

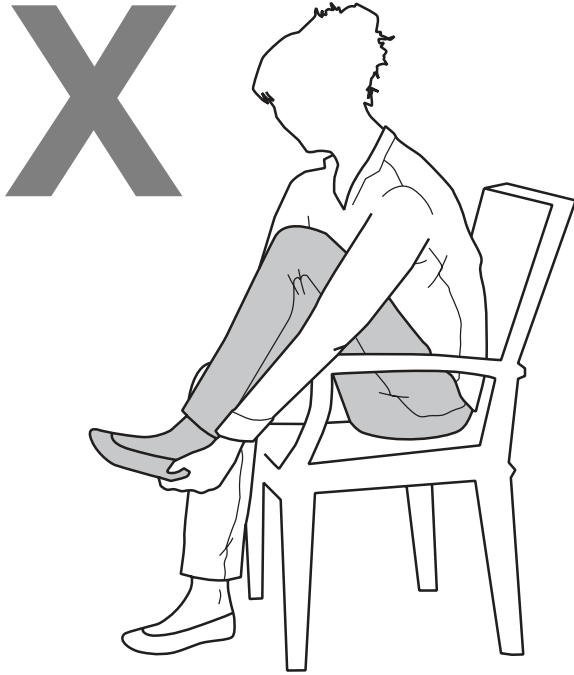
AFTER SURGERY

In this section, you will learn about:

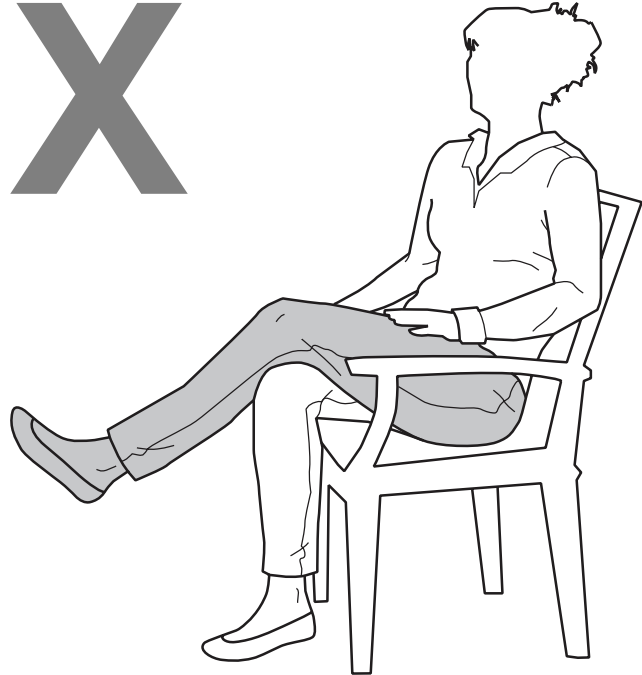
- Hip Precautions
 - Everyday Activity Guidelines
 - Transportation
 - Potential Complications and How to Prevent Them
-

HIP PRECAUTIONS

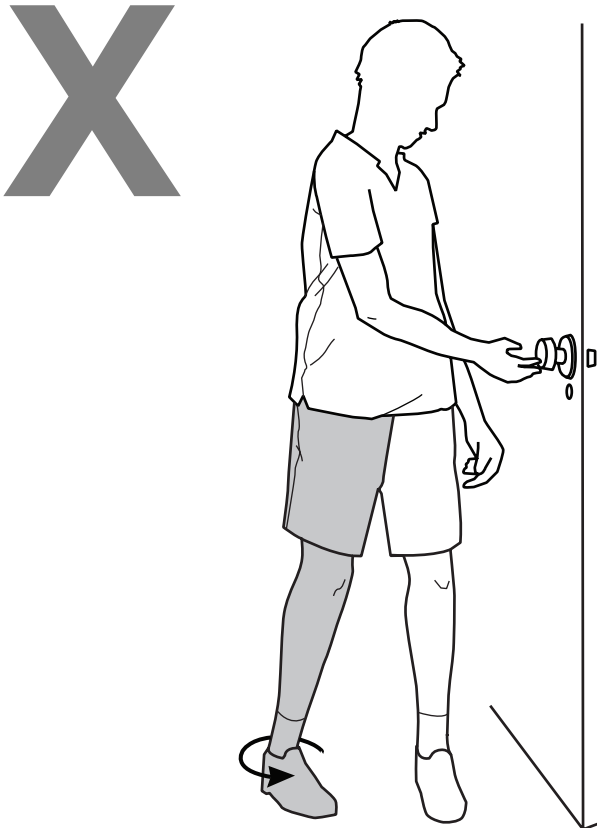
After hip surgery, you will need to follow hip precautions for 3 months unless otherwise advised by your surgeon. These activity restrictions will help your joint to heal and reduce the risk of hip dislocation.



