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Hip precautions on discharge following hemiarthroplasty for neck of femur fractures: Survey

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Hip precautions are currently practiced in three-quarters of trauma hospitals in the UK, despite national recommendations from the 'Blue Book' not stating it as a requirement. Valuable therapist time is utilized alongside the need for specialized equipment, which can potentially delay discharge whilst it is being arranged.

Aim: To explore the current practice of the use of hip precautions on discharge following hemiarthroplasty for hip fractures. To also explore whether they are necessary and identify areas for improvement to benefit patient care overall.

Methods: An online survey was distributed to various Trauma and Orthopaedic Departments across the UK. The survey was available over 4 months, collecting 55 responses overall.

Results: The majority of responses were from trauma and orthopaedic consultants who were aware of the 'Blue Book' recommendations. The majority of trusts who responded did not practice hip precautions and did not feel this increased the risk of dislocations on discharge. Recommendations included the integration of hip precautions in the post-op advice in coordination with the physiotherapist and information leaflets on discharge regarding hip precautions.

Results: Hip precautions are not commonly practiced, for reasons including patient compliance and the inherently stable procedure of a hemiarthroplasty compared to a THR, reducing the need for hip precautions.

Conclusion: Hip precautions are not widely regarded as a useful practice for post-hip hemiarthroplasty, viewed as utilizing resources and increasing costs and risk due to increased hospital stay. Thus, this potentially delays discharge overall. A consistent approach should be implemented in treating patients post-hip hemiarthroplasty.

Recent Publications

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