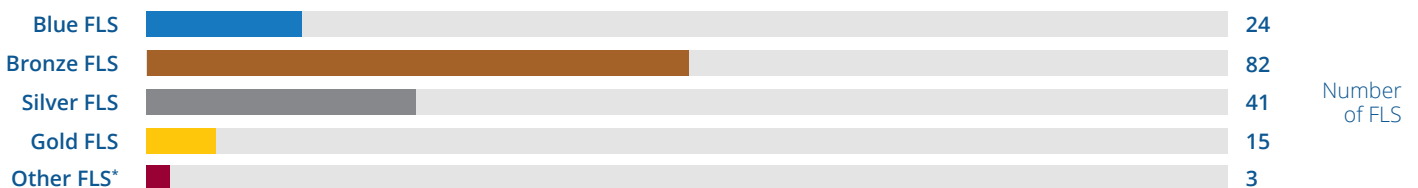
# THE CAPTURE THE FRACTURE® STARS

Each FLS mapped on the Capture the Fracture® Map of Best Practice receives a rating based on the evaluation of their Best Practice Framework Questionnaire by the CTF Governance Experts.

FLS are evaluated based on their performance for the standards expressed in the Best Practice Framework, and get an overall score. At the end of 2025, the network entailed **444 Bronze FLS, 261 Silver FLS, 230 Blue FLS, and 165 Gold FLS**.



Out of the **166 FLS** which **joined the network in 2025**, the following ratings were awarded by the CTF Governance.



\* FLS from Osteoporosis Canada and the Royal Osteoporosis Society (UK)

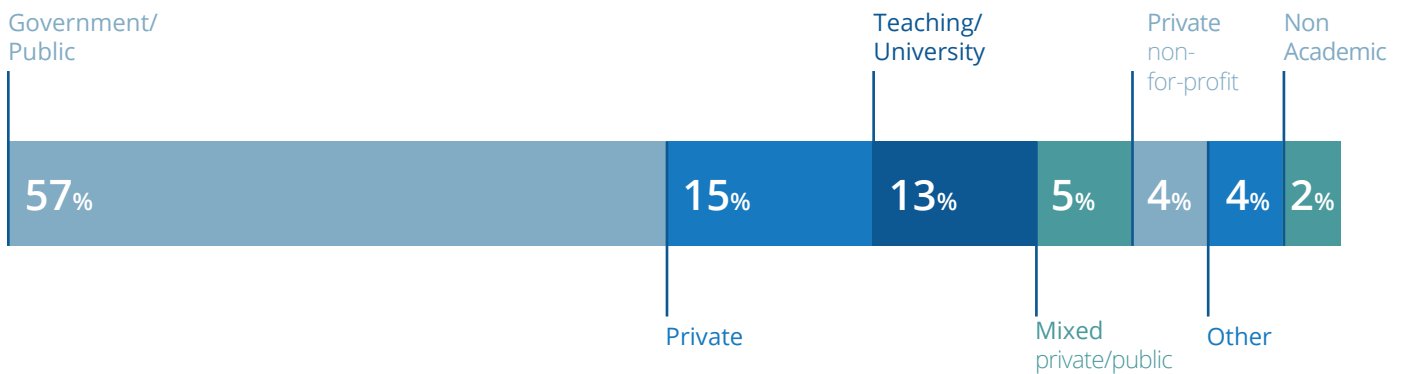
# KEY STATISTICS

## FROM THE 166 FLS JOINING THE NETWORK IN 2025

The Best Practice Framework Questionnaire not only audits the quality of services provided by FLS centres worldwide but also offers valuable insights into FLS joining the network.