DO NOT bend your hip past 90 degrees



DO NOT cross your legs at the ankles or knees



DO NOT twist your body or legs

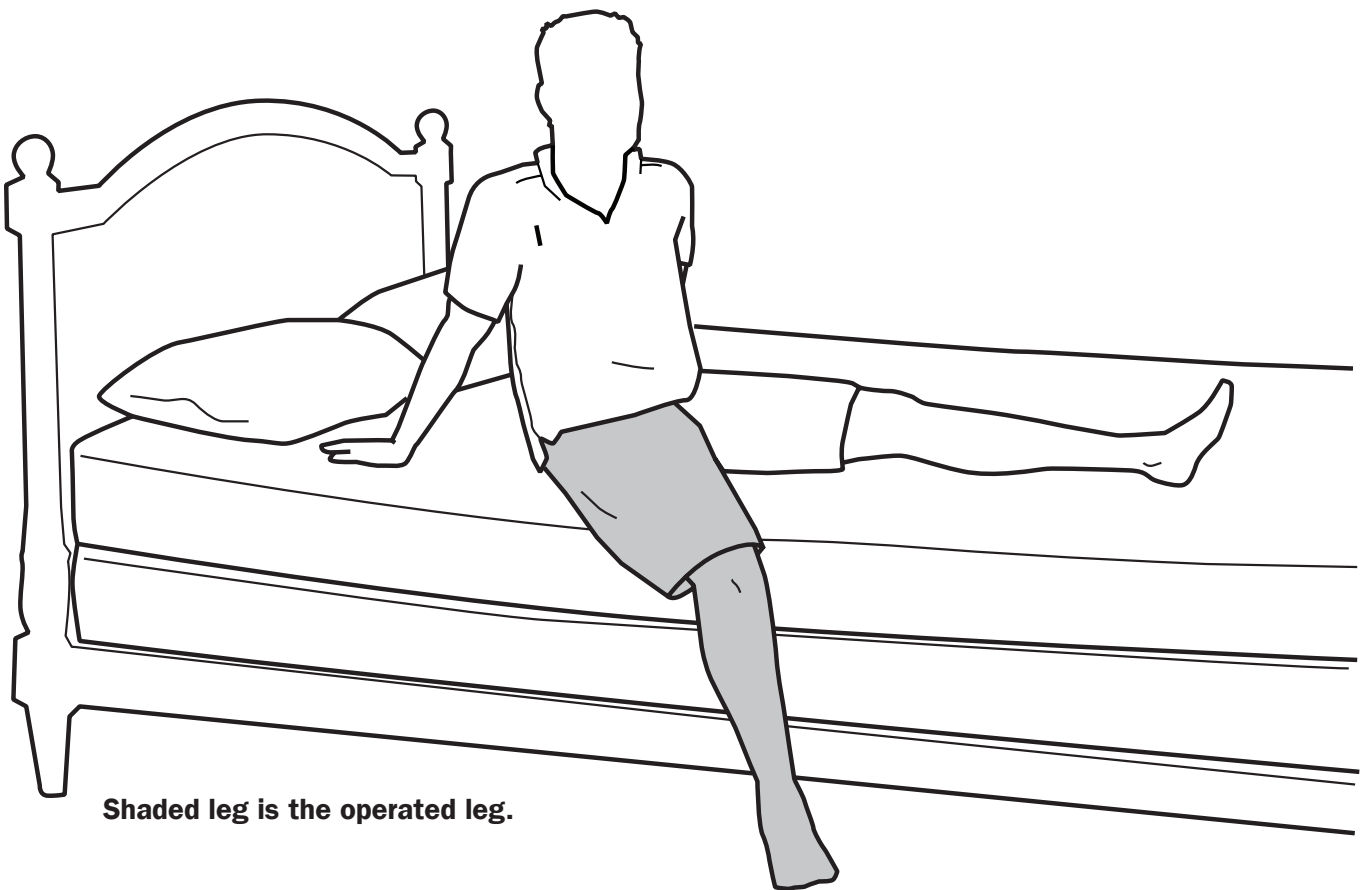
EVERYDAY ACTIVITIES GUIDELINES

Now that you understand the basic rules for protecting your new hip, you must look at how they apply to everyday activities. Your occupational therapist (OT) will review the safest way to manage these activities.

You must be careful whenever you change positions. This is the time when you are most at risk for dislocating your hip. Always think about how you are going to move and the position your hip will be in.

