Total Hip Arthroplasty (Replacement)
Post Operative Instructions

IN THE HOSPITAL AFTER SURGERY:

You will stay in the hospital for 2-3 days after having hip replacement surgery. During that time you will recover from your anesthesia and the surgery itself. Right after surgery you will spend 1-2 hours in a recovery room (PACU) before going into your room. You will likely wake up very tired and groggy. You will have a large dressing (bandage) over your incision and part of your leg. A small drainage tube may be in place during surgery to help drain fluids that collect in your hip joint after surgery.

After being taken back to your room you will continue receiving fluids through your IV (a catheter or tube that is inserted into your vein to give the medical staff access for medications and fluids) until you are able to drink fluids on your own. You will slowly resume a normal diet.

Your nurse will show you how to prevent blood clots and pneumonia by using these methods:

1. You may wear special compression stockings on your legs. These stockings improve blood flow and reduce your risk of getting blood clots.
2. Most people will also receive blood-thinning medicine to reduce the risk of blood clots more.

3. When you are in bed, move your ankles up and down. These are called “ankle pumps” and are pictured to the right.

4. Using a device known as a spirometer will help you prevent pneumonia from occurring. You simply
breathe deeply and exhale into the device to move a ball upwards.

YOU WILL BE ENCOURAGED TO
START MOVING AND WALKING THE DAY AFTER SURGERY WITH HELP FROM YOUR NURSE

GETTING READY TO GO HOME

Before you are allowed to be discharged from the hospital you will need to meet these goals:

1. You can move around safely

WHAT TO EXPECT AT HOME

By the time you go home, you should be able to walk with a walker without needing much help. Most people do not need them after 2-4 weeks. You should also be able to dress yourself with only a little help and be able to get into and out of bed, chair or toilet without help.

You will need to be careful that you do not dislocate your artificial hip, especially in the first few months after surgery. You will need to learn exercises that make your new hip stronger.

You will need to have someone home with you 24 hours a day for 1 or 2 weeks after you leave the hospital or rehabilitation center. You will need help preparing meals, bathing, moving around the house, and doing other daily activities.

HOME SETUP

Your bed should be low enough for your feet to touch the floor when you sit on the edge of the bed. Your bed should also be high enough so that your hips are higher than your knees when you sit on the edge. You will NOT need a hospital bed, but your mattress should be firm. Place a chair with a firm back in the kitchen, bedroom, bathroom, and other rooms you will use.
This way, you can sit when you do your daily tasks.

Keep tripping hazards out of your home:

- Remove loose wired or cords from areas you walk through to get from one room to another. Remove loose throw rugs. Do NOT keep small pets in your home. Fix any uneven flooring in doorways. Use good lighting.

- Put hand rails in the bathtub or shower and next to the toilet. Place a slip-proof mat in the bathtub or shower.

- Do not carry anything when you are walking around. You may need your hands to help you balance.

- Put things where they are easy to reach.
ACTIVITY

You will need to be careful to not dislocate your new hip when you are walking, sitting, lying down, dressing, taking a bath or shower, and doing other activities. Keep moving and walking once you get home. Do NOT PUT WEIGHT ON YOUR OPERATIVE SIDE UNTIL CLEARED TO DO SO BY DR LYNCH. Start out with short periods of activity, and then gradually increase them. Your doctor or physical therapist will give you exercises to do at home. Use your crutches or walker for as long as you need them. After a few days you may be able to do simple household chores. But, do not try to do heavier chores, such as vacuuming or laundry. Remember, you will get tired quickly at first. Attach a small fanny pack, backpack, or basket to your walker, so that you can keep small household items, like a phone and notepad, with you at all times.

WOUND CARE

Keep your dressing on your wound clean and dry. You may change the dressing according to when your doctor told you to change it. Be sure to change it if it gets dirty or wet. Follow these steps when you change your dressing:

- Wash your hands well with soap and water
- Remove the dressing carefully. DO NOT PULL HARD
- Soak some clean gauze with Saline and wipe from one end of the incision to the other. DO NOT WIPE BACK AND FORTH OVER THE SAME AREA.
- Dry the incision the same way with clean, dry gauze. Wipe or pat in just 1 direction
- Check your wound for signs of infection
  - Redness, warmth, swelling, foul smell, or oozing wound
- Apply a new dressing the way you were shown.

