Pediatric Hip Aspiration

1. Have the resident ultrasound the symptomatic hip joint and confirm that there is a joint effusion.
2. The resident should discuss with the ED when they will be ready to sedate the child.
3. The sonographer or resident will take a portable U/S machine to the ED.

Mskl Faculty
1. In the ED, place the transducer oblique longitudinal over the femoral neck and mark the skin entry site at the inferior aspect of the transducer.
2. Use a 22 g 1.5” or 3.5” needle to aspirate the fluid.
3. Send fluid for aerobic/anaerobic culture (black top tube) and cell count (lavendar tube).