Getting into Bed

- Sit at the side of the bed. It may be easier to get into bed on your stronger side.
- Slide back across the bed, using your arms for support.
- If necessary, a half bed rail can allow you to get in and out of bed more easily.
- Lift your operated leg into bed, or use a “leg lifter” if needed.

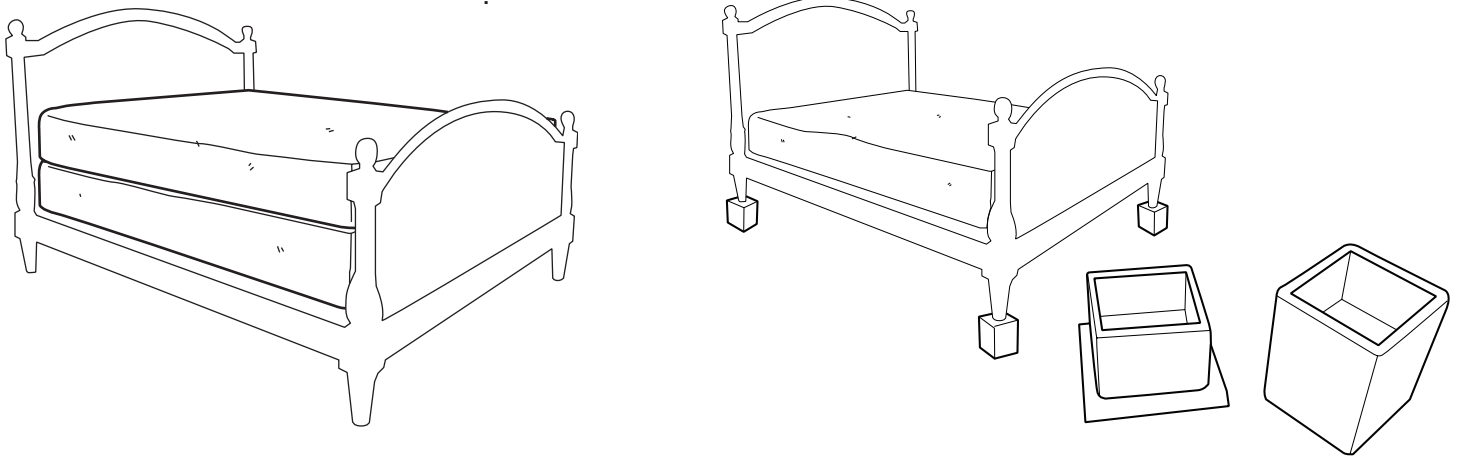


Getting Out of Bed

- Slide your body to the edge of the bed
 - Use your arms to push yourself to a sitting position.
 - Slide your operated leg off the bed
 - Bring your body to a sitting position at the bedside
-

