

# Orthopedic Lower Extremity Interventions

Record ID

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Please tell us when this form will be filled out within the continuum of care, e.g., admission, pre-op, annual visit, etc.

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## Lower Extremity Orthopedic Intervention(s) Given

- Abductor Release
- Adductor Release (Open)
- Adductor Release (Percutaneous)
- Anterior Hemi-Epiphysodesis (Guided Growth)
- Anterior Release
- Arthrodesis
- Assessment of Hip Stability
- Botox Injection
- Calcaneal Lengthening Osteotomy
- Calcaneal Osteotomy to Correct Varus
- Capsulorrhaphy
- Chiari
- Cuboid Osteotomy/Decancellation
- Distal Femoral Extension Osteotomy (Fixation Type)
- Dorsal Bunion Correction
- Femoral Derotational Osteotomy (Diaphyseal)
- Femoral Derotational Osteotomy (Supracondylar)
- Femoral Head Resection (Base of Femoral Neck)
- First Metatarsal Extension Osteotomy
- First Metatarsal Plantar Flexion Osteotomy
- First Metatarsophalangeal Arthrodesis
- Flexor Tenotomies
- Gastrocnemius Lengthening (Baumann/Strayer)
- Gastrosoleus Lengthening (Baker/Vulpis)
- Hallux Valgus Correction
- Hip Arthroplasty
- Lateral Hamstring Lengthening
- Medial Cuneiform Extension Osteotomy
- Medial Cuneiform Flexion Osteotomy
- Medial Hamstring Lengthening (Open)
- Medial Hamstring Lengthening (Percutaneous)
- Metatarsal Osteotomies
- Obturator Neurectomy
- Open Reduction
- Patellar Tendon Distal Transfer
- Patellar Tendon Shortening
- Pelvic Osteotomy
- Plantar Fascia Release
- Posterior Capsular Release of the Knee
- Proximal Femoral Derotational Osteotomy
- Proximal Femoral Resection (Subtrochanteric)
- Psoas (Intramuscular) Over the Brim
- Rectus Femoris Release
- Rectus Femoris Transfer
- Semitendinosus Transfer to Adductor Magnus
- Shelf Osteotomy
- Shortening
- Soleus Aponeurotic Lengthening
- Split Tibialis Anterior Tendon Transfer
- Split Tibialis Posterior Tendon Transfer
- Tendo Achilles Lengthening (Percutaneous)
- Tibial Derotational Osteotomy
- Tibialis Posterior Tendon Advancement
- Valgus Osteotomy of Proximal Femur
- Varus Derotational Osteotomy of Proximal Femur
- None

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**Lower Extremity Interventions Side(s)**

	Left	Right
Abductor Release Side	<input type="checkbox"/>	<input type="checkbox"/>
Adductor Release (Open) Side	<input type="checkbox"/>	<input type="checkbox"/>
Adductor Release (Percutaneous) Side	<input type="checkbox"/>	<input type="checkbox"/>
Anterior Hemi-Epiphysodesis (Guided Growth) Side	<input type="checkbox"/>	<input type="checkbox"/>
Anterior Release Side	<input type="checkbox"/>	<input type="checkbox"/>
Arthrodesis Side	<input type="checkbox"/>	<input type="checkbox"/>
Assessment of Hip Stability Side	<input type="checkbox"/>	<input type="checkbox"/>
Botox Injection Side	<input type="checkbox"/>	<input type="checkbox"/>
Calcaneal Lengthening Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Calcaneal Osteotomy to Correct Varus Side	<input type="checkbox"/>	<input type="checkbox"/>
Capsulorrhaphy Side	<input type="checkbox"/>	<input type="checkbox"/>
Chiari Side	<input type="checkbox"/>	<input type="checkbox"/>
Cuboid Osteotomy/Decancellation Side	<input type="checkbox"/>	<input type="checkbox"/>
Distal Femoral Extension Osteotomy (Fixation Type) Side	<input type="checkbox"/>	<input type="checkbox"/>
Dorsal Bunion Correction Side	<input type="checkbox"/>	<input type="checkbox"/>
Femoral Derotational Osteotomy (Diaphyseal) Side	<input type="checkbox"/>	<input type="checkbox"/>
Femoral Derotational Osteotomy (Supracondylar) Side	<input type="checkbox"/>	<input type="checkbox"/>
Femoral Head Resection (Base of Femoral Neck) Side	<input type="checkbox"/>	<input type="checkbox"/>
First Metatarsal Extension Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
First Metatarsal Plantar Flexion Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
First Metatarsophalangeal Arthrodesis Side	<input type="checkbox"/>	<input type="checkbox"/>
Flexor Tenotomies Side	<input type="checkbox"/>	<input type="checkbox"/>
Gastrocnemius Lengthening (Baumann/Strayer) Side	<input type="checkbox"/>	<input type="checkbox"/>
Gastrocsoleus Lengthening (Baker/Vulpinus) Side	<input type="checkbox"/>	<input type="checkbox"/>