Sutures or staples will be removed about 10-14 days after surgery. Do not shower until 3-4 days after your surgery. When you can shower, let water run over your incision but DO NOT SCRUB INCISION or LET THE WATER BEAT DOWN ON THE INCISION or SOAK THE INCISION. You may have bruising around your wound. This is normal, and it will go away on its own. The skin around your incision may be a little pinkish red, which is normal too.
SELF CARE

Some general rules for any activity you do are:

- Do not cross your legs or ankles when you are sitting, standing, or lying down.
- Do not bend too far forward from your waist or pull your leg up past your waist. This bending is called hip flexion. Avoid hip flexion greater than 90 degrees (a right angle).

When you are getting dressed:

- Do not dress standing up. Sit on a chair or the edge of your bed, if it is stable.
- Do not bend over, raise your legs, or cross your legs while you are dressing.
- Use helpful devices so that you do not bend too much. Use a reacher, a long-handled shoehorn, elastic shoe laces, and an aid to help you put on your socks.
When you are getting dressed, first put pants, socks or pantyhose on the leg that had surgery.

When you undress, remove clothes from your surgery side last.

When you are sitting:

- Try not to sit in the same position for more than 30 to 40 minutes at a time
- Keep your feet about 6 inches apart. Do not bring them all the way together.
- Keep your feet and knees pointed straight ahead, not turned in or out.
- Sit in a firm chair with a straight back and armrests. Avoid soft chairs, rocking chairs, stools, or sofas.
- Avoid chairs that are too low. Your hips should be higher than your knees when you are sitting. Sit on a pillow if you have to.
- When getting up from a chair, slide toward the edge of the chair, and use the arms of the chair or your walker or crutches for support.
- Do not cross your legs.

When you are bathing or showering:

- You may stand in the shower if you like. You can also use a special tub seat or a stable plastic chair for sitting in the shower.
- Use a rubber mat on the tub or shower floor. Be sure to keep the bathroom floor dry and clean.
- Do not bend, squat, or reach for anything while you are showering. Use a shower sponge with a long handle for washing. Have someone change the shower controls for you if they are hard to reach. Have someone wash the parts of your body that are hard for you to reach.
- Do NOT sit down in the bottom of a regular bathtub. It will be too hard to get up safely.
- Use an elevated toilet seat to keep your knees lower than your hips when you are using the toilet, if you need one.

When you are using stairs:

- When you are going up, step first with your leg on the side that did not have surgery.
- When you are going down, step first with your leg on the side that had surgery.

When you are lying in bed:

- Do not sleep on the side of your new hip or on your stomach. If you are sleeping on your other side, place a pillow between your thighs.
• A special abductor pillow or splint may be used to keep your hip in the proper alignment.

**When you are getting into or riding in a car:**

• Get into the car from street level, not from a curb or doorstep.

• Car seats should not be too low. Sit on a pillow if you need to. Before you get into a car, make sure you can slide easily on the seat material.

• Break up long car rides. Stop, get out, and walk about every 2 hours.

  **Do NOT drive until your doctor says it is okay.**

**When you are walking:**

• Use your crutches or walker until your doctor tells you it is okay to stop using them.

• Put only the amount of weight your doctor or physical therapist told you was okay to put on your hip that had surgery.

• Take small steps when you are turning. Try not to pivot.

• Wear shoes with nonskid soles. Avoid wearing slipplers as they can make you fall. Go slowly when you are walking on wet surfaces or uneven ground.
POST-OP PRESCRIPTIONS GIVEN

Prescriptions

Depend on the patient and his or her comorbidities

Side effects of medication that you may receive:

Anti-inflammatory (Celebrex, Naprosyn, Ibuprofen, etc.)

You should take all medication with food to help prevent nausea. Please notify office if nausea, vomiting, rash, headaches, abdominal cramping, blood in your stool or other symptoms occur. Do not combine other anti-inflammatories or Aspirin products while taking your anti-inflammatory. You should not exceed the Aspirin dose that Dr. Lynch has recommended.

Pain Medication (Vicodin, Tylenol #3, etc.)

Take after food. Notify office if nausea, vomiting, headaches, rash occur. Other side effects include; drowsiness, dizziness and constipation. Do not take TYLENOL or other acetaminophen products while taking pain medication such as Vicodin or Tylenol #3, both of these medications contain acetaminophen.

Signs and Symptoms of Complications

Although complications are rare the following are a list of symptoms you should be aware of. Infection – increased pain not relieved with medication, fever, chills, redness, swelling or drainage from incision.

Blood Clot – swelling, tenderness, or pain to calf when you move your ankle up and down, shortness of breath and chest pain.

If any of the above symptoms occur, contact the office immediately.

***PLEASE CALL Melissa, Dr Lynch’s assistant at 210-477-5151 with any questions.***