YOUR PATH TO RECOVERY AFTER POSTERIOR HIP REPLACEMENT

	Day of Surgery: # 0	After Surgery Day: # 1	After Surgery Day: # 2
Precautions	No bending past 90 degrees RIGHT WRONG	No crossing your legs RIGHT WRONG	No twisting your leg inward RIGHT WRONG
Activity	Walk 3 times with help Goal: Walk 50 feet	Walk 3 times with help Goal: Walk 150 feet Practice stairs & car transfers	Walk 3 times with help Goal: Ready for home
Diet	Food & Liquids	Food & Liquids	Food & Liquids: Home
Pain Tell nurse if you are having pain	Pills, limit IV Nerve Block	Pills only Nerve Block	Pills only, prescription given Nerve Block
Discharge Plan With patient and family		Discuss and confirm discharge plan	Home with plan
Important Reminders			

- Follow-up with your surgeon within 1-2 weeks
- Do your home exercise program
- Monitor your wound for infection
- Take medication to prevent blood clots (anticoagulation), as directed
- Use long handled equipment to keep your precautions
- Use a pillow between your legs when you sleep
- Driving precaution and restrictions apply
- Dental work, may require you to take antibiotics

Before leaving hospital- Make sure you have discharge packet with:

- Patient Visit Summary Discharge Instructions
- Patient Belonging's Record
- Case Management Discharge Planning Final
- Discharge Instructions Posterior Hip Replacement
- Home Exercise Program after Posterior Hip Replacement
- Activities of Daily Living after Posterior Hip Replacement

CALL 911: CHEST PAIN, SHORTNESS OF BREATH, DISLOCATION OF THE JOINT



POSTERIOR HIP REPLACEMENT PRECAUTIONS

Posterior hip precautions are movements and positions that need to be followed in order to prevent the "new hip" or prosthesis from dislocating or going out of place.

NO BENDING PAST 90 DEGREES



NO TWISTING YOUR LEG INWARD



NO CROSSING YOUR LEGS



- Do not bend forward to reach feet. Maintain a 90-degree angle between torso and thigh
- Keep abduction pillow between legs, to prevent crossing of legs during the night
- Do not lift knee higher than hip on the operated side
- Do not cross legs
- Do not allow legs to internally rotate (feet turned in)
- Do not twist while lying or standing



DISCHARGE INSTRUCTIONS POSTERIOR HIP REPLACEMENT

*The information below does not replace instructions your doctor may give you.

POSTERIOR HIP PRECAUTIONS (In place for at least 3 months)

- NO bending past 90 degrees
- NO twisting your leg inward
- NO crossing your legs

FOLLOW UP

Follow-up with your surgeon within 1-2 weeks after your surgery

NOTIFY YOUR DOCTOR IMMEDIATELY WITH

- An increase in pain not relieved by pain medication, rest, or ice
- Numbness, tingling or change in color (discoloration) or temperature of the operative leg
- Fever above 100.9 degrees Fahrenheit
- Pain, swelling, tenderness in your calf
- Any signs of infection to the incision or the surrounding skin: increased swelling, redness, pain, very warm to touch, painful to touch, increase in drainage or the presence of pus-like drainage, the incision is pulling apart, a very foul smell, shaking chills

CALL 911 RIGHT AWAY IF YOU HAVE ANY OF THE FOLLOWING

- Chest pain
- Shortness of breathing and or difficulty breathing
- Dislocation of the joint: severe pain, shortening of the extremity, inability to move the limb

HOME EXERCISE PROGRAM - PHYSICAL THERAPY & OCCUPATIONAL THERAPY

- Participate with Physical Therapy, this is a key to your recovery
- Perform your home exercise program as directed
- Daily activities are crucial to returning to your life after surgery
- Refer to: Activities of Daily Living after Posterior Hip Replacement
- Refer to: Home Exercise Program Posterior Hip Replacement



^{*}Remember Posterior Hip Precautions with All Activities

INCISIONAL CARE

- Keep your dressing clean and dry
- If you have a dressing in place, remove it per your doctor's instructions. Look at the incision daily and follow your doctor's instructions about how to care for your incision.
- DO NOT use: lotion, antibiotics (triple antibiotic, first aid cream etc)
- DO NOT remove or pick at staples, sutures, steri-strips, skin glue

PAIN

- You can expect to have pain after your surgery
- Take your pain medication as directed, as needed
 - DO NOT drink alcohol or drive when taking pain medication
- Ice the surgery area, 20 Minutes On, 20 Minutes Off
 - Use a barrier between the ice and the surgery area
 - DO NOT use heat
- Change positions frequently to decrease pain and stiffness
- Peripheral Nerve Block- (at home) see printed: On-Q Catheter Patient Guidelines Insert
- Use Non-Pharmacologic Interventions (No medication) such as: Guided imagery, relaxation, distraction, prayer/meditation, humor, massage
- Lock/secure your pain medications
- Disposal of unused medications per bottle instructions