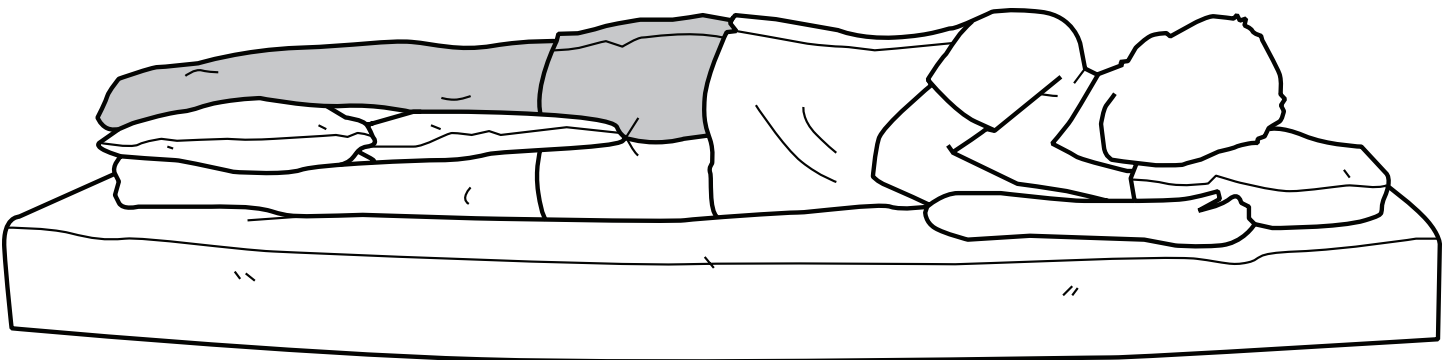
Lying Down

Make sure your bed is high enough so that when you sit down your knees are lower than your hips. If your bed is too low, add another mattress or place frame on bed blocks.



You may lie on your side but be sure to use the foam wedge or enough pillows between your legs to keep your knees at least 6 inches apart. Your nurse or therapist will show you how to turn onto your side safely.

Shaded leg is the operated leg.

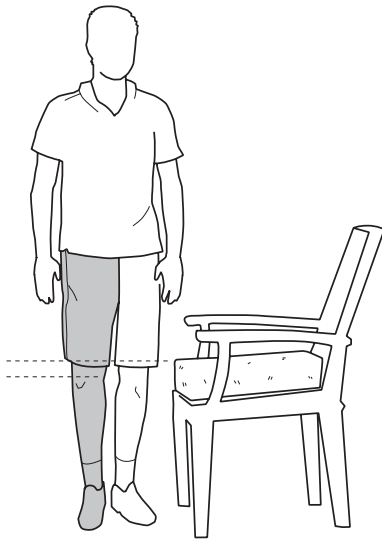


Sitting

Use chairs with firm straight seats and arms. Do not use rocking chairs. Chairs, which have angled seats, such as recliners, should also be avoided as they may put your knees up higher than you hip.

Check the height of any seat before you sit down. When you stand in front of a chair, the seat should be at least 1-2" higher than knee height.

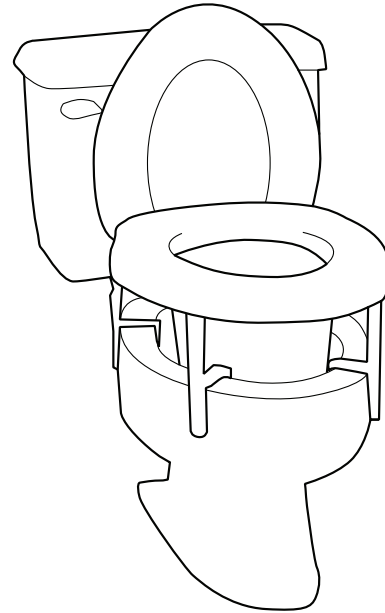
If you need to raise the height of a chair, you can place a firm cushion on the seat. You may also put special blocks under the chair legs. Your occupational therapist can explain this further.



