Frequently Asked Questions: Healthcare Providers

1) What should I do if I’m not sure a child is appropriate for the program?
Complete the Provider Referral Form. The Coordinator will review the case and contact you regarding whether the child is appropriate for the program.

2) What if a child does not have a diagnosis of cerebral palsy?
A diagnosis of cerebral palsy (CP) is not required to be enrolled in the Child Health BC Hip Surveillance Program. For some children, it can take a long time to receive a diagnosis of CP. Children may not be provided with this diagnosis while investigations are being completed to determine the underlying cause of their condition. **Children should be enrolled while awaiting test results.** If a child has not been diagnosed with cerebral palsy, please mark “Possible CP, not yet confirmed” on the clinical exam form.

Children diagnosed with known conditions (e.g genetic, metabolic, etc) may also be described as having CP if their clinical presentation is consistent with the definition of CP. However, a diagnosis of CP is not always provided to the family. If a child has a diagnosis but has not also been provided a diagnosis of CP, select “Other” on the enrollment form and specify the known diagnosis.

3) Should children who fit the inclusion criteria be enrolled before 2 years of age?
Yes, children should be enrolled in the program as soon as they are identified as having CP or are suspected of having CP. If children are being investigated for an underlying cause to their condition but meet the definition of CP, please enroll and select “Possible CP, not yet confirmed” on the clinical exam form.

4) When a child is referred to the program, will they need to be seen at BC Children’s Hospital?
No, children will receive hip surveillance in their home communities. When a child is identified as having hip displacement and needs to be seen by a pediatric orthopaedic surgeon, they will be referred to a surgeon in their own Health Authority or BC Children’s Hospital.

5) Should children at GMFCS level I or II that are older than 5 years be enrolled?
Yes, all children born in or after the year 2000 should be enrolled in the program. If the child/youth has had an x-ray, it will be reviewed and recommendations for further follow up or discharge from the program will be made by the hip surveillance team at BC Children’s Hospital. If the child/youth has not had an x-ray in the past, an x-ray will be ordered to ensure there is no evidence of hip displacement.
6) Who will receive the surveillance results?
The family will receive a welcome letter in the mail upon enrollment and a results letter following all clinical exams and/or x-rays. The child’s physiotherapist and physicians will be cc'd on all of these letters. It is important for the family to identify, on Page 1 of the Enrollment Package, who they would like to receive these communications. You may include more than one physician and physiotherapist, if desired.

7) Is a doctor's referral required?
A doctor’s referral is not required. Physiotherapists can refer directly to the Hip Surveillance Program.

8) Is the Caregiver booklet available in other languages?
Yes. The booklets are available in Punjabi, Korean, Arabic, Simplified Chinese, and Traditional Chinese. Professionally printed booklets can be requested from the program coordinator by emailing hips@cw.bc.ca.

9) I'm unable to do the clinical exam. What do I do?
Please do the clinical exam to the best of your ability. If you are unable to complete a portion of the clinical exam, please mark, “Not tested” and provide a comment as to the reason.

The child’s GMFCS level must be completed. If you are unsure of the child’s GMFCS level, get input from the family on the child’s current motor function using the Parent Questionnaire, (https://canchild.ca/system/tenon/assets/attachments/000/000/481/original/GMFCS_Family.pdf). If you are still unable to determine a child’s GMFCS level, please contact the program coordinator for assistance. GMFCS levels are less reliable prior to age 2. All children enrolled in the program prior to age 2, will have a clinical exam completed again at 2 years of age and the child’s GMFCS level will be reassessed prior to ordering an x-ray.

10) Can x-rays be done anywhere?
No. X-rays must be done at local hospitals so that they can be viewed by the Hip Surveillance team at BC Children’s Hospital. When x-rays are recommended, a location where they should be completed will be specified. Contact the program coordinator if the family wishes to have the x-ray completed at a facility other than the one specified.

11) What happens if a child needs to be referred to a pediatric orthopaedic surgeon?
If a child is identified as needing to see a pediatric orthopaedic surgeon through the Child Health BC Hip Surveillance Program, the family will be contact by phone by the program coordinator to explain the results. The child’s physiotherapist will also be notified at the same time. The child will be referred to an orthopaedic surgeon in their Health Authority or at BC Children’s Hospital.