MANAGING CONSTIPATION

- Pain medication most likely will cause constipation
- Increase your water, try drinking at least 8 glasses of water a day
- Slowly increase fiber into your diet
- Over the counter stool softeners or laxatives can be helpful

ANTICOAGULATION

- May be discharged with this type of medication; it will help prevent blood clots
- Medication may cause bruising or bleeding
- Take the medication at the same time each day, exactly as directed by the doctor
- Seek medical care for:
 - Blood in urine or stool
 - Fall or blow to the head
 - Unable to stop bleeding



NUTRITION

- Eat healthy, well-balanced meals
- Drink at least 8 glasses of water per day
- DO NOT diet while you are healing
- Maintian a healthy weight

SWELLING

- Some swelling over your incision, legs and feet are normal, especially towards the end of the day
- Wear your support hose
- Elevate your feet when sitting

SUPPORT HOSE

- Keep the support hose on for at least 2 weeks, removing stockings at least 1-2 times a day or at night to allow air to reach your legs
- Monitor skin for breakdown (blisters, deep redness, creases in skin)
- Wash with soap and water and hang to dry

SITTING AND SLEEPING

- Sleep with pillow or wedge cushion between knees at all times to keep legs apart
- You can sleep on your non-operative side with pillows aligning your hips properly
- Avoid sitting too low, prop yourself with a firm pillow
- It is not uncommon to feel tired or have trouble sleeping for the first 3 months after surgery

DRIVING

- No driving under the influence of pain medication (opioid type of pain medications)
- Must be able to make an emergency stop
- Must be able to operate machinery safely
- Driving will depend on leg positioning, strength, coordination, affected surgery side
- Most can drive within a couple of weeks and may take up to six weeks

SHOWERING

- Usually ok to shower within 48-72 hours after your surgery
- Please have a family member or friend help you in the beginning
- Remember your balance may be different especially getting used to your new joint
- DO NOT swim, take baths or go in hot tubs for a few weeks



SEXUAL INTERCOURSE

- Typically the patient with the hip surgery should be on bottom. This will help keep your precautions in place by limiting the motion of the hip
- Your significant other should avoid putting full weight on your hips
- Stop immediately should you experience pain

RETURNING TO WORK

- You will be recovering for a period of 4-6 weeks
- Speed of recovery depends on your condition before surgery, after surgery, how well you follow your doctor's orders and your participation
- Depends on what type of work you do

IMPORTANT REMINDERS

- Be aware that your new hip or prosthesis may activate metal detectors
- If you are scheduled for dental work, you may need to take antibiotics. Prophylactic antibiotic therapy will prevent spread of infection to your prosthesis

NURSE NAVIGATOR

- The navigator is your liaison between all the members of your team. They will work with you and your family as much as you need
- Do not hesitate to call the Nurse Navigator at 661.200.2225 or 661.200.2000 ext. 34501, at any time



HOME EXERCISE PROGRAM AFTER POSTERIOR HIP REPLACEMENT

Do the following exercises 2-3 times a day. Do 10 repetitions of each.

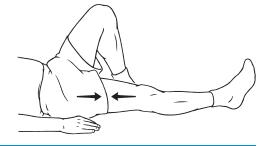
ANKLE PUMPS

Make up and down motions with your feet



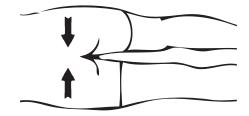
QUAD SET

- Slowly tighten muscle on thigh of straight leg
- Hold for 5 seconds, counting out loud, then relax



GLUTE SQUEEZE

- Squeeze buttocks muscles as tightly as possible
- Hold for 5 seconds, counting out loud, then relax



HEEL SLIDE

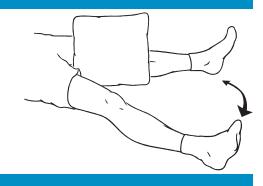
- Bend knee and pull heel towards buttocks
- Hold for 5 seconds, counting out loud, then relax
- Remember to not bend hip past 90 degrees





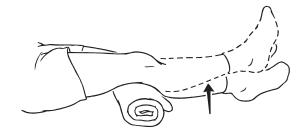
ABDUCTION

- Slide one leg out to side
- Keep knee cap pointing up
- Gently bring leg back to pillow



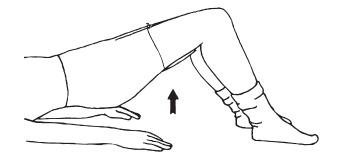
SHORT ARC QUAD

- Place a rolled towel under leg.
- Straighten knee and leg. Hold for 5 seconds counting out loud, then relax
- Only place a towel under knee during exercise then remove promptly



BRIDGING

- Lie on back with feet shoulder width apart with arms on the floor
- Lift buttocks toward the ceiling, keeping back straight
- Hold 5 seconds counting out loud, then relax



ARM CHAIR PUSH UP

- Lift buttocks off seat of chair by pushing down with arms
- Hold 5 seconds counting out loud, then relax





ACTIVITIES OF DAILY LIVING AFTER POSTERIOR HIP REPLACEMENT

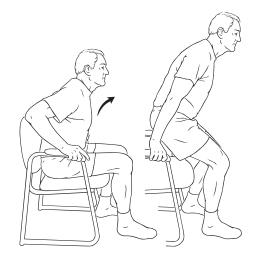
Don't rush! Give yourself extra time to set up proper work conditions and carry out good body mechanics.

