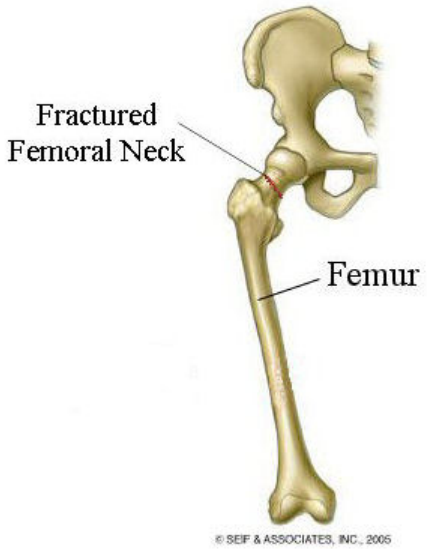
Hip Fracture (Upper Femoral Fracture)

You have a hip *fracture* (break in bone). This is a fracture of the upper part of the big bone (femur, thigh bone) between your hip and knee. If your caregiver feels it is a stable fracture, occasionally it can be treated without surgery. **Usually these fractures are unstable.** This means that the bones will not heal properly without surgery. Surgery is necessary to hold the bones together in a good position where they will heal well.



DIAGNOSIS (HOW TO TELL WHAT IS WRONG)

A physical exam can determine if a fracture has occurred. X-ray studies are needed to see what type of fracture is present and to look for other injuries. These studies will help your caregiver determine what the best treatment is for you. If there is more than one option, your caregiver can give you the information needed to help you decide on the treatment.

TREATMENT

The treatment for an unstable fracture is usually surgery. This means using a screw, nail, or rod to hold the bones in place.

RISKS & COMPLICATIONS: **All surgery is associated with risks.**

Sometimes the implant may fail. Other complications of surgery include infection or the bones not healing properly. Sometimes the fracture may damage the blood supply to the head of the femur. That portion of bone may die (osteonecrosis or avascular necrosis). Sometimes to avoid this complication, an implant is used which just replaces the ball of the femur (hemi-arthroplasty or prosthetic replacement). **Some of the other risks are**:

- Excessive bleeding.
- Infection.
- Dislocation if a hemi-arthroplasty or a total hip was inserted.
- Failure to heal properly resulting in an unstable hip.
- Stiffness of hip following repair.
- On occasion, blood may have to be replaced before or during the procedure

LET YOUR CAREGIVERS KNOW ABOUT THE FOLLOWING:

- Allergies.
- Medications taken including herbs, eye drops, over the counter medications, and creams.
- Use of steroids (by mouth or creams).
- History of bleeding or blood problems.
- History of serious infection.
- Previous problems with anesthetics or novocaine.
- Possibility of pregnancy, if this applies.
- History of blood clots (*thrombophlebitis*).
- Previous surgery.
- Other health problems.

BEFORE YOUR SURGERY

Before surgery, an IV (intravenous line connected to your vein) may be started. You will be given an *anesthetic* (medications and gas to make you sleep) or given medications in your back to make you numb from the waist down (spinal anesthetic).

AFTER YOUR SURGERY

After surgery, you will be taken to the recovery area where a nurse will watch your progress. You may have a *catheter* (a long, narrow, hollow tube) in your bladder that helps you pass your water. Once you're awake, stable, and taking fluids well, you will be returned to your room. You will receive physical therapy and other care until you are doing well and your caregiver feels it is safe for you to be transferred either to home or to an extended care facility. Your **activity level will change as your caregiver** determines what is best for you.

- You may resume normal diet and activities as directed or allowed.

- Change dressings if necessary or as directed.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- You may be placed on blood thinners for 4-6 weeks to prevent blood clots.

SEEK IMMEDIATE MEDICAL CARE IF YOU HAVE:

- Swelling of your calf or leg.
- Shortness of breath or chest pain.
- Redness, swelling, or increasing pain in the wound.
- Pus coming from wound.
- An unexplained oral temperature above 102° F (38.9° C), or as your caregiver suggests.
- A *foul* (bad) smell coming from the wound or dressing.
- A breaking open of the *wound* (edges not staying together) after sutures or staples have been removed.
- Marked increase in pain or shortening of the leg.
- Severe pain anywhere in the leg.
- Any change in color or temperature of your leg below the injury.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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