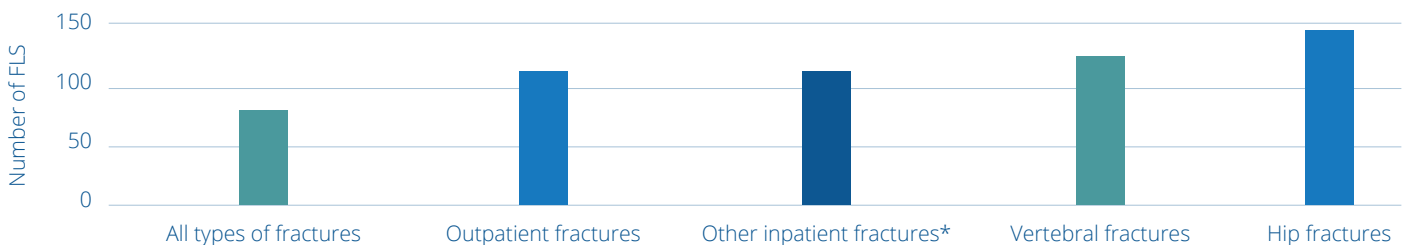
### FLS STRUCTURE

While most FLS joining the network in 2025 **operate within governmental or public structures**, centres from other sectors are also becoming part of the network.



### FRACTURES IDENTIFIED

The **median number of fragility fractures** identified by each of the 166 new FLS over a 12-month period was **433 patients**. This brought the total number of patients seen by FLS in the CTF network to **more than 900,000**.



\* "Other inpatient fractures" refers to non-hip, non-vertebral inpatient fractures

**Almost half (48%) of FLS joining the network in 2025 were able to identify all types of fractures within their FLS.**

In order to be able to identify all types of fractures, FLS need to be equipped with the right tools and technologies. Out of the 166 FLS joining the network, **79%** were able to use a DXA to identify fractures, and **64%** were offering **DXA-VFA** (Vertebral Fracture Assessment) scans.



## TREATMENT DECISION

Out of the 166 new FLS joining the network in 2025, **more than 193'000 patients** were **identified** by the FLS within the CTF network. Among those appropriately referred to an FLS, **75% were assessed and evaluated for treatment**.

Post-identification, patients with fractures need to receive a treatment decision within a timely timeframe to **reduce the risk of a subsequent fracture**. The BPF recommends post-fracture assessment for secondary fracture prevention to **occur within 8 weeks** of clinical fracture presentation.

In this regard, the 166 FLS that joined the network in 2025 demonstrated **exceptional performance**, with the **median time** from fracture identification to treatment decision averaging 5.7 weeks for hip and vertebral fractures, 5.8 weeks for other inpatient fractures, and 6.5 weeks for outpatient fractures.

## LONG-TERM FOLLOW-UP

A key responsibility of an FLS is to have a protocol in place to ensure long-term follow-up will take place, and clear guidance on when and with whom lies the responsibility for monitoring treatment adherence. This responsibility may lie with the FLS, be referred to the primary care physician/provider, or be managed through another means that suits the underlying health-care system. Based on the 166 FLS that joined the network in 2025, **96% of FLS offer long-term care management (159 FLS), and 28% of FLS conduct multiple follow-ups with patients over a 2-year timeframe (47 FLS)**.

Patients presenting with a fragility fracture and who are perceived to be at risk of further falls are evaluated within FLS to determine whether falls prevention intervention services are needed, and if so, are subsequently referred to an established falls prevention service. Almost all the FLS who recently joined the network, had the capacity to evaluate patients for fall risk (160 FLS).

