OPERATIVE NOTE FOR TOTAL HIP ARTHROPLASTY

ภาควิชาออร์โธปิดิกส์ โรงพยาบาลเชียงรายประชานุเคราะห์

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| Date of Operation……..……………………….. Time started ……………………. Time ended……………………….  Surgeon…………………………First Assistant……………………………… Second Assistant……………………………  Scrub Nurse…………..…………………………………Circulating Nurse……………………...……………………………….  Clinical Diagnosis: □Avascular necrosis of □Rt □ Lt Femoral Head. □…………………………………………...  Post-Operative Diagnosis:□Avascular necrosis of □Rt □ Lt Femoral Head.□…………………………………  Operative Procedure □Cementless □Hybrid □Rt □Lt Total Hip Arthroplasty.  Anesthesia…………………………………………………….Anesthetist………………………………………………………….  **Description of Operation**  **Position:** □ Lateral Decubitus □ ……………………………………..  **Incision:** □ Posterior Moore approach □ ……………………….  **Finding:** □ Avascular necrosis of □Rt □ Lt Femoral Head ……………………………..…………………………..  **Procedure:**   * Curve skin incision was done posterior to the lateral side of the greater trochanter and carry it proximally and distally. Dissection of the fascia lata and gluteal muscles was done. * Piriformis and short external rotators was incised, posterior hip capsule was incised in T-shape fashion and sutures were placed in the hip capsule. * Femoral neck was cut **…….mm**. from Lessor Trochanter and femoral head was removed. * □ Proper femoral head size was determined with a caliper**……….mm.** * Acetabulum was explored, ligamentum teres and all loose bodies were removed. * Acetabulum was gradually reamed until the proper sized was met and cementless acetabular **component size ……………** was inserted. **□ Press fit □ Line to Line** * □ Acetabular component was fixed **with ……… screws** * The Liner was placed into the cup using **□ neutral □ Elevated rim liner** * Femoral shaft was gradually reamed and broached until the proper size was met. * **□Cementless □Cemented femoral stem size ……………..** was trialed and inserted. in 15 degrees of anteversion. Cementation was done by **□ digital packing □ cement gun** using **cement □ with□ without antibiotic.** * **Femoral head size ……………. Neck length…………….. was inserted**. * Hip was reduced by traction and internal rotation. Stability was tested by 90 degrees of hip flexion and application of axial force. Telescoping test was done. * □ Repair posterior capsule and short external rotator to Greater Trochanter. * Drain was placed, and skin was closed by □Nylon □Staple.   Complication:□ None □ …………………………………………………………………………………………………  Tissue sent for pathology:□ Yes □ No  Estimate Blood Loss ……………….. ml Doctor’s signature………………………………………………………………..  Wound classification: :□ Clean □ Clean contaminated □ Contaminated □ Dirty |

