

## CLINIC PREFERENCES

**NEW PATIENTS:** HEIGHT, WEIGHT, BMI, TEMP FOR ALL

### **XRAY ORDERS:**

HIP PATIENTS *OLDER THAN 45*:

***AP pelvis with templating markers***

***Lateral hip***

HIP PATIENTS *YOUNGER THAN 45*:

***Young hip series includes views:***

***AP pelvis***

***Lateral hip Dunn view***

***False Profile View***

ALL KNEE PATIENTS (ALWAYS GET COMPARISON KNEE):

***Bilateral AP weight bearing***

***AP tunnel view***

***Lateral view***

***Skyline view***

### **6 WEEK POSTOP PATIENTS:**

- GET XRAYS IF PAIN SCORE IS GREATER THAN 7/10 OR IF THEY HAVE FALLEN/TRAUMA.
- TEMPERATURE

### **2 WEEK HIP SCOPE POSTOP PATIENTS:**

- NO XRAYS UNLESS THEY'VE FALLEN/TRAUMA.
- SUTURE REMOVAL. IF INCISION IS QUESTIONABLE, HAVE DR. AGGARWAL LOOK FIRST.

### **INJECTIONS:**

- KNEE: 0.25% BUPIVACAINE 4CC, 1% LIDOCAINE 4CC, 40 KENALOG 2 CC. 10 CC SYRINGE, 21 GA NEEDLE, 4X4, SIZE 8 GLOVE, CHLORAPREP, COLD SPRAY, BANDAID.
- HIP BURSA INJECTION: 0.25% BUPIVACAINE 4CC, 1% LIDOCAINE 4CC, 40 KENALOG 2 CC. 10 CC SYRINGE, 18 GA SPINAL NEEDLE, 4X4, SIZE 8 GLOVE, CHLORAPREP, COLD SPRAY, BANDAID.
- HIP JOINT STEROID INJECTION:  
REFERRAL TO NON-OP SPORTS **OR**  
ORDER THROUGH RADIOLOGY

**ASPIRATIONS:**

- KNEE: 30CC or 60CC SYRINGE, 18 GA NEEDLE, CHLORAPREP, SIZE 8 GLOVE, 4X4, 2X2, TEGADERM. ORDERS:
- HIP ASPIRATIONS: CULTURE AND CELL COUNT SAME AS ABOVE, EXCEPT ORDER FOR FUTURE VISIT.  
REFERRAL TO DR. TOEDEBUSCH *OR*  
ORDER THROUGH RADIOLOGY: