

# Pregnancy AFTER

## PAO: WHAT YOUR OB- GYN NEEDS TO KNOW

A printable guide to bring to your prenatal appointments.

### DATE OF PAO SURGERY:

Hip operated on (check one):

☐ Right ☐ Left ☐ Both

Surgeon name:

Surgeon contact information:

Were screws/hardware removed? ☐ Yes — Date: \_\_\_\_\_ ☐ No ☐ Not sure

Did you have additional procedures? (check any):

☐ Hip arthroscopy ☐ Labral repair ☐ FAI correction ☐ Capsular repair/plication  
☐ Cartilage procedure ☐ Other: \_\_\_\_\_

Any ongoing hip symptoms?

☐ None ☐ Mild stiffness ☐ Limited hip flexion ☐ Limited abduction  
☐ Pain with certain positions ☐ Other: \_\_\_\_\_

### WHAT YOUR OB-GYN SHOULD KNOW ABOUT PAO

Your patient has undergone a periacetabular osteotomy (PAO), a procedure that repositions the hip socket to improve stability and joint mechanics. Key points for obstetric care:

- PAO does not affect fertility.
- Most patients can safely have a vaginal delivery.
- The procedure does not narrow the birth canal or change pelvic outlet size.
- A C-section is NOT automatically required unless obstetrically indicated.
- Many standard labor positions are safe; comfort-based modifications may be needed.
- Epidural and spinal anesthesia are safe and accessible after PAO.
- Pregnancy commonly leads to temporary hip or pelvic discomfort due to hormonal laxity but does not affect the surgical correction.

### RECOMMENDED NOTES FOR LABOR & DELIVERY PLANNING

Preferred/comfortable labor positions:

(e.g., side-lying, semi-reclined, hands-and-knees, supported squat)

Positions that may be uncomfortable:

(e.g., extreme hip flexion, very wide abduction)

Do you have limited range of motion in one hip?

☐ Yes ☐ No

If yes, describe:



## QUESTIONS TO ASK YOUR OB-GYN

### Pregnancy & Delivery Planning

- Is vaginal delivery appropriate for me based on my hip mobility?
- What labor positions do you recommend given my hip history?
- Are there any precautions you want me to take during pregnancy?
- Do I need additional pelvic floor support or physical therapy?

### Anesthesia

- Will my PAO history affect epidural or spinal placement?
- Do you need documentation from my hip surgeon?

### Pain or Mobility Concerns

- What should I do if hip pain increases during pregnancy?
- Are certain exercises or stretches recommended or discouraged?

### Postpartum

- How soon can I return to low-impact exercise?
- Should I restart physical therapy after delivery?

## QUESTIONS YOU MAY BE ASKED BY YOUR OB-GYN

Do you have pain with hip flexion?

☐ Yes     ☐ No

Describe: \_\_\_\_\_

Do you have pain with hip abduction (legs opening)?

☐ Yes     ☐ No

Describe: \_\_\_\_\_

Any mobility restrictions your surgeon mentioned?

Have you had imaging after your PAO?

☐ Yes     ☐ No

Date/results (optional): \_\_\_\_\_

## WHEN TO CONTACT YOUR HIP SURGEON DURING PREGNANCY

- Hip pain increases significantly
- They notice catching, locking, or instability
- Their OB recommends a C-section solely due to PAO
- They have concerns about safe labor positions
- They experience sudden mobility loss or unusual pain

## FINAL NOTES / ADDITIONAL INFORMATION

---

---

---

---

---