

HIP PAIN REFERRAL GUIDELINE

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HIGH RISK	MODERATE RISK	LOW RISK
SUGGESTED EMERGENT CONSULTATION	SUGGESTED CONSULTATION OR CO-MANAGEMENT	SUGGESTED ROUTINE CARE
SYMPTOMS AND LABS Severe pain Causes severe limp or inability to weight bear Severe clicking, popping, catching or locking Any history of radicular symptoms, loss of bowel/bladder control or severe abdominal pain	SYMPTOMS AND LABS Moderate pain Causing mild limp Moderate clicking, popping, catching or locking Increased groin, lateral or buttock pain Pain with activities of daily living including sitting, standing or driving	SYMPTOMS AND LABS Mild pain Able to walk without limp Increased pain with running, squatting or twisting activity Minimal clicking, popping, catching or locking
SUGGESTED PREVISIT WORKUP Schedule urgent appointment with sports medicine Seek appropriate evaluation if concern for spinal or abdominal concerns	SUGGESTED WORKUP Consider radiographs Schedule routine appointment with sports medicine	SUGGESTED MANAGEMENT Ibuprofen and/or acetaminophen as needed Ice, heat or other modalities to address pain Therapeutic exercise Activity modification, decrease deep squatting, twisting or impact activities

CLINICAL PEARLS

- Hip pain can be caused by a number of different pain generators both intra and extra articular
- Groin pain is usually indicative of an intra-articular hip pathology
- Lateral pain is usually indicative of an extra-articular hip pathology
- Low back pain or radicular symptoms can often coincide with hip pain or pathology
- Hip pain that does not resolve with rest or activity modification should be evaluated by a physician