



Total Hip Replacement Discharge Instructions



Phone Number: 512-485-0545, Option #2



Website: Abblittortho.com



Home Health Care:

Company: Accent Care Phone: Start Date:

Table of Contents

★ Medications to stop prior to surgery -----	Page 2
★ What to do to prepare for surgery -----	Page 3-6
• Pre-Operative Exercise Program	
★ Post-operative medications -----	Page 7-8
• Medication schedule chart	
★ What to expect after surgery -----	Page 9
★ Activity after surgery -----	Page 10
★ Incision care -----	Page 11
★ When to call the office -----	Page 12
★ Frequently asked questions -----	Page 13-14



MEDICATIONS TO STOP PRIOR TO SURGERY



What to STOP 7 days prior to surgery

- ★ Plavix (Check with prescribing physician for stop date)
- ★ Aspirin (Bufferin, ASA, Ecotrin, Bayer, Alka-Seltzer, Goody's)
- ★ Ibuprofen (Motrin, Advil, Midol, Nuprin, Pamprin)
- ★ Naprosyn (Aleve, Naproxen, Anaprox)
- ★ Celecoxib (Celebrex)
- ★ Indocin (Indomethacin)
- ★ Mobic (Meloxicam)
- ★ Voltaren (Diclofenac Sodium)
- ★ Relafen (Nabumetone)
- ★ Vitamins (Multivitamins, Vitamins B, C, K)
- ★ ANY Herbal Supplements

You may CONTINUE to take the following:

- ★ Tylenol
- ★ Tramadol (Ultram)
- ★ Hydrocodone (Norco)
- ★ Iron Supplements
- ★ Glucosamine Chondroitin

What to STOP 5 days prior to surgery

(Unless instructed differently by your doctor)

- ★ Coumadin (Warfarin)
- ★ Xarelto
- ★ Eliquis



WHAT TO DO TO PREPARE FOR SURGERY

- ★ Arrange for a family member or friend to accompany you on surgery day.
- ★ Cancel any dental appointments/ invasive procedures that fall between 3 weeks prior to surgery and 3 months after surgery.
- ★ AVOID ANY INJECTIONS INTO YOUR SURGICAL JOINT FOR 3 MONTHS BEFORE SURGERY.
- ★ You will be discharged from as discussed previously, so plan ahead for transportation home by a family member or friend.
- ★ Arrange for someone to stay with you for the first few nights after you return home. You **MUST** have someone at home with you after surgery.
- ★ Remove small rugs or other obstacles that may be in your path as a tripping hazard.
- ★ If you have pets, you may want to arrange for someone to assist in caring for them for a few days after you return home.
- ★ While taking narcotic pain medication, you will **NOT** be permitted to drive. You may need to arrange for transportation to your initial follow-up visit.
 - These include: Oxycodone, Hydrocodone, Tramadol
- ★ You will need to follow up with Dr. Abblitt approximately 2.5-3 weeks after your surgery. This appointment may have been made for you when you scheduled your surgery.
 - Call 210-804-5687 if you need to arrange this appointment.
- ★ Consider taking in additional protein prior to and after surgery for healing benefits.
- ★ Please stay “well-hydrated” 3 days prior to surgery.



PRE-OPERATIVE EXERCISE PROGRAM

- ★ If you are currently performing an exercise program, continue to do so.
- ★ If you are not, you may benefit from incorporating the below exercises 3-5x/week.
- ★ If you start exercises and they are too painful, stop doing them!
- ★ After surgery, your physical therapist will give you a new exercise program and progress you appropriately.

Sit to Stand

- ★ Sit upright in a chair or on the edge of your bed.
- ★ Stand up from seat with arms held across your chest → Return to seated position → Repeat
- ★ If too challenging, you can use a chair or walker in front for support to assist with standing.



- ★ Perform 3 sets of 10 repetitions
Rest 1 minute between sets
Perform 1 repetition every 4 seconds



Heel Slides

- ★ Lay on your back with your legs extended.
- ★ Slide one heel towards your glutes, bending your knee → Return to starting position → Repeat on opposite side



WorkoutLabs.com

- ★ Perform 3 sets of 10 repetitions per side
- Hold position for 5 seconds

Seated knee extension

- ★ Sit against a wall, chair, or on firm surface with the knee bent
- ★ Keep a straightened back, may use hands for support as shown
- ★ Flex foot upward while straightening knee → Return to starting position → Repeat, alternating legs



- ★ Perform 3 sets of 5 repetitions
- Hold position for 20 seconds

Do not allow low back to lose natural curve

- ★ It is common to experience leg shaking



Straight Leg Raise

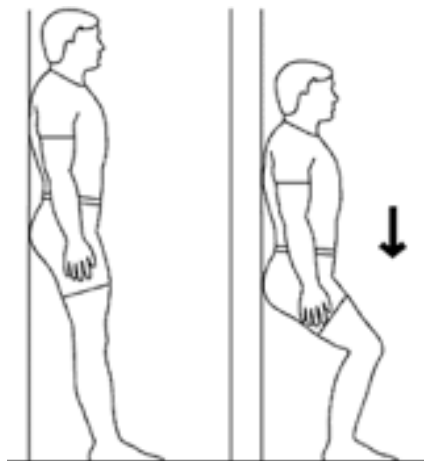
- ★ Sit on flat surface, supported by hands, uninvolved knee bent
- ★ Raise leg to thigh level of bent leg → Return to starting position → Repeat (Modification: may do exercise lying flat on back instead)