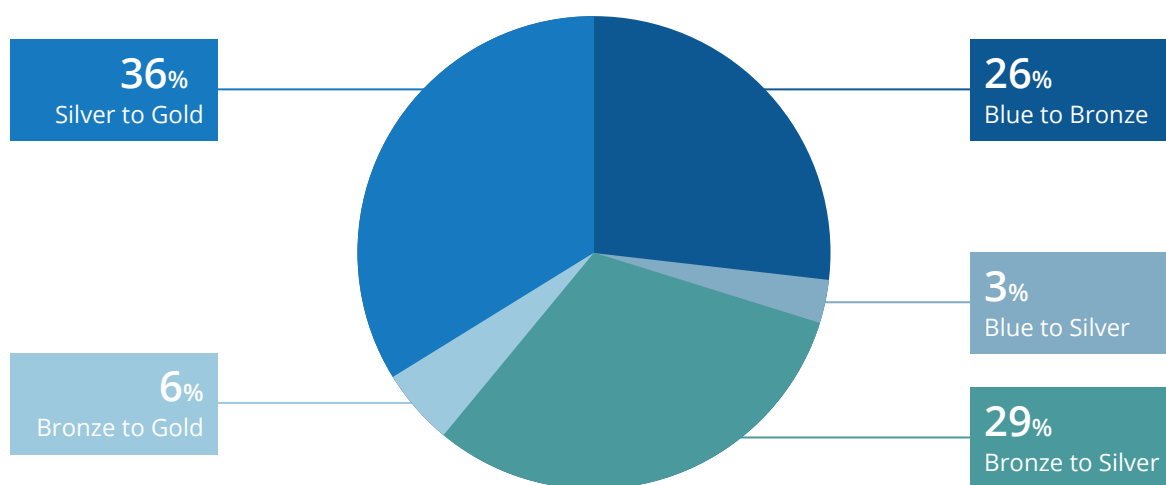
# THE CAPTURE THE FRACTURE® NETWORK

## THE ROAD TO GOLD

Each year, FLS are encouraged to resubmit their questionnaire to update their data and track improvements in care standards.

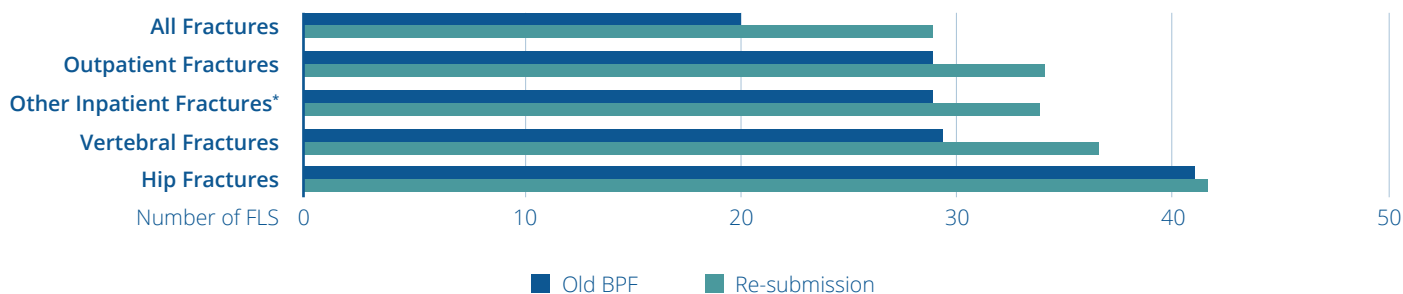
**As an FLS evolves, so does its rating on the CTF Map.** This is also the opportunity to receive a new, detailed audit of services, identifying further areas of improvement.

In 2025, **43 FLS re-submitted their BPF Questionnaire** to get an updated evaluation of their services. This resulted in **31 promotions**, as detailed below:



The re-submissions came from FLS in **14 countries**, notably from **Japan** (11 FLS), **China** (6 FLS), **Malaysia** (5 FLS), **New Zealand** (4 FLS) and **Spain** (4 FLS).

According to the data submitted by the 43 FLS, the **median number of fragility fractures identified** over a 12-month period **increased by 67%**. This reflects a rise from a median of **205 fractures** reported in previous questionnaires to a **median of 343 fractures** in the 2025 re-submissions.



\* "Other inpatient fractures" refers to non-hip, non-vertebral inpatient fractures.



Globally, the promoted FLS demonstrated **improvements in their ability to establish identification pathways** for fracture types that they previously did not capture. This is particularly evident among services that had struggled to identify all fracture types: prior to resubmission, only **45% had pathways** in place to identify every fracture type, compared with **65% following resubmission**.

Progress was also observed across other categories. The proportion of services with pathways to identify **outpatient fractures** increased from 65% to 77%, with a similar improvement seen for non-hip, non-vertebral inpatient fractures (65% to 77%). Notable gains were observed in **vertebral fracture identification**, rising from 67% to 84%. Finally, all 43 FLS have established pathways for hip fracture identification following resubmission.

When it comes to initiating treatment, FLS have experienced a **notable reduction in the time required to reach a treatment decision post-fracture assessment**. This was especially significant for **non-hip, non-vertebral inpatient fractures** (from 6.2 weeks down to 5.2 weeks), and for **outpatient fractures** (from 8.4 weeks down to 6.7 weeks). This demonstrates that enhancing the quality of care leads to quicker treatment initiation for patients.

Additionally, there has been a **significant increase** in the number of FLS providing **multiple follow-ups** with patients over a 2-year timeframe, with **56%** of the relevant FLS offering such follow-ups compared to only 33% initially.