Hallux Valgus Correction Side	<input type="checkbox"/>	<input type="checkbox"/>
Hip Arthroplasty Side	<input type="checkbox"/>	<input type="checkbox"/>
Lateral Hamstring Lengthening Side	<input type="checkbox"/>	<input type="checkbox"/>
Medial Cuneiform Extension Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Medial Cuneiform Flexion Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Medial Hamstring Lengthening (Open) Side	<input type="checkbox"/>	<input type="checkbox"/>
Medial Hamstring Lengthening (Percutaneous) Side	<input type="checkbox"/>	<input type="checkbox"/>
Metatarsal Osteotomies Side	<input type="checkbox"/>	<input type="checkbox"/>
Obturator Neurectomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Open Reduction Side	<input type="checkbox"/>	<input type="checkbox"/>
Patellar Tendon Distal Transfer Side	<input type="checkbox"/>	<input type="checkbox"/>
Patellar Tendon Shortening Side	<input type="checkbox"/>	<input type="checkbox"/>
Pelvic Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Plantar Fascia Release Side	<input type="checkbox"/>	<input type="checkbox"/>
Posterior Capsular Release of the Knee Side	<input type="checkbox"/>	<input type="checkbox"/>
Proximal Femoral Derotational Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Proximal Femoral Resection (Subtrochanteric) Side	<input type="checkbox"/>	<input type="checkbox"/>
Psoas (Intramuscular) Over the Brim Side	<input type="checkbox"/>	<input type="checkbox"/>
Rectus Femoris Release Side	<input type="checkbox"/>	<input type="checkbox"/>
Rectus Femoris Transfer Side	<input type="checkbox"/>	<input type="checkbox"/>
Semitendinosus Transfer to Adductor Magnus Side	<input type="checkbox"/>	<input type="checkbox"/>
Shelf Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Shortening Side	<input type="checkbox"/>	<input type="checkbox"/>
Soleus Aponeurotic Lengthening Side	<input type="checkbox"/>	<input type="checkbox"/>
Split Tibialis Anterior Tendon Transfer Side	<input type="checkbox"/>	<input type="checkbox"/>
Split Tibialis Posterior Tendon Transfer Side	<input type="checkbox"/>	<input type="checkbox"/>
Tendo Achilles Lengthening (Percutaneous) Side	<input type="checkbox"/>	<input type="checkbox"/>

Tibial Derotational Osteotomy Side	<input type="checkbox"/>	<input type="checkbox"/>
Tibialis Posterior Tendon Advancement Side	<input type="checkbox"/>	<input type="checkbox"/>
Valgus Osteotomy of Proximal Femur Side	<input type="checkbox"/>	<input type="checkbox"/>
Varus Derotational Osteotomy of Proximal Femur Side	<input type="checkbox"/>	<input type="checkbox"/>

**Details on Interventions**

Botox Injection Location for Left Side	<input type="checkbox"/> Medial Hamstring <input type="checkbox"/> Lateral Hamstring
Botox Injection Location for Right Side	<input type="checkbox"/> Medial Hamstring <input type="checkbox"/> Lateral Hamstring
Botox Injection Dose Left Side Medial Hamstring	_____
Botox Injection Dose Left Side Lateral Hamstring	_____
Botox Injection Dose Right Side Medial Hamstring	_____
Botox Injection Dose Right Side Lateral Hamstring	_____
Botox Injection Frequency Left Side Medial Hamstring	_____
Botox Injection Frequency Left Side Lateral Hamstring	_____
Botox Injection Frequency Right Side Medial Hamstring	_____
Botox Injection Frequency Right Side Lateral Hamstring	_____
Adductor Release (Open) Location for Left Side	<input type="checkbox"/> Adductor Longus <input type="checkbox"/> Adductor Brevis <input type="checkbox"/> Gracilis (proximal) <input type="checkbox"/> Proximal Hamstring <input type="checkbox"/> Pectinus
Adductor Release (Open) Location for Right Side	<input type="checkbox"/> Adductor Longus <input type="checkbox"/> Adductor Brevis <input type="checkbox"/> Gracilis (proximal) <input type="checkbox"/> Proximal Hamstring <input type="checkbox"/> Pectinus
Varus Derotational Osteotomy of Proximal Femur Fixation Type for Left Side	<input type="radio"/> Blade Plate <input type="radio"/> Locking Plate <input type="radio"/> Other Fixation
Varus Derotational Osteotomy of Proximal Femur Fixation Type for Right Side	<input type="radio"/> Blade Plate <input type="radio"/> Locking Plate <input type="radio"/> Other Fixation
Assessment of Hip Stability Type for Left Side	<input type="checkbox"/> Clinical <input type="checkbox"/> Fluroscopy <input type="checkbox"/> Arthogram <input type="checkbox"/> Other

