

Hip Fracture history taking

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- Patient's Profile
- Admitted via the Emergency Department c/o
- Groin pain (R or L) on
- The patient was doing well till he slipped, tripped had a fall
- The time between the fracture and the presentation to the Emergency department

- Mechanical vs medical cause for the fall

Remembers the details

Associated symptoms

Witness

- Ability to bear weight after the fall
 - Visual score of the pain
 - gross deformity
- relieving factors and aggravating factors

- Method of transfer to the hospital (stretcher vs normal car)
- Baseline walking ability of the patient

- Risk factors for recurrent falls (poor vision, imbalance, parkinsonism, major lower limb OA.....)
- Risk factors for hip fractures
 - contralateral hip fracture
 - osteoporosis
 - loss of reflexes

- Risks of mortality
- Comorbidities (each increases the mortality by 20% of the odds)
- Dementia
- Renal failure

Review of systems

- Detailed for every system

Drug history

- Detailed

Past Medical and Surgical History

Social history

- Where does he/she live (what floor, lift availability, stairs inside the house)
- Toilet availability
- Who does live with the patient

Physical Exam

- Conscious oriented
- **VITAL SIGNS**

Detailed exam from head to toe

Local exam

- Dressing or wound site or size , clean or soaked, condition of surrounding skin, deformity, movement , ability to walk
- Distal pulses and capillary refill
- Distal power of the lower limb

Hip flexion –L2

Knee extension -L3

Ankle dorsiflexion L4

Toes Extension L5

Toes and Ankle Plantar flexion S1

DVT examination

- Swelling redness hotness
- Evidence of superficial thrombophlebitis
- Calf circumference
- **Change in consistency of the calf muscle (most sensitive)**
- Tender calf or thigh
- Howman's test (Not to be done due to the risk of PE)

Assessment

- A.... Year old, male or female patient admitted via the Emergency Department as a case of
- R/L intertrochanteric or neck of femur fracture
- The patient under wentsurgery on This is theth day post op

- The patient has the following problems :
- - Pain post op at the fracture site , the patient on regular analgesia (perfalgan and narcotics)
- Unable to walk, On regular visits by the physiotherapist to mobilize the patient with walker and single person assistance

- Thank you