

Post-Operative Instructions Hip Replacement

- 1. **WOUND**: You may shower on post-op day #7 if the incisions are dry and cover the incision while doing so. Gently pat the area dry after showering.
 - a. You may change your dressing on post op day 2 and daily thereafter. If your dressing is a brown Mepalex dressing, you may leave it on for 3-5 days if it's clean and dry.
 - b. Leave steri strips that are directly on the incision (if you have them) until they fall off on their own.
 - c. You may see clear-bloody drainage from the incision sites. This is normal. HOWEVER, IF the incision is draining bright red blood or yellow, pus like fluid, or if the amount of drainage increases, notify the office immediately.
 - d. Do not soak the hip in a bathtub, pool etc until incision is completely sealed, usually at least 4 weeks post operatively
- 2. ICE: You may use ice over the incision to decrease swelling and relieve pain, 3x/day for 20 min.
- 3. **ACTIVITY**: Full weight bearing is advised after surgery, <u>unless noted otherwise</u>. Walk with an assisted device (crutches, cane, walker, etc.) until you feel comfortable and confident ambulating unassisted.
- 4. **PRECAUTIONS**: Please see posterior hip precautions separate instruction sheet (if applicable).
 - a. <u>Posterior approach</u>: >90 deg hip flexion, > neutral hip internal rotation, and/or > neutral hip adduction
 - b. Anterior approach: Hip hyper extension and/or hip external rotation
 - c. Regardless of the approach, no sit-ups, straight leg raises, lunges or squats are permitted for 3 months
- 5. **COMPRESSION STOCKINGS**: To prevent blood clots in your legs. Worn for 2-3 weeks.
- 6. **POST OPERATIVE MEDICATION**:
 - a. **Pain Management**: will be prescribed by our office unless you see a pain management specialist or was seen by them in the hospital in which case you will continue with medication prescribed by them.
 - **b. Anticoagulation:** as prescribed to you: oral medication (coumadin/xarelto) for 6 weeks post operatively or injectable (lovenox) for 2 weeks to prevent blood clots
- 7. CARE and PHYSICAL THERAPY AFTER DISCHARGE FROM HOSPITAL:
 - a. **If you are discharged to HOME**: Home physical therapy and visiting nurse will be set up by social work at the hospital. If you are placed on coumadin, home health nurse will check your blood levels periodically to ensure the dose you are on is correct.





- b. **If you are discharged to REHABILITATION FACILITY**: Rehabilitation facilities are designed to optimize each patient's physical therapy experience and recovery process following your discharge. Social worker will aid you in finding a rehabilitation facility right for you during your stay at the hospital. You are encouraged to visit rehabilitation facilities prior to your surgery to choose the best fit for you.
- 8. **DRIVING**: With surgery on your <u>Left leg</u>, you may begin driving once you are off narcotics. With surgery on your <u>Right leg</u> you are permitted to begin driving 6 weeks after your surgery. You may ONLY begin driving if you feel safe and have stopped taking pain medication.
- 9. **POST OPERATIVE APPOINTMENT**: Please call the office to schedule a follow-up appointment for 2-3 weeks post-operatively, if you do not already have an appointment scheduled.
- 10. NOTIFY Dr. LaReau's Office IMMEDIATELY if:
 - a. You develop a Fever (>101 degrees)
 - b. Redness over or around the incision or drainage from the incision site
 - c. Unusual/sudden/persistent pain in your calf, knee, thigh, hip or chest
 - d. Numbness or tingling in your foot or redness of the calf
 - e. Uncontrolled and progressive worsening pain
- 11. **EXERCISES**: You will be provided with exercises to regain hip range of motion and muscle activation. It is important to do these exercises regularly before and after surgery for maximal benefit.
- 12. **IMPORTANT**: Once you have completed a joint replacement surgery, you will need to obtain prophylactic antibiotic prior to any dental procedure, colonoscopy etc *for life*. This medication will need to be taken an hour prior to the procedure and the medication can be prescribed either by the physician performing the procedure or Dr. LaReau's office. This is a prophylactic medication to prevent any infection complication.

Please note these instructions and restrictions may change on a patient-to-patient basis. If you have any questions, please feel free to call our office.