Assessment of Hip Stability Type for Right Side

- Clinical
- Fluroscopy
- Arthogram
- Other

Pelvic Osteotomy Type for Left Side

- Dega
- San Diego
- Pemberton
- Salter

Pelvic Osteotomy Type for Right Side

- Dega
- San Diego
- Pemberton
- Salter

Hip Arthroplasty Type for Left Side

- Total
- Hemi

Hip Arthroplasty Type for Right Side

- Total
- Hemi

Arthrodesis Type for Left Side

- Subtalar
- Talonavicular
- Triple

Arthrodesis Type for Right Side

- Subtalar
- Talonavicular
- Triple

Proximal Femoral Derotational Osteotomy Fixation Type for Left Side

- Intertrochanteric
- Subtrochanteric

Proximal Femoral Derotational Osteotomy Fixation Type for Right Side

- Intertrochanteric
- Subtrochanteric

Femoral Derotational Osteotomy (Diaphyseal) Fixation Type for Left Side

- Flexible Intramedullary Nails
- Locked Intramedullary Nails
- Plate and Screw Construct

Femoral Derotational Osteotomy (Diaphyseal) Fixation Type for Right Side

- Flexible Intramedullary Nails
- Locked Intramedullary Nails
- Plate and Screw Construct

Femoral Derotational Osteotomy (Supracondylar) Type for Left Side

- Locking Plate
- Blade Plate
- Crossed K-Wires

Femoral Derotational Osteotomy (Supracondylar) Type for Right Side

- Locking Plate
- Blade Plate
- Crossed K-Wires

Medial Hamstring Lengthening (Open) Type for Left Side

- Semitendinosis
- Semimembranous
- Gracilis

Medial Hamstring Lengthening (Open) Type for Right Side

- Semitendinosis
- Semimembranous
- Gracilis

Tibial Derotational Osteotomy Locality for Left Side

- Proximal
- Diaphyseal
- Distal

- Tibial Derotational Osteotomy Locality for Right Side
- Proximal  
 Diaphyseal  
 Distal
- Tendo Achilles Lengthening (Percutaneous) Sliding Type for Left Side
- Hoke  
 White  
 Other
- Tendo Achilles Lengthening (Percutaneous) Sliding Type for Right Side
- Hoke  
 White  
 Other
- Calcaneal Osteotomy to Correct Varus Procedure for Left Side
- Lateral Closing Wedge  
 Slide
- Calcaneal Osteotomy to Correct Varus Procedure for Right Side
- Lateral Closing Wedge  
 Slide
- Medial Cuneiform Flexion Osteotomy Procedure for Left Side
- Plantar closing wedge  
 Dorsal opening wedge
- Medial Cuneiform Flexion Osteotomy Procedure for Right Side
- Plantar closing wedge  
 Dorsal opening wedge

### Orthopedic Lower Extremity Interventions (Intra Op)

- Intra Operative Procedures
- SSI Bundle Completion  
 GA +/- Epidural  
 Transfusion  
 None
- Transfusion - Source
- Cell Saver  
 Autologous  
 Directed Donor  
 Banked Blood
- Intra Op Anesthesia Complications
- Yes  
 No

### Orthopedic Lower Extremity Interventions (Post Op)

- Post Operative Management
- TXA  
 Foley catheter  
 Post Op Pain Control  
 DVT prophylaxis  
 Post-operative antibiotics  
 Post-operative restrictions  
 None
- Post Op Pain Control - Type
- Epidural  
 Regional Block  
 Local  
 Continuous IV Infusion  
 PCA  
 Intermittent

Post Operative Immobilization - Lower Extremity

- Pillows
- Abduction wedge
- Hip abduction brace
- Hip spica cast
- Above knee casts with bar
- Below knee casts with bar
- Knee immobilizer/s
- Above knee cast/s
- Below knee cast/s
- Knee immobilizer/s
- Traction
- Other
- None

Type of Hip Spica Cast

- Single
- Double
- 1 and 1/2

Post Operative Transfusion

- Yes
- No

Complications (Lower Extremity)

- Nerve injury Neuropraxia/Dysesthesia/Neuropathic Pain
- Compartment Syndrome
- Infection Superficial
- Infection Deep
- Wound Dehiscence
- Pressure Sore
- Delayed/Nonunion of Osteotomy
- Malunion
- Avascular Necrosis
- Heterotopic Ossification
- Hardware/Implant Related Complications
- None

Post-Operative Length of Stay (Days) - Ortho

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