



## Procedure Information Sheet

### Introduction

Majority of the patient suffering from hip fracture will have pain in their hip, affecting the daily activities. Sometimes operation is performed to enhance rehabilitation, prevent prolonged immobilization and complication such as pneumonia and bedsore. In view of the different types of fracture, doctor will use screws, plates or arthroplasty to fix the fracture.

### The Operation / Procedure

1. Operation is done under general anesthesia or spinal anesthesia.
2. Depends on the type of fracture, doctor will use screws, plates or arthroplasty to fix the fracture.
3. At the end of the procedure, drain(s) may be inserted for drainage of haematoma.

### Before the Operation / Procedure

1. A written consent form is required.
2. Before procedure, please fast for 6 - 8 hours, pre-operative enema may be required.
3. Inform doctors about drug allergy, your regular medications or other medical conditions.
4. Body check up as doctor's order will be done before operation, eg. blood tests, urine routine, ECG and X-ray.
5. Take nutritious diet, especially high in protein and carbohydrate if not contraindicated.
6. Practice deep breathing and coughing exercises and non-affected limb exercises.

### After the Operation / Procedure

1. Close observation of vital signs.
2. Resume diet according to doctor's advice.
3. Wound pain can be minimized by taking analgesic according to doctor's order and gently handling of the operated limb.
4. Keep wound clean and dry, drain to be removed according to doctor's order.
5. According to doctor's advices, wound stitches will be removed around 2 weeks after the operation.
6. The operated limb may be elevated with pillow, or positioned with an 'abduction pillow' and subsequently with a 'suspension sling' to prevent hip dislocation and to facilitate limb exercise.
7. During the initial period, patient should not ambulate or walk on his/her own without medical staff's supervision. If condition is stable, medical staff or physiotherapists will start ambulating the patient.
8. In order to prevent hip dislocation, patient should avoid hip flexion more than 90°, eg. do not sit with the hip flexed more than 90°. No hip adduction, eg. do not cross leg, and no rotation of the hip.

### Risk and Complication

1. Wound infection.
2. Hip dislocation.
3. Implant displacement.
4. Limb swelling.
5. Limb length discrepancy.
6. Deep vein thrombosis.
7. Neurovascular injury.
8. Consult anesthetist for the risks of anesthesia.

### Disclaimer

This leaflet only provides general information pertaining to this operation / procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

### Reference

Foster, K. W., Eiff, P. et al. (2020). Overview of common hip fractures in adults Retrieved on 8/6/2020 from <https://www.uptodate.com/contents/overview-of-common-hip-fractures-in-adults>

<p><b>Patient's Label</b>          Patient Name: _____          Hospital No: _____          Episode No: _____</p>
---

Patient's Signature: \_\_\_\_\_ Date: \_\_\_\_\_