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King's College Hospital
NHS Foundation Trust

Why does my baby need a hip scan?

Information for parents and carers

This leaflet explains the reasons why your baby has been referred for a hip scan. If you have any further questions or concerns, please do not hesitate to speak to the team caring for your child.

Confirming your child's identity

Before your child has a treatment or procedure, our staff will ask you their name and date of birth and check their ID band. If they do not have an ID band we will also ask you to confirm their address. If we do not ask these questions, then please ask us to check. Ensuring your child's safety is our primary concern.

Why does my baby need a hip scan?

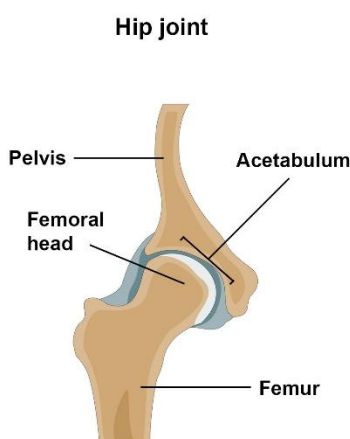
All babies born in the UK have their hips examined after birth as a part of the newborn and infant physical examination (NIPE). This is done to screen babies for developmental dysplasia of hips (DDH).

If the examination suspects your baby has a hip instability or there are risk factors for DDH, we recommend that your baby has a hip ultrasound scan. Most babies who have a hip scan are found to have normal hips. But for those who do not, it is important that this is identified early to ensure early diagnosis and management of DDH to prevent life-long hip complications.

What is developmental dysplasia of the hip (DDH)?

DDH is a condition where the ball and socket joint of the hip does not develop as expected in babies and young children. The hip socket (acetabulum) may be too shallow, or the ball (femoral head) may be too loose, leading to instability or even dislocation of the joint.

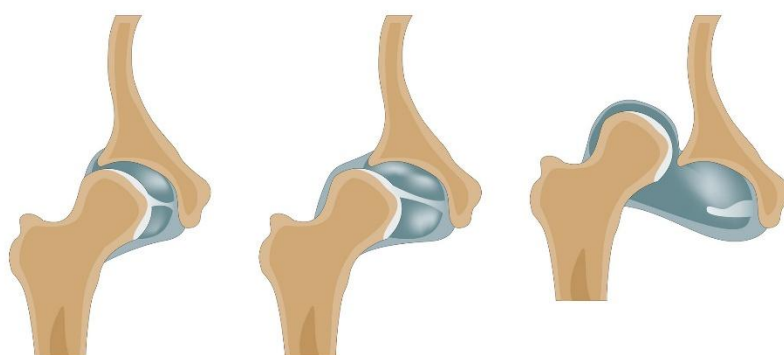
A normal hip joint



Normal

An abnormal hip joint

Developmental dysplasia of the hip (DDH)



Dysplasia

Subluxation

Dislocation

What may increase the likelihood of having DDH (risk factors)?

- A family history of DDH.
- Baby being born in the breech position (bottom or feet first, rather than the more common headfirst) after 28 weeks of pregnancy.
- Baby was in the breech position (bottom or feet first) in the uterus at or after 36 weeks regardless of position at birth.
- Baby is from a multiple pregnancy (for example, twins or triplets) and 1 or more of the babies had any of the above risk factors.

What does a hip examination involve?

During the newborn examination (NIPE), the hips are checked for instability. These tests are called Barlow and Ortolani tests. If any instability of the hip is noted on these tests, we highly recommend that a hip scan is undertaken to rule out DDH.

When will the scan happen?

If your baby has instability of the hips or any risk factors, an appointment for a hip ultrasound scan will be arranged based on the age of your baby at birth.

- If your baby was born at 34 weeks or later, they will have the scan when they are 4 to 6 weeks of age.
- If your baby was born earlier than 34 weeks, they will have the scan when they are between 38+0 and 40+0 weeks corrected age.

Corrected age is the age your baby would have been if your baby had been born on their due date. For example, if your baby was born at 28 weeks of pregnancy, they will have their scan when they are 10 to 12 weeks old.

Why is the scan done at these times?

During the first few weeks after birth, it is normal for your baby's hips to be loose, this is called physiological laxity. The time for this physiological laxity to resolve is around 4 to 6 weeks. Therefore, any scan done before this timeframe may give false positive results.

The ideal time to scan and diagnose DDH is 4 to 6 weeks after birth. It may be slightly later if your baby was born very early.

DDH needs to be treated initially using non-invasive treatment options before the bones in the hip joint start to harden. If DDH is not treated before the bones harden, it may need more invasive treatments. Therefore, it is essential that you bring your baby for the scan within this timeframe.

What will happen at the scan?

At your baby's scan, the specialist sonographer will ask you some questions about your baby and then they will perform the ultrasound scan.

The scan will not cause any pain or harm to your baby. A thin layer of ultrasound gel will be applied to your baby's hips, then a probe will be moved around the area to reveal an image of their hips on the screen.

It may be helpful if your baby is fed beforehand so that they are more settled. Your baby's clothing will need to be removed, but their nappy will remain on.

What are the possible outcomes after the scan?

- If your baby's hips are found to be normal on the scan – no follow-up will be needed.
- If your baby's hips are found to be immature, a repeat scan might be advised. The timing of the repeat scan will be discussed with you at the first appointment.
- If the scan shows unstable, shallow or dislocated hips suggesting DDH, a referral to the Orthopaedics team will be made.

What happens if my baby has DDH?

Early detection and treatment are important. Your baby will be referred to the Paediatric Orthopaedics team (children's doctors who specialises in bones) at King's College Hospital (Denmark Hill) and a member of the Paediatric team will discuss any treatment options with you.

For newborns and infants, the most common treatment is a Pavlik harness (a soft fabric splint or harness), which keeps the hip in a flexed and abducted position (away from the centre of the body) to encourage proper joint development. The splint is worn for several weeks to help keep the hips in a stable position. The orthopaedic team will discuss with you how to care for your baby while they are in the splint.

If not treated early, DDH can cause problems with movement such as limping, pain and stiffness to the hip and back, increasing the risk of osteoarthritis.

Before the appointment

Please let Radiology department know if you need an interpreter. If you need to reschedule the appointment, please call your radiology department.

- King's College Hospital Radiology: 020 3299 3059
- Princess Royal University Hospital Radiology: 01689 863 642

Further information

If you have any questions, please contact your Antenatal and Newborn Screening team:

- King's College Hospital: kch-tr.dh-maternitiescreening@nhs.net
- Princess Royal University Hospital: kch-tr.br-maternitiescreening@nhs.net

MyChart

Our MyChart app and website lets you securely access parts of your health record with us, giving you more control over your care. To sign up or for help, call us on 020 3299 4618 or email kings.mychart@nhs.net. Visit www.kch.nhs.uk/mychart to find out more.

Sharing your information

King's College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King's College Hospital and Guy's and St Thomas' NHS Foundation Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit www.kch.nhs.uk.

Care provided by students

We provide clinical training where our nursing students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

Tel: **020 3299 4618**

Email: kings.pals@nhs.net

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