

## N201 CLASS PREP: INFANT MUSCULOSKELAL

- Click on the link to watch a video on Developmental Dysplasia of the Hip (DDH)  
<https://youtu.be/whDkHL8xeao?si=ahb2FjK71SayB258>.
- Review pgs. 1467 – 1470 in your Maternal Child Nursing Care Book then complete the following questions:

1. What is developmental dysplasia of the hip (DDH) in babies?  
A condition occurring around the time of childbirth including a wide spectrum from severe form (complete dislocation where the hip is completely out of the socket) to mild form (hip is located in the socket but the socket is shallow).
2. How can doctors tell if a baby might have hip dysplasia?  
Ultrasound, joint laxity, subluxation and dislocation tendencies with Ortolani and Barlow tests, asymmetry of the lower extremities, decrease hip reduction.
3. Describe the Ortolani and Barlow's tests  
Ortolani: Abducting the thighs and placing anterior pressure at the hip to see if the femoral head slips forward into the acetabulum.  
  
Barlow: Thigh is abducted and light pressure is applied to see if the femoral head can be felt to slip out of the acetabulum.
4. How is hip dysplasia usually treated in infants?  
Nonsurgical - Goal (Ball deep into the socket and develop the socket as good as possible): Hip spica cast or Pavlik harness designed to correctly position the hip joint as it forms and solidifies.  
  
Surgical: Closed reduction (manipulation of the hip into the socket externally) or open reduction.
5. What are some nursing considerations related to the care of infant requiring the wear of a Pavlik harness or hip spica cast?
  - \* Do not adjust harness
  - \* Adequate skin care
  - \* Always place diaper under the straps
  - \* Nurture & hold the infant
  - \* Correct positioning for breastfeeding
  - \* Correct positioning into a car seat