- ★ Perform 3 sets of 10 repetitions
Rest 1 minute between sets
Perform 1 repetition every 5 seconds

Mini Wall Squat

- ★ Lean on wall, feet approximately 12 inches from the wall, spaced shoulder distance apart
- ★ Bend knees to 45 degrees → Hold for 5 seconds → Return to starting position → Repeat



- ★ Perform 3 sets of 10 repetitions
Rest 1 minute between sets
Perform 1 repetition every 5 seconds



POST OPERATIVE MEDICATIONS

- ★ **Oxycodone:** Short acting pain pill to be used as needed for breakthrough pain.
 - You may take 1-2 tablets every 4-6 hours. Maximum 12 pills in 24-hour period.
- ★ **Tramadol:** Intermediate acting pain pill to be used as needed for breakthrough pain.
 - You may take 1-2 tablets every 6-8 hours.
- ★ **Meloxicam:** Anti-inflammatory medication.
 - Take 1 time per day for 3 months total after surgery. Take with food.
- ★ **Lyrica (Pregabalin):** To prevent nerve pain & tingling sensations.
 - Take 2 times per day for 2 weeks after surgery.
 - Not for patients over 70 years old due to risk of confusion.
- ★ **Tylenol (Acetaminophen):** Pain pill to be taken on a scheduled basis.
 - Take every 8 hours until you no longer have pain.
- ★ **Senokot-S (Senna with Docusate):** Stool softener/laxative for constipation.
 - Take 1-2 tablets 2 times per day until no longer taking oxycodone.
- ★ **Zofran (Odansetron):** To prevent or help with nausea.
 - Take 1 tablet as needed.
- ★ **Blood Thinner:** Take **ONE** of these for 28 days after surgery to prevent blood clots.
 - ☐ **Aspirin (ASA):** 81mg tablet taken 2 times per day
 - OR
 - ☐ **Xarelto:** 10mg tablet taken 1 time per day
- ★ **Duricef:** Antibiotic prescribed only for patients with an increased risk of infection.
 - Take 2 times per day for 1 week after surgery.

Please use medication chart on following page for first week to help with scheduling



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Oxycodone Time Table: * You may take 1-2 tablets as needed for pain every 4-6 hours*****

[illegible]



WHAT TO EXPECT AFTER SURGERY

- ★ You will have bruising and swelling that will start at the surgical site and spread throughout the entire leg. This is to be expected, though severity varies by patient.
- ★ Bruising and swelling will continue to increase over the first 1-2 weeks after surgery.
- ★ You will feel stiff and tight in your surgical leg.
- ★ You will feel tired and your energy level will be decreased.

	Day 1	Day 2-4	Day 5-7	Day 7-10	Day 10-21	Week 4+
Bruising & Swelling	Mild to moderate swelling & bruising	Increase in swelling & bruising	Increasing or stable swelling & bruising	Stable or decreasing swelling & bruising	Decreasing swelling & bruising	Mild or intermittent swelling for around 3 months
Ways to Minimize	Ice, TED hose, elevate leg	Ice, TED hose, elevate leg	Ice, TED hose, elevate leg	Ice, TED hose, elevate leg	Ice, TED hose, elevate leg	Heat/Ice, elevation
Physical Therapy & Activity	Focus on gentle range of motion with therapy	Focus on gentle range of motion with therapy, use ice You may note decreased motion and increased swelling.	Focus on range of motion, increase walking distance, use ice +/- decreased motion and increased swelling.	Focus on range of motion, increase walking distance, use ice	Focus on range of motion, initiate strengthening, increase walking distance	Progress strengthening program
Goals	Home Therapy		Possible to walk without assistance		Start clinic physical therapy	Can begin returning to normal activities.
Pain Management	As prescribed		Begin weaning oxycodone		Begin weaning tramadol	



ACTIVITY AFTER SURGERY

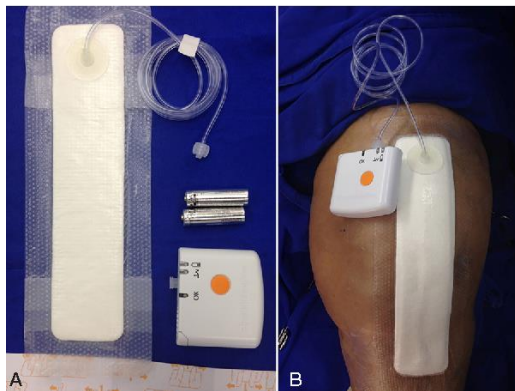
- ★ Unless told otherwise, you will be able to bear weight on your surgical leg as you can tolerate.
- ★ During the first few weeks home after surgery, follow the home exercise program outlined by physical therapy.
 - Overdoing activity can result in increased discomfort and swelling.
- ★ Transition off walker, crutches, & cane when you and your physical therapist feel safe to do so.
- ★ Ice at least 4 times per day; on for 20 minutes each time.
- ★ Elevate leg above heart frequently throughout the day.
 - For 15 minutes every hour, place a pillow under foot and point toes up into the air. Let the knee sag to stretch the hamstrings behind the knee.
- ★ Due to the surgical approach used by Dr. Abblitt, there are no posterior hip precautions required.