Using the Toilet

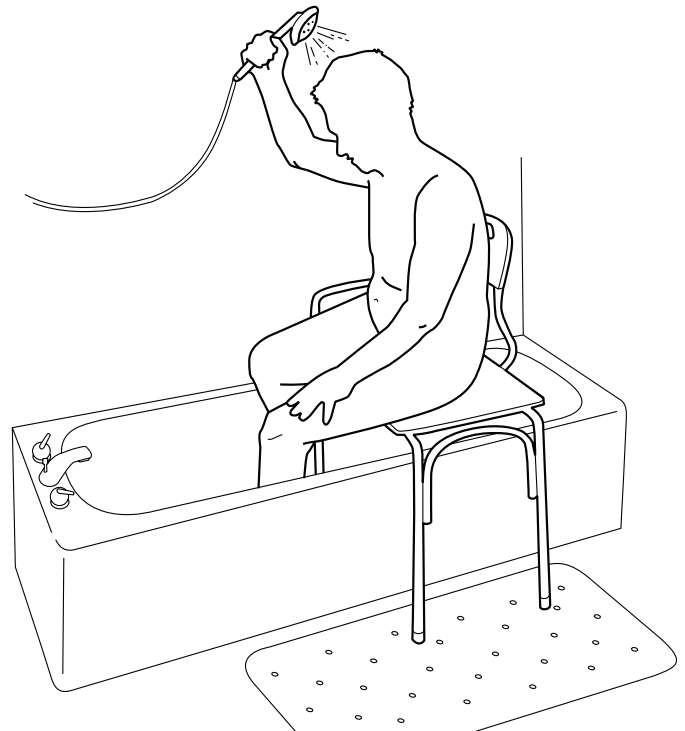
As with all seating, you need to make sure that the toilet is high enough. If the seat is lower than knee level, you may need to use a raised toilet seat. You may also need arms to help you sit down and get up more easily.

Some raised toilet seats have arms built in or a device called a toilet safety frame may be attached to the toilet to provide arms with adjustable height. Your occupational therapist will discuss options to secure this equipment during your recovery.



Bathing

- You must not get your incision wet. This means that at first you should sponge bathe.
- When the nurse removes your staples, you will be advised if you can get the incision wet. Do not climb into the tub.
- If you wish to shower in the bathtub, you may need to use a bath bench. Your occupational therapist can show you the proper kind and how to transfer safely. If you have a walk-in shower, you should use a seat with arms, or a chair and a grab-bar to get up and down safely. A long-handled bath sponge can be used to wash your legs and feet so you do not bend forward.
- Never use soap dishes or towel racks to hold onto. Serious injuries have occurred because they do not support a person's weight. Professionally installed grab bars should be used.



Dressing

Your occupational therapist will show you how to get dressed safely and independently. There are several assistive devices that can help you put your socks, shoes, and pants on and off. If there is someone at home who can help you to get dressed, you may not need to use these devices.

Steps to Dressing

- Choose loose clothing if possible
- Sit on the side of the bed or on a firm chair
- Have your equipment near you (reacher, sock-aid, etc.)
- Dress your operated leg first and undress it last

Remember your hip precautions:

- **DO NOT** lift your knee up higher than your hip.
- **DO NOT** bend forward.
- **DO NOT** cross your legs.



Shaded leg is the operated leg.

Stairs

While you are in the hospital, your physiotherapist will teach you how to go up and down the stairs.