## 27 FLS REACHED THE GOLD STANDARD IN 2025

Out of the **209 BPF questionnaires received in 2025** (166 new BPF Questionnaires and 43 resubmissions), **27 sites were awarded the highest standard of care, the Gold Standard.** This brought the number of Gold FLS in the network to **165**, i.e., roughly 13% of the network.

FRACTURE LIAISON SERVICE	COUNTRY	REGION
Policlínica Fiosaúde – Fiocruz	Brazil	LATAM
Hospital Unimed Bebedouro	Brazil	LATAM
JiangXi Provincial People’s Hospital	China	APAC
Yancheng No.1 People’s Hospital	China	APAC
The First Affiliated Hospital of Anhui Medical University	China	APAC
Huizhou Central People’s Hospital (惠州市中心人民医院)	China	APAC
Zhongshan Hospital of Traditional Chinese Medicin (中山市中医院)	China	APAC
Longhua Hospital Shanghai University of Traditional Chinese Medicine	China	APAC
The Second Affiliated Hospital of Hainan Medical University	China	APAC
Liwan District Orthopedics Hospital of Guangzhou (广州市荔湾区骨伤科医院)	China	APAC
Shanghai General Hospital	China	APAC
Peking University Shenzhen Hospital (北京大学深圳医院)	China	APAC
The First Affiliated Hospital of Jinan University (暨南大学附属第一医院)	China	APAC
The First Affiliated Hospital of Hainan Medical University	China	APAC
Shanghai University of Traditional Chinese Medicine Affiliated Shuguang Hospital	China	APAC
Second Hospital of Shanxi Medical University	China	APAC
Beijing Jishuitan Hospital	China	APAC
The Second Xiangya Hospital	China	APAC
Otaru General Hospital	Japan	APAC
Nagayama Hospital	Japan	APAC
Kapiti FLS	New Zealand	APAC
Southern FLS	New Zealand	APAC
Nelson Marlborough FLS	New Zealand	APAC
Tauranga FLS	New Zealand	APAC
Hospital Clínico Universitario de Valladolid	Spain	EU
Airedale General Hospital NHS Foundation Trust	United Kingdom	EU
Thong Nhat Hospital	Vietnam	APAC



## WHAT MAKES A GOLD FLS?

The key elements of Gold Standards FLS.



Identification and evaluation of all patients who have sustained all types of fractures, including hip, wrist, and vertebral fractures



Assessment within 8 weeks of fracture



Assessment of clinical vertebral fractures as well as opportunistic fractures through radiology



Assessment and treatment reflecting national peer-reviewed guidelines



Multifaceted lifestyle risk factor assessment and investigation into secondary causes of osteoporosis



Falls prevention services



Initiation and review of anti-osteoporosis medication



Communication of assessment and treatment recommendations with primary and secondary care



Follow up with patients within the 1st year and long-term follow up after 1 year



Inclusion of fracture statistics into national fracture databases

LEARN MORE ABOUT CAPTURE THE FRACTURE<sup>®</sup>  
AND FRACTURE LIAISON SERVICES ON THE CTF WEBSITE



# THE CAPTURE THE FRACTURE® ACTIVITY HIGHLIGHTS IN 2025

## CAPTURE THE FRACTURE® BONECAST WEBINARS

As part of its mission to provide the FLS network with advanced knowledge and best-practice updates, the following Capture the Fracture® webinars were held:

TOPIC	SPEAKER	MODERATOR	DATE
Collaborating across departments: the impact of multidisciplinary team within an FLS	Prof. M. Chandran	T. Hough	June 12
The economic benefit of osteoporotic fracture prevention: Articulating the financial burden of disease to the powers that be	Prof. M. Hiligsmann	B. Beck	Sept 24
The nuts and bolts of setting up a fracture registry	C. Gill, A. Welch, H. Gill	Adjunct Prof. P. Mitchell	Dec 18

## THE CAPTURE THE FRACTURE® DATASET FOR LATIN AMERICA

Launched in early 2025, Fracture Liaison Service (FLS) Datasets are standardized list of variables designed to facilitate information collection in FLS. They allow for **more standardized recording of demographic, clinical, and follow-up data on patients with fragility fractures**, in line with the 13 standards of the Capture the Fracture® (CTF) Best Practice Framework.