INCISION CARE

Bandage

- ★ Your incision will be closed with either glue or sutures.
- ★ Keep bandage in place until follow-up appointment.
- ★ You may remove ace bandage 2 days after surgery if not removed in hospital.
- ★ Remove bandage if more than 50% saturated and replace (Fig 3).
- ★ If continued drainage, please contact the office.



PICO

- ★ If your bandage has a tube and suction device, you may cut tubing and disconnect machine 7 days after surgery. This is a PICO, or negative pressure bandage.
- ★ If this becomes OVER 50% saturated, please contact the office.

Showering

- ★ Cover the bandage for showering as instructed by video/nursing in the hospital.
- ★ Can consider over the counter/Amazon cover as well.
- ★ <https://www.amazon.com/Waterproof-f-Protector-Replacement-C-Section-Transparent/dp/B0C4J6P3DQ?th=1>



50 Pcs Waterproof Shower Protector Bandage 4"x10" for Post Knee Replacement Hip Surgery Long Surgical Incision Larger Wounds Cover C-Section Transparent Film Clear Adhesive Dressing Bath Patch

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WHEN TO CALL THE OFFICE

Dr. Abblitt's Team: 512-485-0545

- ★ Consistent fevers above 101.5
- ★ Drainage that fills over 50% of the bandage
- ★ Pain is not controlled with medication
- ★ Inability to bear weight on your surgical leg
- ★ Confusion or disorientation
- ★ Foot that has no sensation or appears discolored

Call 911 with shortness of breath or chest pain



FREQUENTLY ASKED QUESTIONS

★ **What if my leg swells after surgery?**

It is very common to experience swelling after surgery. Sometimes, you will not swell until several days after surgery. Remember that your body is healing from the surgery and some swelling is normal. The more activities and therapy are performed, the more swelling you may experience.

We do want you to remain active and participate in therapy. When sitting and resting, you can decrease the swelling by elevating your surgical leg and using ice. It is important to elevate your leg, with your knee above the level of your heart, 4-5 times a day for 15 to 30 minutes each time. Toes above your nose!

★ **Will I have bruising after surgery?**

Yes, you will have some degree of bruising after surgery, but everyone is different. Some will experience redness around only the incision, others will have bruising down the entire leg. Both are considered normal and will resolve over the first few weeks.

★ **How much weight can I put on my leg after surgery?**

Put as much weight as you can tolerate on your surgical leg immediately after surgery.

★ **Are there hip precautions I need to follow?**

No, due to the surgical approach used by Dr. Abblitt, there are no specific movement precautions after surgery. Your physical therapist will review this in greater detail.

★ **What positions can I sleep in?**

You may sleep in any position you are comfortable in.

★ **What should I expect my activity level to be?**

Every patient is different. The first week, you should rest as much as possible outside of gentle physical therapy. In the second week, you should begin increasing your activity level. Let pain level and swelling be your guide. You will make around 90% recovery by 6 to 12 weeks. The last 10% will come over a full year.

At some point, most patients overdo it with activities and therefore take a few steps back in recovery. You may have increased swelling or discomfort if this happens. You need to be concerned if you cannot control your pain with rest and medication, or if you have a difficult time bearing weight through your surgical leg.

★ **When can I shower or bathe?**

You can shower the day after surgery. Leave the bandage in place and cover it for showering as instructed in the hospital. To ensure that your incision heals properly, we do not want you in a bathtub or getting into a pool until you have seen us in the office. You may not get into a pool if there is a scab on the incision site.

★ **What about a hot tub or whirlpool?**

Due to heat and bacteria, do not use a hot tub, steam room, sauna, or pool for 10 weeks and until your incision is fully healed.

★ **What should I do to avoid constipation?**

You should start your stool softener (Senokot) 1 day before surgery and continue it twice daily until you have normal bowel movement or while taking narcotic pain medication (oxycodone). Stop the stool softener if you start to experience loose or watery stools. If you continue to have symptoms of constipation you can take milk of magnesia, MiraLAX, magnesium citrate, Dulcolax suppositories, or a fleets enema. All of these medications can be bought over-the-counter at a pharmacy.

★ **How long do I have to wear the stockings?**

You should wear the stockings on both legs for 2 weeks after surgery, and on the surgical leg for 4 weeks after surgery. During this time you must wear them during the day, but you can remove them at night. To wear the stockings properly, please make sure to smooth them out while wearing to avoid irritation to the skin.