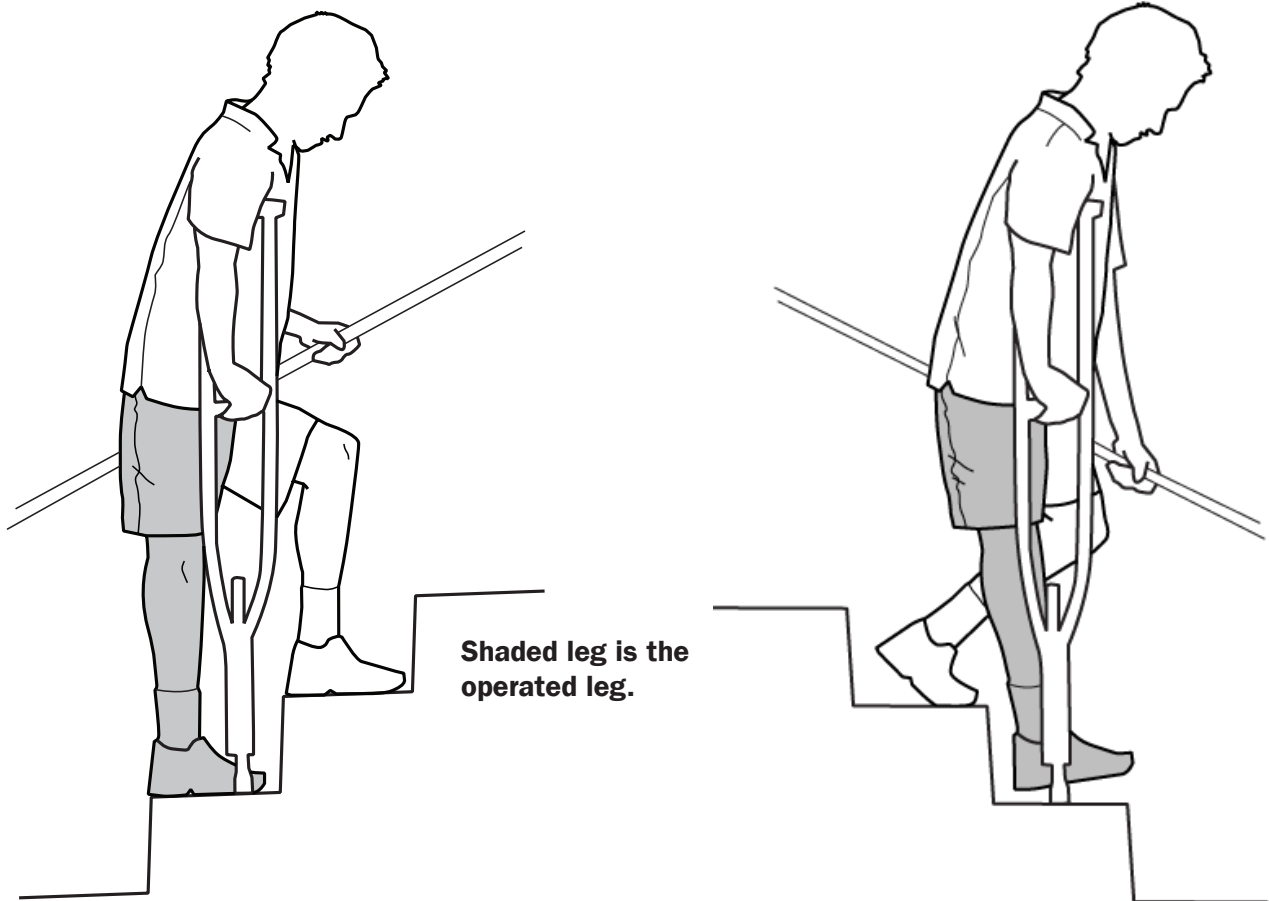
A handrail will make it easier and safer for you. Simply place one hand on the railing and both crutches (or canes) on the other side of your body. If you do not feel safe on stairs, have someone assist you.

Going UP the stairs:

- Use a handrail and/or crutches (cane)
- Step UP with your good (non-operated) leg first
- Follow with your operated leg and crutch (cane), one stair at a time

Going DOWN the stairs

- Use the handrail and/or crutches (cane)
- Place your crutch (cane) on the step below
- Step DOWN with your operated leg first
- Follow with your good (non-operated), one stair at a time



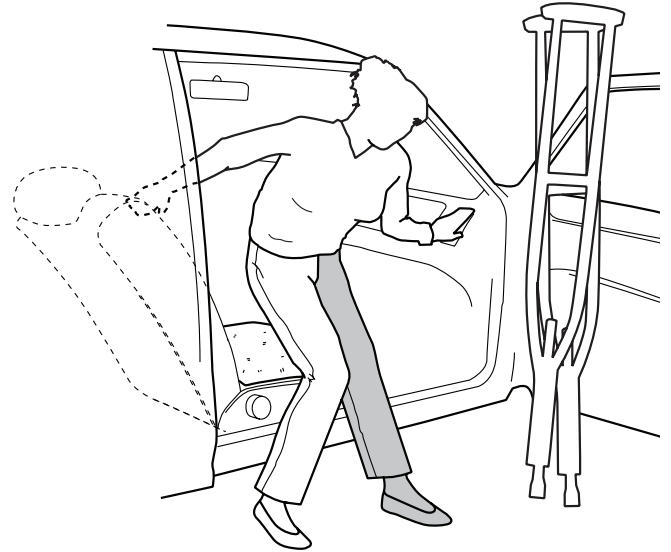
Remember- Good leg (non-operated) leads going up and bad (operated) leg leads going down.

