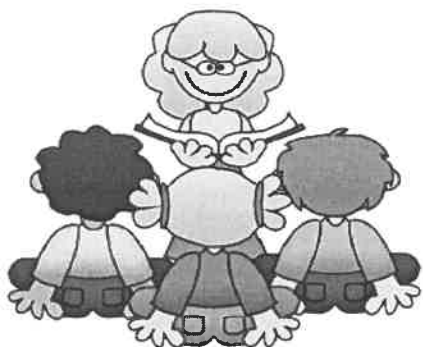


Total Hip Replacement Picture Book

Things that **MUST** be done prior to your surgery



Pre-Op Class/ Video



Medical Exam



Lab work and ECG



Social planning and help

Medications



Stop these medications one week prior to surgery

Ibuprofen or any anti-inflammatories such as:

Motrin

Advil

Aleve

Diclofenac

Naprosyn

Alka Seltzer

Bufferin

Aspirin

Supplements

Medications you should talk to your doctor about timing of when to stop:

Blood thinners such as

Plavix

Warfarin

Eliquis

Xarelto

Pradaxa

You are allowed to take up to the day before surgery:

Tylenol

Cold Medicine

Sudafed

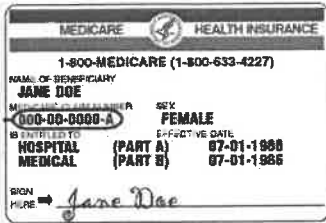
Vitamin C

Your other medications will be reviewed at your pre-op appointment with our Medical team and you will be given directions of when to stop them if needed.

Bring to the Hospital:



Any necessary paperwork



Insurance card / Information



Comfortable, loose fitting clothes

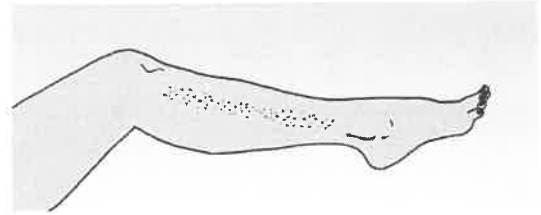
[illegible]

Medication Lists with dosages

WHAT *NOT* TO DO PRIOR TO SURGERY



No dental appointments for 2 months prior and 2 months after surgery unless suspect infection. This applies to any other surgeries as well.



Do not shave your legs for 72 hours prior to surgery. Avoid nail polish prior to your surgery.



Do Not Eat anything for 8 hours prior to surgery



Do Not Drink anything for 4 hours prior to surgery



Refrain from excessive alcohol intake prior to surgery



Talk with your doctor regarding your smoking habits

Important details to plan for your surgery:



Typical hospital stay is one night. Some patients may leave the same night of the surgery.



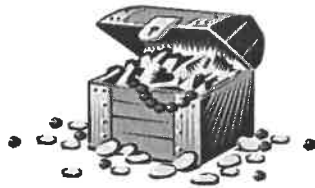
Plan your transport to and from the hospital early on so there is no doubt and less anxiety.



Arrange for someone to stay with you for the first 24 hours and check on you as needed.



Arrange for someone to care for your pets while you are recovering.



Leave valuables at home. Do not wear make-up or jewelry.



If you live alone, make meals ahead of time.



Remove loose carpets and electrical cords from where you walk.

Planning for your return home from the hospital:



Have handrails installed in your bathroom



Elevated toilet seat



Shower chair



Hand-held shower head
(not mandatory but helpful)



Reacher



Sock-aid



Long shoe horn

Make your own Ice Slushy!

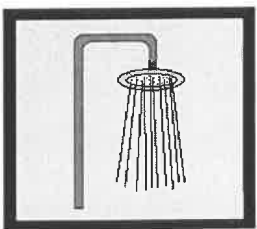


3 cups rubbing alcohol + 7 cups water + gallon size Ziploc = slush bag
Get as much air out of bag prior to freezing. Make sure to double bag.
It will take 24 hours to freeze. Make a few of them.

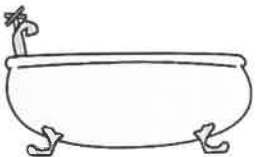
Wound Care



Do not apply lotions or creams on the incision.



Shower as instructed in the hospital. Dry gently.



No baths, hot tubs or soaking of the wounds.



Apply bandages as instructed by the nurses.

