

NIPE 2016-2017 standards for Examination of the Hip at the 6 week check by GP.

Associated risk factors

The NHS NIPE Programme risk factors are:

- first degree family history of hip problems in early life, that is, baby's parents, or siblings who have had a hip problem that started as a baby or young child that needed treatment with a splint, harness or operation.
- breech presentation at or after 36 completed weeks of pregnancy, irrespective of presentation at delivery or mode of delivery, or
- breech presentation at delivery
- multiple birth: if any of the babies is breech presentation, all babies in this pregnancy should have an ultrasound examination within 6 weeks of age. The rationale for this advice is that if one of the babies meets the criteria of breech presentation, as described above, it may be difficult to accurately identify which baby was affected.

These risk factors should have been picked up at birth.

EXAMINATION PROCEDURE

Observation

- symmetry of leg length
- level of knees when hips and knees are both flexed
- symmetry of skin folds in the buttocks and posterior thighs when baby is in ventral suspension
- if legs can be fully abducted

Manipulation

Undertake both the Ortolani and Barlow manoeuvres on each hip separately.

- Ortolani manoeuvre is used to screen for a dislocated hip
- Barlow manoeuvre is used to screen for dislocatable hip

Screen negative

If no abnormality detected, transfer to Healthy Child Programme.

Parents should be advised to contact their midwife, GP or health visitor if they have concerns about their baby's hips. In particular they should observe for:

- a difference in the deep skin creases of the thighs between the two legs
- one leg cannot be moved out sideways as far as the other when changing the baby's nappy
- one leg seems to be longer than the other
- a click can be felt or heard in one or both hips
- one leg drags when their baby starts crawling
- their child walks with a limp or has a 'waddling' gait

Screen positive

- difference in leg length
- knees at different levels when hips and knees are bilaterally flexed
- difficulty in abducting the hip to 90 degrees
- palpable 'clunk' when undertaking either the Ortolani or Barlow manoeuvres

Screen positive following 6-8 week infant examination

A screen positive at 6-8 weeks should be referred directly to an orthopaedic surgeon for urgent expert opinion. Baby needs to be seen by 10 weeks of age.

Dr Claudia Chetcuti Ganado, Neonatal Consultant, Luton & Dunstable University Hospital