In Latin America, data collection was identified as one of the challenges faced by FLS centres. Including the need for standardized variables to facilitate data integration into different hospital systems. To address this need, IOF LATAM led a collaboration with local experts and FLS mentors from Argentina, Brazil, and the regional team to develop country-specific variable sets.

The development of the CTF Datasets marked a strategic advancement for CTF and a crucial first step toward data standardization in the region.

READ MORE AND  
DOWNLOAD THE TOOL





Public education event  
*Singapore*

## WORLD OSTEOPOROSIS DAY

FLS teams around the world contributed to the 2025 World Osteoporosis Day campaign. Their collective efforts helped raise awareness about osteoporosis, highlighting the importance of bone health and fracture prevention.

Events organized by FLS teams took place across 17 countries, engaging communities and healthcare professionals alike. Each event played a key role in inspiring action toward better bone care worldwide.

## CAPTURE THE FRACTURE® AT THE WORLD CONGRESS

The WCO-IOF-ESCEO 2025, the largest scientific and medical event in the bone field, took place in Rome from April 10-13, 2025, attracting 8667 participants. A dedicated Capture the Fracture® booth offered the opportunity for interested delegates to speak with CTF coordinators and to learn about the BPF application process.

The Congress also featured two one-hour Non-Sponsored Symposia dedicated to CTF and FLS development. These included: 'The evolution of post fracture care services in LATAM pre and post CTF mentorship programme', and 'Implementing and maintaining FLS services: (painful) Lessons learned from working with resource constraints and attempting to overcome hurdles'.

## CAPTURE THE FRACTURE® COMMUNITIES OF PRACTICE EVENTS



Participants during the CTF workshop  
*Tokyo, Japan*

With the establishment of national Communities of Practice, the Capture the Fracture® programme aims to foster best-practice and experience sharing between FLS in the country.

In Spain, the first meeting of the Community of Practice was held in November 2025. One key point of discussion was the unification of patient journeys between the orthogeriatric and the bone metabolism models of care, and how they could both improve their services to reach FLS excellence, notably through the identification of all types of fractures, which remains a challenge in the country. Strong emphasis was placed on the importance of having a multidisciplinary team.

In Japan, a Capture the Fracture® Workshop, gathering 70+ representatives of Japanese FLS, was held ahead of the 9th Asia Pacific Bone Health Conference in Tokyo in December 2025. The Workshop's collaborative atmosphere and strong engagement highlighted the growing momentum to harmonize and strive for continued improvements in OLS/FLS. It reflected the shared commitment to advancing OLS/FLS services and improving patient outcomes nationwide.

# HIGHLIGHTS FROM FLS ACROSS THE NETWORK



## **INTEGRATING COMMUNITY EDUCATION WITH CLINICAL CARE: THE EXAMPLE OF THE LONDRINA FLS IN BRAZIL**

The University Hospital of Londrina in Brazil has launched a new Fracture Liaison Service (FLS) to improve care for people over 50 with fragility fractures. Operating since 2024 and formally inaugurated in 2025, the service integrates multidisciplinary clinical management with community outreach initiatives, such as educational activities for older adults, including bone health awareness sessions, fracture risk assessments using FRAX Brazil 2.0, and fall-prevention guidance. The aim was to promote early detection and reduce future fractures.



## **LAUNCH OF STRONGER TOGETHER: A COLLABORATIVE STRATEGY FOR BONE HEALTH IN NEW ZEALAND**

The strategy sets out a bold national roadmap of seven objectives to prevent fragility fractures and promote bone health. It calls for long-term cooperation between government, healthcare providers, professional bodies, advocacy groups, and communities – combining clinical excellence with education, awareness, and workforce development. Endorsed by the International Osteoporosis Foundation and other global partners, Stronger Together acts as both a national plan and global inspiration.



## **SHAPING THE FUTURE OF OSTEOPOROSIS CARE IN THE GULF COUNTRIES: QATAR & SAUDI ARABIA'S NEW GUIDELINES**

Qatar and Saudi Arabia are strengthening osteoporosis care through updated national guidelines. Qatar's recommendations emphasize improved fracture risk assessment, age-specific treatment thresholds, and earlier use of anabolic therapies for high-risk patients. Saudi Arabia's updated guidelines introduce a country-specific FRAX model and highlight the role of Fracture Liaison Services to improve secondary fracture prevention and standardize care nationwide.