What is normal after surgery:

Treatment in Green



Constipation

*** Start Miralax 5 days prior to surgery
high fiber diet, hydrate**



Swelling / Bruising

Ice, elevate, ease activity



Pain

Ice, elevate, pain medicines



Spasms

**Hydrate, warm compresses on
muscles not wound.**



Fatigue

Good nutrition that's high in iron



Insomnia

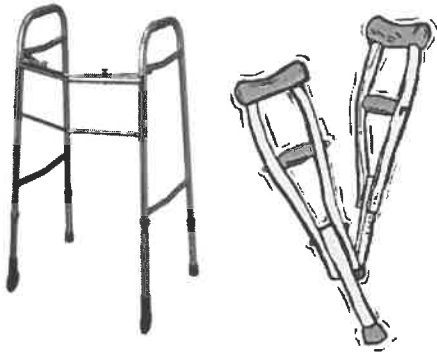
**Avoid caffeine and naps. Discuss
with your surgical team.**



Nausea / loss of appetite

Reduce narcotics

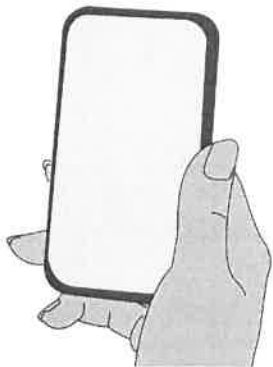
Remember to:



Use a walker or crutches as directed by your surgeon



No Driving while on narcotics or before two weeks



Send weekly pics of your incision (green sheet)



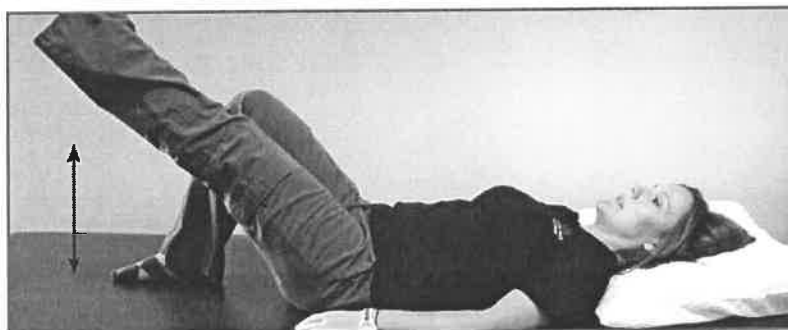
If you feel you are not doing well or have questions, call us!

Total Hip Replacement Exercises:

Perform the following exercises **BEFORE** surgery. For each exercise, do 3 sets of 10 repetitions per day.

Straight Leg Raise

Tighten thigh muscles, then lift leg 8-10 inches from the floor keeping knee locked.



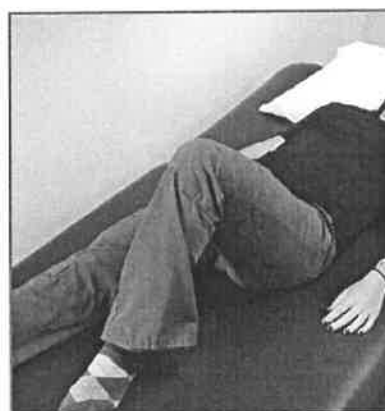
Sit to Stand to Sit

With hands pushing just above your knees, stand up and sit down slowly.



Bent Knee Fall Out

With knee bent, gently lower knee of bent leg to the side and return.



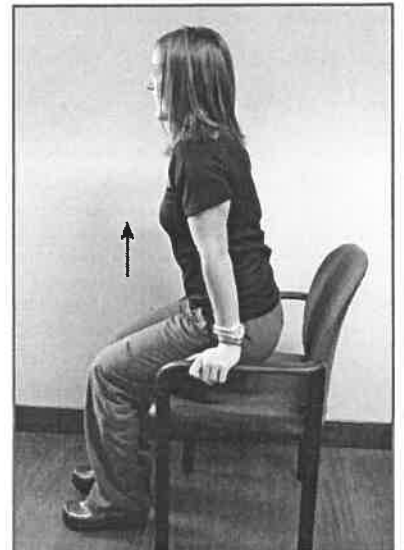
Heel Slides

Bend knee and slide heel toward buttocks.



Arm Chair Push-ups

Put hands on arms of chair and push body up, so that arms are fully extended.



Wall Slides

Leaning on a wall or closed door slowly lower buttocks toward floor as tolerated. Then slide up to starting position.



Leg Elevation

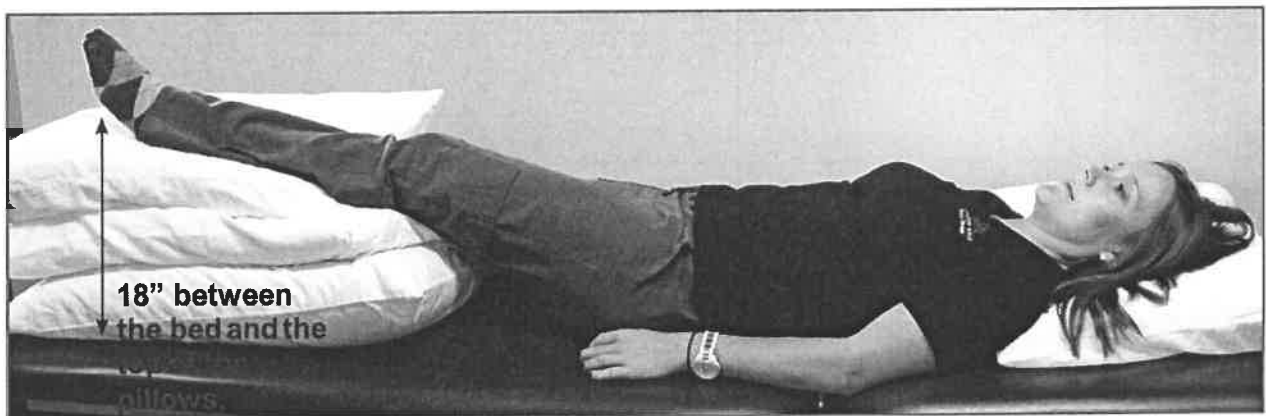
Do this exercise for the first two weeks **AFTER** surgery, regardless if any swelling is present.

