

THE HIP POINTER

by PolyMem®
SPORTSWRAP™

Contusions occur frequently in sport and may often affect an athlete's ability to perform. One type of contusion, the **hip pointer**, almost always limits an athlete's range of motion and frequently results in time lost from participation.



DEFINITION

A **hip pointer** is a contusion on the rim of the iliac crest often caused by a blow from a knee, helmet, shoulder, or elbow or by a collision with an artificial playing surface. A severe blow can often result in separation of muscles attaching to the iliac crest or a crush injury to the soft tissue. Depending on the severity of the blow, periositis, or sub-periosteal hematoma may result.

The muscles taking either their origin or insertion on the iliac crest are the gluteus maximus, gluteus medius, gluteus minimus, sartorius, iliacus, quadratus lumborum, tensor fasciae latae, latissimus dorsi, internal oblique, external oblique and transverse abdominus.

Based upon the specific location of the blow to the iliac crest one or more motions of the hip joint may be restricted. However, the athlete often complains of focal tenderness in the contused area and painful motion in side bending, walking, twisting, jumping, running, etc.

Figure left : Two days post injury for this soccer athlete, who suffered a hip pointer colliding with artificial turf while executing a slide tackle.

ASSESSMENT

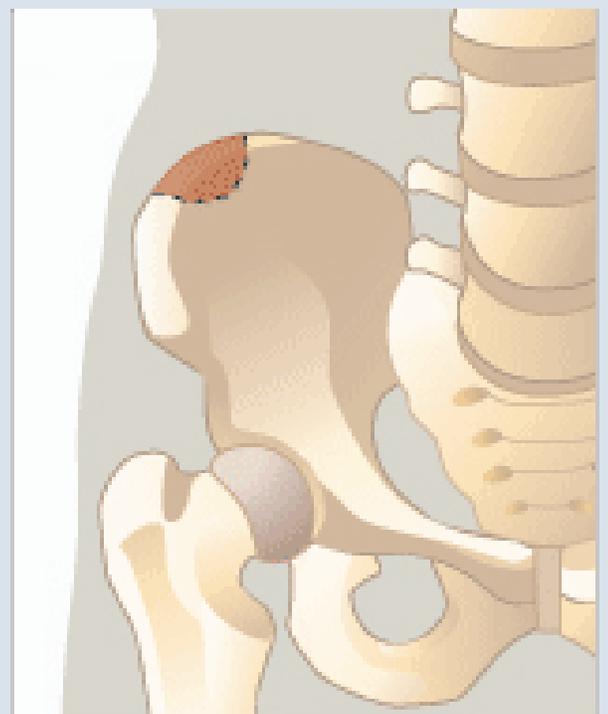
The athlete should always be examined and iliac crest fracture ruled out. In the skeletally immature athlete, avulsion fracture of the iliac crest must also be suspected.

TREATMENT OPTIONS:

Pain is the most limiting factor in a hip pointer. Treatment options to minimize pain and excessive inflammation in the injured area often include: rest; ice packs; ice massage; and delivery of analgesic/anti-inflammatory medicines orally, via iontophoresis or by local injection.

Due to the benefits of helping to relieve pain and inflammation, and helping to reduce swelling and ecchymosis, both PolyMem® and SportsWrap™ offer another option for hip pointers.

Optimally, the products are best used immediately after the injury occurs but have been shown to help relieve pain, swelling and ecchymosis even when applied days after the injury.

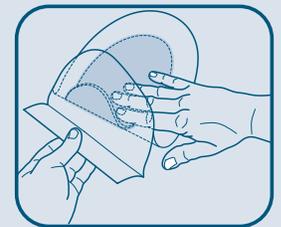
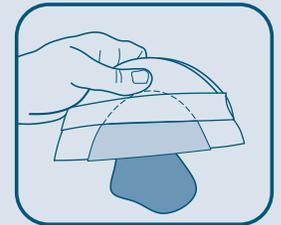
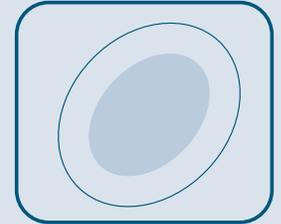


Hip Pointer Management with

by **PolyMem**[®]
Shapes[®]

Guidelines for use:

- Apply dressing to area as quickly as possible following injury.
- Use a Shapes by PolyMem Dressing #8.
- Ensure that the skin is clean and dry. *(If sweat, lotion, or oils are on the skin, the area should be cleansed with isopropyl alcohol.)*
- Identify the area of focal tenderness. Center the Shapes dressing over the center of focal tenderness.
- Apply the dressing, smoothing the adhesive borders to insure good contact with the skin.
- Leave the dressing in place as long as the adhesive borders are intact, but not for longer than 5 days. *(For open wounds please follow product instructions for use.)*
- Ice may be applied directly over the dressing.
- Treat the athlete as you normally would, i.e. assisted ambulation with crutches. sOther therapy may also be employed as long as the dressing remains intact.



PolyMem[®] for Sports offers great choices:

SportsWrap for the management of:

- Sprains
- Muscle strain
- Contusions
- Pain

PolyMem and Shapes by PolyMem for the management of:

- Lacerations
- Blisters
- Turf Burn
- Open Wounds
- Contusions
- Pain



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MKL-272, REV-1,0812