## **FRACTURK DATABASE: A NATIONAL INITIATIVE FOR STANDARDISING OSTEOPOROSIS CARE IN TÜRKIYE**

This national initiative aims to standardize osteoporosis care by coordinating Fracture Liaison Services across the country and improving treatment protocols.

The database integrates patient demographics, clinical histories, diagnostic data, and follow-up information, providing a comprehensive system for managing osteoporosis and related fractures.



## THAILAND'S INITIATIVE TO PREVENT FALLS AND FRACTURES IN THE ELDERLY

As Thailand's elderly population is set to reach 40% by 2028, a new multistakeholder initiative will play a crucial role in safeguarding public health.

The important and innovative national initiative to prevent falls and fractures among older adults integrates surveillance, prevention, and management strategies, leveraging technology and data to reduce morbidity and healthcare costs.



## ITALY LAUNCHES NATIONAL REGISTRY OF FRAGILITY FRACTURES

This groundbreaking initiative, developed in collaboration with the Istituto Superiore di Sanità, aims to enhance the prevention and management of osteoporosis in Italy. The registry represents a significant step forward in the fight against a disease that affects approximately five million Italians, with an increasing impact due to the ageing of the population.

# FRACTUREFOCUS

CONNECTING KNOWLEDGE FOR BETTER FRACTURE LIAISON SERVICES

An interactive CTF quarterly e-magazine with all the latest network news, interviews, resources for your FLS, and much more! **READ LATEST ISSUE.**



**3900+ READERS IN 2025!**



# CONCLUSION



*Dr Philippe Halbout*

The progress highlighted in this first Capture the Fracture® Annual Report showcases the **impact of global collaboration in fostering post-fracture care**. What began as a visionary initiative has grown into a truly global network dedicated to identifying, treating, and monitoring patients after fragility fractures, preventing the devastating cascade of subsequent fractures.

In 2025, the continued expansion of the Capture the Fracture® network, the strengthening of quality standards, and the growing number of Fracture Liaison Services achieving higher performance ratings send a clear message: **the Fracture Liaison Service models are the most cost-effective in preventing secondary fractures**. Behind these achievements are dedicated healthcare professionals, national champions, partners, and policymakers who are committed to improving the lives of people living with osteoporosis.

However, the work is far from over. Despite the progress described in this report, a significant number of fragility fracture patients worldwide still do not receive appropriate secondary fracture prevention. **Closing this care gap remains a top priority for bone health.**

The International Osteoporosis Foundation remains fully committed to supporting countries, healthcare systems, and clinicians in establishing and strengthening Fracture Liaison Services. Through Capture the Fracture®. We will continue to provide the necessary tools, guidance, and global platform needed to advocate for the highest quality of care in secondary fracture prevention.

**Together, we are moving closer to a future without fragility fractures, in which healthy mobility is a reality for all.**

**Dr Philippe Halbout**

*Chief Executive Officer  
International Osteoporosis Foundation*



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## ABOUT CAPTURE THE FRACTURE®

Fragility fractures represent a **major global health challenge** requiring urgent and coordinated action across healthcare systems. After an initial fracture, the risk of subsequent fractures doubles, particularly within the first two years. However, despite clear evidence that early diagnosis and treatment can significantly reduce further fractures and healthcare costs, **up to 80% of patients remain unscreened and untreated for osteoporosis, which is often the underlying cause.**

Worldwide, fragility fractures affect 1 in 3 women and 1 in 5 men over 50, occurring approximately every three seconds. The most common sites are the hip, spine, and wrist, with risk increasing with age. Hip and vertebral fractures are especially serious: vertebral fractures can cause chronic pain, deformity, and loss of height, while hip fractures often require surgery and may lead to loss of independence or death.

To address this gap in care, the International Osteoporosis Foundation launched the **Capture the Fracture® programme** in 2012, promoting Post-Fracture Care (PFC) Coordination Programs such as Fracture Liaison Services (FLS). These multidisciplinary programs ensure patients are assessed and treated after a fracture, reducing recurrence and costs. By coordinating care across specialities, **FLS are proven to be the most effective strategy for improving patient outcomes and preventing secondary fractures worldwide.**

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