Elevation of the Leg

Swelling of the lower leg is a common after-effect following total joint replacement. Please follow this schedule to reduce swelling and improve your lower leg circulation.

Recommended time

**schedule: 10:00 a.m., 2:00
p.m., 6:00 p.m.**

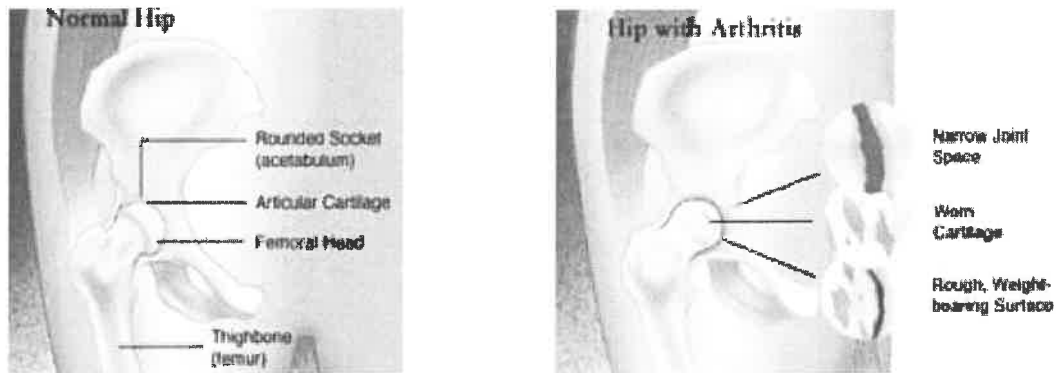


Lie flat on a bed or couch. You may use one pillow beneath your head. Place three or four firm pillows or folded blankets to create a height of 18 inches at the foot of the bed or couch. Place your foot and ankle on top of the pillows. It is important that the leg is straight and at least 18 inches above the level of your heart. Stay in this position for one hour at least three times per day. Apply ice on top of surgical site for 15 to 20-minute intervals during each hour of elevation.

Moving your foot in a circular motion or the ankle in a pumping action will also increase circulation.

Total Hip Replacement

Most individuals who undergo hip replacement surgery experience a dramatic reduction of hip pain and a significant improvement in their ability to perform the common activities of daily living.



How the Normal Hip Works:

The hip is one of your body's largest weight-bearing joints. It consists of two main parts: a ball (femoral head) at the top of your thighbone (femur) that fits into a rounded socket (acetabulum) in your pelvis.

Bands of tissue called ligaments connect the ball to the socket and provide stability to the joint.

The bone surfaces of your ball and socket have a smooth durable cover of articular cartilage that cushions the ends of the bones and enables them to move easily.

All remaining surfaces of the hip joint are covered by a thin, smooth tissue called synovial membrane. In a healthy hip, this membrane makes a small amount of fluid that lubricates and almost eliminates friction in your hip joint.

Normally, all of these parts of your hip work in harmony, allowing you to move easily and without pain. The most common cause of chronic hip pain and disability is **arthritis**, which can occur in several different forms:

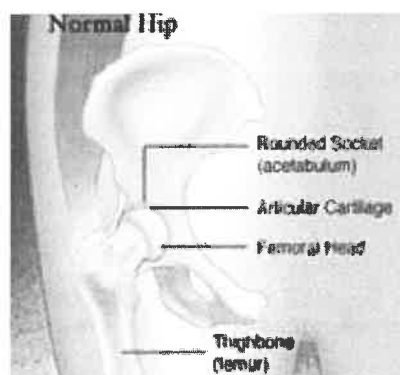
Osteoarthritis often occurs in an individual with a family history of arthritis. In this form of the disease, the articular cartilage cushioning the bones of the hip wears away. The bones then rub against each other, causing hip pain and stiffness

Surgical Procedure

The surgical procedure takes one to two hours. Your orthopedic surgeon will remove the damaged cartilage and bone, then position new metal and polyethylene joint surfaces to restore the alignment and function of your hip.

Your orthopedic surgeon will choose the type of prosthesis that best meets your needs.

Most individuals who undergo hip replacement surgery experience a dramatic reduction in pain and a significant improvement in their ability to perform the common activities of daily living.



Before



After