

FREQUENTLY ASKED QUESTIONS AFTER HIP ARTHROSCOPY

After my arthroscopic hip surgery, <i>what if I...</i>	
Feel sick/nauseous	Nausea is a common side effect to many medications. If you are currently taking narcotic-based medications (Norco, Percocet) this could be causing your nausea. The anti-inflammatory you were given (Naprosyn) may also cause nausea. Eat prior to taking these medications. If you continue to experience nausea, or if it worsens or you begin to vomit, call your surgeon.
Experience bruising	It is common to experience bruising after surgery. This bruising may even go down your leg to your foot. It is normal to have bruising in locations away from your incisions. The bruising may or may not be uncomfortable to the touch, but should resolve in 2-4 weeks.
Have swelling & pressure in my thigh	This is very normal. There is a lot of fluid used throughout your surgery. Ice your knee to your hip frequently throughout the day to help reduce this fluid. Mobilization and motion (CPM machine, biking) will also help your body get rid of this fluid.
Become constipated	Pain medications and immobility frequently cause constipation. Increasing your fiber intake make help improve your symptoms. You can also use over-the-counter stool softening medication (Colace) or herbal teas (Smooth move tea)
Have pain in my calf	Let your surgeon or PT/ATC know. They will refer you for further testing to evaluate for deep vein thrombosis (DVT) if deemed necessary. <i>If you experience shortness of breath, sharp chest pain, or begin coughing up blood call 911 or go to the emergency room immediately.</i>
Fall on my surgical leg	Slipping after surgery is not uncommon. If you feel unstable and are about to slip, it is ok to put some weight on your leg in attempt to prevent a fall. If you do fall, you will likely feel sore, but should not be overly concerned. Mention the fall to your PT/ATC at your next rehabilitation appointment and they will discuss any concerns with your surgeon.
Think I have an infection	Post-operative infections are not common, but it is important to pay attention to your incisions and call your surgeon's office if you have any concerns. <i>Common signs/symptoms of an infection include:</i> Fever/chills, expanding redness around your incisions, sudden increase in your pain. If you have concerns about the appearance of your incision, call your surgeon's office.
Want to become pregnant	Your hip needs to heal from your surgery, before placing your body through the demands of pregnancy. Waiting 4-6 months after surgery will give your hip a sufficient amount of time to heal and become strong enough to tolerate pregnancy.
Need surgery on my other hip	Your surgeon will discuss with you the appropriate amount of time you need to wait until you have surgery on your other hip. Typically, the minimum amount of time is about 3 months. This allows your hip to heal enough to withstand the increased demands that will be placed on it while recovering from surgery on the other side.
Have pain in the front of my hip	Be sure you aren't sitting for extended periods of time throughout the day. If you are still using crutches, make sure when you are walking you are placing the weight of your foot on the ground. Suspending your leg off the ground will cause your muscles to work too much and may cause you discomfort. If you are allowed you to walk without crutches, be sure you are not driving or ambulating stairs too frequently. If you have pain with these activities, with walking, or during your exercises you are likely doing too much. Discuss this pain with your PT/ATC.
Have pain in my knee	Many patients experience pain in their knee following surgery. The PT/ATC you are seeing for your rehabilitation will be able to give you stretches and exercises to improve this pain. Icing will also help reduce your pain.

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Begin my rehab	The day after surgery you will begin outpatient rehabilitation. If for some reason you are unable to begin on this day, you will be encouraged to use your CPM machine or ride a stationary bike. You will attend rehab 2x/week for the first few weeks. Once your PT/ATC feels you are able to walk without crutches and perform every day tasks without discomfort, the frequency of your visits will begin to taper. You will continue to attend appointments to allow your PT/ATC to appropriately guide you to returning to the activities you enjoy. Once you have returned to your previous level of activity, monthly follow-ups are recommended to improve your functional performance and maintain your post-operative gains in strength and endurance.
Take a shower	Typically 3 days after surgery, once your PT/ATC changes your bandage and looks at your incision.
Get in a pool/hot tub	You may not submerge your hip in water for 2 weeks.
Sleep on my side	You will wear the de-rotational night splint for the first 7 days. After that you may sleep in any comfortable position. At first it may be uncomfortable for you to lie on your side, but you may do it as long as you are able to tolerate it. This will improve with time.
Walk without crutches	Discontinuing crutches is a weaning process. For most procedures you are able to begin a gradual weight bearing progression at 2 weeks, and may be able to discontinue use of crutches 3 weeks after surgery. For some procedures you may be on crutches for as long as 6-8 weeks.
Drive	<i>You may not drive while you are taking narcotic pain medication.</i> If your surgery was on your left hip and you drive a vehicle with an automatic transmission, you may drive approximately 1 week after surgery. At this time we encourage you to drive to necessary distances only (doctor and rehabilitation appointments, etc). If your surgery was on your right hip or you drive a standard transmission, you must be off of your crutches and have good muscular control before you can drive. Typically 3-4 weeks after your surgery. Until you are 6 weeks out from surgery, you are encouraged to drive necessary distances only (doctor and rehabilitation appointments, work, etc) to prevent overuse of your hip flexor.
Walk up/down stairs	While you are on crutches, you need to use your crutches to go up and down stairs. You may also sit and use your arms and non-surgical leg to move up and down stairs. Once you no longer need crutches, you need to be careful about going up and down stairs. Minimizing the number of times you go up and down stairs for the first 6 weeks after surgery will reduce your risk of discomfort at the muscles in the front of your hip. In therapy you will perform exercises to make these areas stronger and be able to better tolerate this motion.
Resume having sex	Sexual intercourse may be resumed as soon as you feel comfortable. Movements should not cause you discomfort in your hip. If you have questions please discuss further with your surgeon or PT/ATC.
Fly on an airplane	You may fly approximately 10-14 days after your surgery. If you have any trips planned immediately following surgery, please make your surgeon aware. If you are able to take Aspirin (Ecotrin/ASA 325mg) it may be recommended you take one tablet twice a day on the day before, day of, and day after travel. While on the plane you should get up and walk up and down the aisle for a couple minutes every hour, at minimum. This will help keep blood from pooling in your legs and prevent a clot from forming.

Return to work	<p>It is recommended you take a <u>minimum of 4 weeks</u> off from work. If your job allows you to work from home, you may begin this 1-2 weeks after surgery.</p> <p>Even if you have a desk job, in the first few weeks after surgery you need to avoid prolonged sitting. Depending on the physical requirements of your job, you may be out of work for as long as 12-16 weeks.</p>
Return to school	<p><u>High School students:</u> It is recommended you take 2-3 weeks off from school. Around 2 weeks after your surgery you may be able to begin half days and progress back in to school. We are happy to provide you with a note to use the school elevator.</p> <p><u>College students:</u> It is strongly encouraged that you have surgery while you are on a break from school to allow for time of complete rest. If you return to campus while you are still recovering from surgery, please let us know so we can help facilitate necessary accommodations.</p>
Participate in PE class	<p>Your restrictions in PE class will be based on what stage of the rehabilitation program you are at. We encourage you to perform your therapy exercises during PE class. Your surgeon or PT/ATC can provide you with updated notes for school stating your current restrictions. Certain class units you may be able to participate in (weight room, swimming) while others you will be restricted from for many months (football, soccer, track & field).</p>
Return to Running	<p>Around 3 months after surgery you may begin gradual running progression, if appropriate for your hip. This progression will be very slow and it will take some time until you return to your previous mileage.</p>