

DISCHARGE INSTRUCTIONS FOLLOWING TOTAL HIP REPLACEMENT

PHYSICAL ACTIVITY

- Walk with a walker/crutches, with weight bearing on your affected leg as instructed by Physical Therapy, gradually increasing the length of walking as tolerated. Continue the exercises as taught by Physical Therapy making sure to follow your hip precautions and:
 - Do not cross your legs.
 - Sit in a high firm chair with arms (at least 21 inches high).
 - Push up with your arms to raise yourself when getting up from a sitting position, supporting your weight on your non-operative leg and keeping your operative leg in front of you.
 - Do not force movement, twist, jump, or pull up on your leg forcefully. Avoid bending your hip more than 90 degrees. (Your hip should always be higher than your knee).
 - Pump your ankles frequently (every hour while awake) to help prevent blood clots from forming.
 - Do frequent leg raises.
 - Use a raised toilet seat extension at home.
 - You should have two pair of TED hose stockings for your legs. These aid in circulation following surgery and should be worn for **FOUR WEEKS**. Wear stockings all day, ok to remove at bedtime. Apply a clean pair daily, washing the dirty pair by hand and line drying. This helps to maintain the elasticity in the stockings. Your legs need to be elevated on the bed or couch when reapplying the stockings. *You will need help to reapply them.*
 - Continue to use the aids to assist you with activities of daily living (i.e.: sock aid, reacher, shoe horn).

WOUND CARE

- Your incisional area will be closed with dissolvable sutures, steri-strips, or staples. If staples are used, they will be removed at your two week post op appointment.
- Your surgical dressing will stay in place for 7 days unless it peels off or becomes excessively soiled.
- Keep a dressing on your incision site as long as there is any drainage. When the drainage stops, the dressing may be removed. However, if you are more comfortable keeping a dressing on your incision site, change it daily or if it becomes wet.
- If no drainage from incision, you may shower and allow incision to get wet and soapy. Rinse and dry well. No tub baths or submerging for 3 weeks and incision is well healed.
- Swelling and discoloration/bruising of the hip area and leg is expected for three to six weeks after surgery. This will gradually resolve. Lying down and elevating your leg on pillows above the level of you heart will help to decrease the swelling.

MEDICATIONS

- A prescription for pain medication will be given to you by your doctor prior to your discharge from the hospital. These medications are used to reduce your pain ***and must not be taken any more often than prescribed.*** In an effort to keep your pain under good control, you should take the pain medication routinely as prescribed during the first 24-48 hours following surgery. Then, as the pain lessens, begin taking it as needed (within the prescribed guidelines). As you become more comfortable, you may substitute Tylenol for pain control.
- Pain medication should be taken with food as this will help to prevent any stomach upset.
- Requests for pain medication should be made during normal office hours. Please Note: Pain medication will **only** be ordered during regular office hours, Monday through Friday from 8:00AM to 5:00PM.
- **Do not drive while taking pain medications.**
- **Do not drink alcoholic beverages while taking pain medications.**
- The goal is to have you off all narcotic pain medications twelve weeks after surgery. The office will slowly wean down the strength of your medication over the twelve weeks.
- Ice may be used to your hip to help with swelling and pain relief.
- You will be on a blood thinning medication after surgery to help prevent blood clots from forming. Typically Aspirin 81mg twice per day is ordered after surgery. For patients with a cardiac history, different medications and directions will be provided at discharge.
- For those patients that normally take Methotrexate, Enbrel, or Plaquenil, do not restart this medication until two weeks following surgery. This will help to reduce the risk of infection following surgery.
- You may resume your routine medications unless otherwise instructed.
- Often pain medication and inactivity can cause constipation. Eat high fiber foods (fresh fruits, vegetables, bran) and increase your fluid intake if possible. Also, you may purchase Pericolace, a stool softener, at any pharmacy to aid in alleviating your constipation. Take this two times per day while on pain medication. Other options include Miralax, Milk of Magnesia, Dulcolax Suppositories, Fleets Enema.

SEXUAL RELATIONSHIPS

- You can safely resume sexual activity eight weeks after surgery. Use pain medication prior for comfort. Dislocation happens when there is excessive bending of the leg, inward rotation of the foot, and pressure forcing the affected leg inward. Initially, a supine (on your back) position for you will usually be most comfortable.

DRIVING

- You most likely will be able to resume driving four weeks after surgery. The decision to drive or not is your responsibility. You will need to practice and you should not drive while on pain medication and until you can safely operate a vehicle.

OTHER INFORMATION

- Be aware that your joint may trigger metal detection devices.
- You may obtain a temporary handicap parking permit application from this office if you feel it is needed.

FUTURE DENTAL OR SURGICAL PROCEDURES

- It is important that you pre-medicate with antibiotics for dental work, bowel, or urinary tract procedures (including teeth cleaning, colonoscopy, cystoscopy, and catheter placement). Your dentist/doctor will order an antibiotic for you prior to these procedures to prevent microorganisms from spreading to your new joint. **IT IS IMPORTANT THAT YOU TAKE THESE PRECAUTIONS FOR YOUR WHOLE LIFE.**

PRECAUTIONS

Notify the office if you:

- Develop new or more severe pain that cannot be controlled by the pain medication.
- Develop redness, swelling, drainage, or foul odor from your incision.
- Develop calf pain or tenderness.
- Have persistent numbness/tingling of the affected foot.
- Develop a temperature greater than 100.5 that is not associated with any other illness. It is not necessary to take your temperature every day. If you feel warm, take your temperature.
- Have any questions or problems.

DIET

- Following surgery, start by taking liquids such as water or carbonated soft drinks. If this does not upset your stomach, try soup and crackers. After this, you may resume your normal diet as tolerated.

FOLLOW UP

- You should already have a two week post operative appointment scheduled. If not, please call the office today.
- Our office has a physician available by phone 24 hours a day for emergency orthopaedic needs. Routine questions, including requests for pain medication, are best handled during weekday business hours, Monday through Friday, from 8:00am until 5:00pm.

TOTAL HIP REPLACEMENT PRECAUTIONS

THINGS YOU MUST NEVER DO FOR THE REST OF YOUR LIFE:

1. No high impact sports.
2. No heavy lifting greater than 50 lbs.