

FREQUENTLY ASKED QUESTIONS AFTER OPEN HIP PRESERVATION SURGERY

After my hip surgery, what if I		
Feel sick/nauseous	Nausea is a common side effect to many medications. If you are currently taking narcotic-based medications (Morphine, Norco, Percocet) this could be causing your 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. Sometimes it is necessary to be placed on blood thinners which can make bruising especially pronounced. This bruising may even go down your leg to your foot. It is normal to have bruising in locations away from your incision(s). 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. Ice your knee to your hip frequently throughout the day to help reduce this fluid. Physical therapy exercises you are given 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.	
	If you experience shortness of breath, sharp chest pain, or begin coughing up blood call 911 or go to the emergency room immediately.	
Fall on my surgical leg	Slipping after surgery is not uncommon. If you have severe and/or persistent pain, call your surgeon's office. If your pain is minimal and improves with time, 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 incision(s) and call your surgeon's office if you have any concerns.	
	Common signs/symptoms of an infection include : 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 1 year 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 6 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	Be sure you aren't sitting for extended periods of time throughout the day.	
front of my hip	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 from my hardware	Not routine, screws become problematic/painful/irritate, removed when enough healing is present. Easier surgery.
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.

After my hip surgery, <i>when can I</i>		
Begin my rehab	The day after surgery you will begin inpatient rehabilitation with a physical therapist in the hospital. They will help you move with a walker/crutches to get in and out of bed. You will also start some exercises that move your ankle, knee and hip. You may use a continuous passive motion (CPM) machine while you are in the hospital. This machine gently moves your hip to prevent stiffness and reduce pain.	
	You will begin outpatient rehabilitation a few days after you go home from the hospital. You will attend rehab 1-2x/week for the first few weeks. Once you are allowed 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 5-7 days after surgery, when you arrive home from the hospital.	
Take NSAIDs (Advil, ibuprofen, Aleve, etc)	Discuss with your surgeon before you take any medications. NSAIDs may prevent bone healing and are often avoided for a minimum of 4-6 months after surgery.	
Get in a pool/hot tub	You may not submerge your hip in water for a minimum of 2 weeks.	
Sleep on my side or stomach	You may sleep in any comfortable position. At first positions other than laying flat on your back will likely be uncomfortable, 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 around 6-8 weeks after surgery, and may be able to discontinue use of crutches 12 weeks after surgery. Your surgeon and PT/ATC will work together to allow you to walk as soon as safe for your hip.	
Drive	You may not drive while you are taking narcotic pain medication.	
	If your surgery was on your <u>left</u> hip and you drive a vehicle with an automatic transmission, you may drive approximately 3-4 weeks 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 <u>right</u> hip or you drive a standard transmission, you must have good muscular control before you can drive. Typically 8+ weeks after your surgery. For the first month, 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 month after you discontinue crutches 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	If you have any trips planned immediately following surgery, please make your surgeon aware. Flying immediately after surgery may increase your risk of developing a blood clot.
	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.
Go to the dentist	You should wait until there is enough evidence of healing until you undergo dental work, approximately 6 weeks after surgery. You will not require prophylactic antibiotics for any dental procedures following your hip surgery.
Return to work	It is recommended you take a minimum of 8 weeks off from work.
	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 16-24 weeks.
Return to school	High School students: It is recommended that you take 4-6 weeks off from school. We can supply you with a note to arrange for homebound tutoring during this time. When you do return to school, we can supply you with a note for needed accommodations such as an elevator pass, extra time to travel between classes, etc.
	<u>College students</u> : It is recommended that you take 4-6 weeks off from classes, schedule your surgery over break or arrange for online courses. If you return to campus while you are still recovering from surgery, please let us know so we can help facilitate necessary accommodations.
Participate in PE class	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).
Return to Running	It may be possible to run after your surgery, however there are many variables that will be considered by your surgeon. In some instances due to age, amount of damage within your hip, and the procedure performed, running is not allowed. If your surgeon decides running is an appropriate activity for your hip, around 4 months after surgery you may begin a gradual running progression, which will be guided by the hip rehabilitation team. This progression will be very slow and it will take some time until you return to your previous mileage.