

- Clinical terms that describe hip stability
 - Radiographic and ultrasound criteria for dysplasia and dislocation based upon age.
 - Historical and clinical risk factors to be assessed for all children that are related to DDH.
 - What constitutes “standard” brace treatment of DDH
 - What are outcomes criteria that define successful or failed treatment for DDH
 - Establish universally accepted and reproducible ranges of normal values across ages for sonographic and/or radiographic hip measures or any future surrogates for normal hip development.
 - Establish clear relationships between these surrogates for hip development and demonstrate long-term functional limitations that are correlated to surrogate values that fall outside of the normal ranges.
 - Define the benefits and harms of late diagnosis of DDH
 - Define the harms of early diagnosis and treatment of DDH
 - Standardize follow-up times after bracing to improve objective testing of outcomes
- Provide research design that is applicable to routine practice situations and allows for comparison of alternative methods of diagnosis and treatment.

2022 UPDATE ADDITIONAL EVIDENCE

1. Donma, M. M., Dogru, M., Demirkol, M., Ozcaglayan, O., Topcu, B., Ozcaglayan, T. I. K., Gonen, K. A., Nalbantoglu, B., Nalbantoglu, A., Dogru, R., Ulucan, H., Karakoyun, O., Erol, M. F., Guzelant, A. Y., Donma, O. What Is the Important Point Related to Follow-Up Sonographic Evaluation for the Developmental Dysplasia of the Hip? *Journal of Child Science* 2017; 1: e123-e126