Results The patient underwent THA with no perioperative respiratory or cardiovascular complications, and was monitored in HDU overnight. Analgesia was largely controlled using regular simple analgesia (paracetamol and codeine) with with only an additional total of 100mg tramadol and 10mg oral morphine required during his 7 day inpatient stay.

Conclusions THA in a high-risk respiratory patient can be performed safely without medical complications utilising an opiate-free technique with remimazolam sedation, short-acting spinal anaesthesia and ultrasound-guided infiltration using Exparel, with reduced need for post-operative opioid analgesia.

Attachment Case report consent statement.pdf