

Central Adelaide Orthopaedics – Hip & Knee Service

Clinical Information Sheet

Clinical Condition	Hip Bursitis (Trochanteric)
Eligibility	Dull, burning pain in the outer hip region Particularly sore to sleep on affected hip Tender to touch
Priority	Non-Urgent: Refer if non-responsive to treatment after 3 months and symptomatic
Differential Diagnoses	Osteoarthritis Fracture Gout Rheumatoid Arthritis Septic Arthritis Malignancy May be a reflection of spinal issues causing pain to radiate down
Information required with referral	History: <ul style="list-style-type: none"> • Duration of symptoms • Characteristics of pain – location, night pain, etc. • Response to treatment so far • Response to analgesia • Use of viscosupplementation (e.g. high dose fish oil) • Level of mobility - walking distance; walking aid • Function – ADLs • History of infective processes (e.g. poor dental hygiene, recurrent UTI's, etc.) • Brief medical history • Current medications – in-particular, blood thinning medication • Relevant psycho-social issues Exam: <ul style="list-style-type: none"> • Exclude back pathology as cause of pain • Confirm origin of pain is from hip Other medical and allied health practitioners the patient has seen concerning this problem.
Investigations required with referral	Ultrasound: from any diagnostic injections into the trochanteric bursa X-ray: AP Pelvis centred on pubis, AP hip (patella facing up), cross table lateral hip joint <i>Upon attendance to appointment, patient will be required to bring plain x-rays (views mentioned above) from within the previous 6 months to establish current bony structure.</i>
Pre-Referral management strategies (include with referral)	Consider ultrasound guided steroid injection Use of simple analgesia as tolerated including a regular paracetamol product (e.g. Panadol® Osteo) and oral NSAIDs if tolerated Consider hydrotherapy, swimming or cycling for a low-impact exercise alternative Use of viscosupplementation (e.g. high dose fish oil) Use of mobility aids (e.g. walking stick or crutches) Weight loss measures



Discharge Criteria/information	For discharge to GP if non-operative management to be pursued. Red flags that should trigger referral back for review: pain in affected joint no-longer managed non-operatively
Fact sheets	http://www.orthoanswer.org/hip/hip-bursitis/definition.html http://orthoinfo.aaos.org/topic.cfm?topic=A00409

For more information

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