TRANSPORTATION

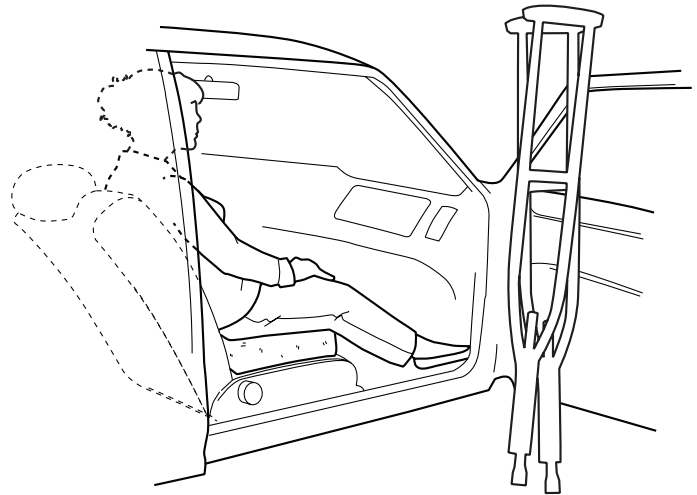
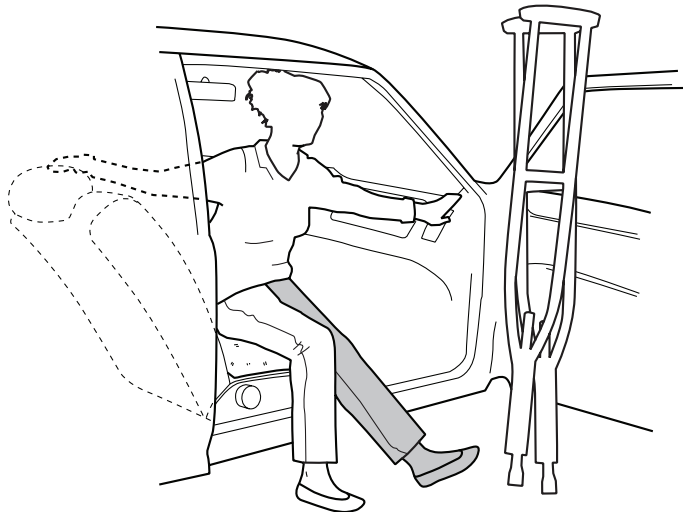
You should not drive any vehicle for at least 6 weeks after your surgery. Your surgeon will advise you further at your 6-week check-up.

To get into the car as a passenger:

- Have the driver park away from the curb if using a car. If you are using a van, SUV or truck, use the curb to stand on. If a curb is not available, bring a step stool or short box to step onto when getting in or out of the vehicle.
- Make sure the seat is pushed back as far as possible to give maximum leg room.
- Recline the back of the seat a little, so that you will not bend more than 90° as you turn and swing your legs.
- If the car seat is low, use a firm cushion to raise the height.
- Stand with your back to the car so you feel the seat touching your legs.
- Lower yourself slowly, keeping the operated leg forward.
- Slide well back in the seat.
- Swing your legs into the car gently as you turn to face forward.
- You may find it easier to transfer if you place a 'slippery' material over the seat or cushion (example: plastic garbage bag).



To get out of the car, use the same steps, in the opposite order.



Shaded leg is the operated leg.

Equipment Checklist

The occupational therapist will determine the equipment you need after your surgery. This equipment can be rented, borrowed from loan cupboards where they exist, or purchased on your own. If professional services are required from the NE CCAC after your surgery, equipment may be rented by the NE CCAC for up to 4 weeks.

Bathroom

- Raised toilet seat (With or without armrests)
- Toilet safety frame
- Non-slip bathmat
- Long-handled sponge
- Hand-held shower hose
- Shower chair
- Tub Transfer bench
- Removable tub clamp
- Grab bars

Dressing Equipment

- Sock aid
- Elastic shoelaces (otherwise use slip-on shoes with an enclosed heel)
- Long-handled shoehorn
- Long-handled reacher

Other

- Urinal
 - Commode
 - High-density (firm) foam cushion
-