

ORTHOPAEDICS	
Procedure/Condition	Criteria <span style="color: black;">■</span> Black – criteria required to be met prior to referral. <span style="color: blue;">■</span> Blue – criteria to be met prior to procedure
<b>Hip Resurfacing (Restricted)</b>	<p><b>Referring clinicians should follow the MSK clinical pathway for this condition when considering a referral to secondary care. Compliance with the pathway is required to support referrals.</b></p> <p>The CCGs will fund for those who otherwise qualify for primary total hip replacement, but are likely to outlive conventional primary hip replacements.</p> <p>Decision based on discussions with patient and clinician rather than scoring tools</p> <ul style="list-style-type: none"> <li>• The patient experiences joint symptoms (pain, stiffness and reduced function) that have a substantial impact on their quality of life and are refractory to non-surgical treatment</li> <li>• When discussing the possibility of joint surgery, check that the person has accessed the core treatments and give information about them: <ul style="list-style-type: none"> <li>▪ The benefits and risks of surgery and the potential consequences of not having surgery</li> <li>▪ Recovery and rehabilitation after surgery</li> <li>▪ How having a prosthesis might affect them</li> <li>▪ How care pathways are organised in their local area</li> </ul> </li> </ul> <p>NB: These discussions should be informed and guided by use of shared decision making tools</p>
<b>Secondary</b> ⇒	
<b>Secondary</b> ⇒	<p>Prostheses for total hip replacement and resurfacing arthroplasty are recommended as treatment options for people with end stage arthritis of the hip only if the prostheses have rates (or projected rates) of revision of 5% or less at 10 years.</p> <p><b>This procedure requires prior approval. Prior approval must be sought through Blueteq.</b></p>
<b>Base / Evidence</b>	
<b>OPCS code(s):</b>	<b>W581</b>

Version No	Date	Changes
3	Dec 2016	Updated following consultation and CPAG feedback in November 2016. Refers to primary hip replacement policy and to following relevant MSK pathway.
3.1	July 2017	Add section from hip replacement on core treatments and remove see hip replacement referral guidance
3.2	September 2019	Addition of 'This policy is subject to a prior approval' as requested by contracting.
3.3	November 2019	Removal of 'This policy is subject to a prior approval' and replaced with 'This procedure requires prior approval. Prior approval must be sought through Blueteq' as requested by contracting.