OPERATIVE NOTE FOR TOTAL HIP ARTHROPLASTY

ภาควิชาออร์โธปิดิกส์ โรงพยาบาลเชียงรายประชานุเคราะห์

|  |
| --- |
| 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 □ NoEstimate Blood Loss ……………….. ml Doctor’s signature………………………………………………………………..Wound classification: :□ Clean □ Clean contaminated □ Contaminated □ Dirty |