SITTING

- Avoid sitting in low, soft chairs i.e. sofas, car seats
- Sit on a firm cushioned, straight back chair with armrests
- Keep the height of your knees lower than your hips
- DO NOT lean forward past a 90 degree angle at your hip
- Remember: Keep the "L" shape at your hip

Steps for sitting:

- Back up to the seat until you feel the back of your legs touching it
- Slide your surgical leg out in front of you when sitting
- Reach back for both armrests and lower yourself slowly, keeping your head and chest up



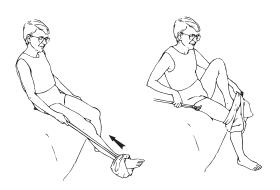
TOILETING

- Use a high toilet or a raised toilet seat with arm rests
- To sit on toilet see above: Steps for sitting
- DO NOT bend forward or twist the hip during hygiene
- To stand, slide surgical leg out in front of you. Balance yourself before grabbing the walker and attempting to walk



LOWER BODY DRESSING

- A reacher to thread clothing over the foot
- A sock aid to prevent bending forward at the hip
- Slip-on shoes with rubber soles. Avoid loose fitting slippers and sandals
- Long-handled shoe horn to help put on or take off shoes
- Elastic shoe laces to prevent the need to tie your shoes

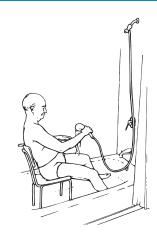




SHOWERING

Helpful items include:

- Hand-held shower nozzle to direct water
- Long-handled sponge to clean your lower legs & feet
- Shower chair or tub bench to help with safety and to save your energy
- Non-skid bath mat to prevent falling
- A caddy to hold toiletries to prevent stooping & twisting
- Grab bar to promote balance & prevent falling
- DO NOT bend or reach for tub controls
- DO NOT bend or squat to wash your legs and feet





HOUSEHOLD ACTIVITIES

- Keep regularly used items within easy reach
- DO NOT bend down to pick up objects from the floor, use a reacher
- Use a walker basket or bag to transport items
- Do only what you can and, take frequent breaks



RIDING IN A CAR

- DO NOT enter your car while standing on a curb or step. Enter from street level
- Avoid cars with deep bucket seats or low seats. Sit on a firm pillow or cushion
- Move the front passenger seat all the way back and place it in a reclined position
- Back up to the seat, steady yourself using one hand on the walker
- Slide your surgical leg slightly forward, reach back for the seat and lower yourself slowly down
- Lean back as you lift your surgical leg into the car
- Reverse the steps when getting out of the car





THE CARE OF YOUR INCISION

Applies to Mepilex Dressing

CALL YOUR DOCTOR RIGHT AWAY IF:

Any signs of infection are present to the incision or the surrounding skin:

- Increased swelling, redness or pain
- Very warm to touch
- Painful to touch
- Increase in drainage or the presence of pus-like drainage
- The incision is pulling apart
- A very foul smell
- Shaking chills or fever above 100.4 °F (38°C)

KEEP YOUR INCISION CLEAN, DRY AND INTACT

- Keep your dressing clean and dry
- After 5 days take off dressing and leave open to air. Observe wound and report any signs and symptoms of infection.
- DO NOT apply anything to your incision (unless directed by your physician) especially: Soap, lotion, antibiotics (triple antibiotic, first aid cream etc)
- DO NOT remove or pick at staples, sutures, steri-strips, skin glue or a scab

APPLYING A NEW DRESSING

Step 1 - Preparing to care for your incision

- Clean your work area before changing your dressing
- Grab your new dressing, and a plastic bag
- Thoroughly wash and dry your hands

Step 2 - Remove soiled dressing

- Discard in the plastic bag
- Wash and dry your hands

Step 3 - Clean your incision

- Gently pour warm water or saline over the incision to rinse the area
- DO NOT scrub
- DO NOT use soap

Step 4 - Apply new dressing

- Remove the release paper (see figure A)
- Center the dressing over the incision; place the tacky side down on top of the wound. Do not stretch (see figure B)
- Gently Press the dressing onto your skin. Ensure all edges are flat to prevent moisture from going under the dressing (see figure C)







