**Hip Pain and Osteoarthritis – Referral Management**

* Physical Therapy Referral for evaluation or management of pain unresponsive to conservative measures such as rest and analgesics, loss of joint mobility with functional limitation, gait training with assistive devices, rehabilitation after hip replacement.
* Emergent evaluation or management of dislocation, fracture, osteonecrosis or infected hip joint (with Infectious Disease referral)
* Orthopedic Surgery Referral for evaluation or management of:
  + Hip pathology in a child as indicated by:
    - Asymmetry of thigh crease or abnormal hip joint on imaging,
    - Hip dislocation
    - Leg length discrepancy
    - Limited hip abduction or click on exam
    - Delayed walking, new limp or refusal to bear weight
  + Osteonecrosis or infected hip joint
  + Dislocation of prosthetic hip
  + Arthrocentesis needed
  + Failure of non-operative treatment including: analgesics, anti-inflammatory medications, weight loss, adequate trial of physical therapy, use of assistive devices.
  + Femoroacetabular impingement or labial tear
  + Prosthetic hip replacement or revision of previous hip replacement needed, as indicated by pain not controlled by conservative measures, decreasing range of motion and increasing functional limitation.
* Rheumatology Referral for evaluation or management of atypical presentation of osteoarthritis, ankylosing spondylitis or need for arthrocentesis.

**Reference**

MCG, Ambulatory Care, “Hip Pain and Osteoarthritis – Referral Management”, 23rd Edition, 2/26/2019.