



Total Hip Replacement

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In addition to the general total joint information packet provided, these pages will provide some extra details regarding the recovery process for total hip replacement. Having an excellent result is primarily centered around following hip precautions, along with reducing swelling, optimizing pain control and minimizing risk of complications.

- You will be following strict posterior hip precautions for 6-8 weeks after surgery. This means do not flex your hip up past 90 degrees, do not cross your legs and avoid turning your toes inward. You should sleep with a pillow between your knees at night and sleep on your back to avoid legs crossing midline. These are temporary restrictions that will be relaxed over time as healing progresses.
- A cold therapy machine is recommended following surgery. Ice is a very important part of the recovery process and should be used as frequently as possible, especially in the early weeks. Less swelling results in less pain and better mobility.
- Immediately after surgery you will have a wedge foam pillow between your legs. This is to prevent unsafe movement of your new hip as you wake from anesthesia. This may also be used at night at home, or a regular pillow may be used.
- Walker is used for all ambulation for 2-3 weeks; you may transition to a cane as recovery allows
- Avoid sitting in low, soft furniture or chairs without arms
- No driving for at least 3-4 weeks after surgery. To safely drive, you must be off narcotic pain medication and feel comfortable operating a vehicle, as well as entering and exiting the vehicle while maintaining adherence to hip precautions.
- Initial post op appointment will be made for you prior to surgery, generally within the first week following your procedure. Thereafter you are seen at 2-4 week intervals until approximately three months after surgery.

Activity goals and expectations following total hip replacement

The primary goals in the early weeks of hip replacement are to promote wound and soft tissue healing, and avoidance of movements that can prematurely stress the soft tissues in the back of the hip, resulting in dislocation. You will be educated prior to surgery about posterior hip precautions at a scheduled pre-op PT session, and how to do daily activities within these boundaries. It is helpful to have a family member attend this important session with you to make sure all questions are answered regarding post-surgical guidelines.

- Weeks 1-2
 - Walk frequently during the day with walker.
 - Hip exercises as instructed by preop therapy visit
 - Sleep on back, pillow between legs

- Begin outpatient PT-orders will be given at your first appointment post op
- Refer to general total joint information for additional instructions
- Weeks 3-8
 - Continue early hip recovery exercise/PT
 - Increase the amount of walking as tolerated
 - Transition from cane to walker
 - Discontinue narcotic pain, transition to over-the-counter medication as needed
 - Consider return to driving
 - Depending on job requirements, consider returning to light duty work
 - Hip precautions still in place
- Weeks 8-16
 - Continue hip strengthening exercises/PT
 - Hip precautions are relaxed, begin transitioning away from accessory safety equipment (grabber, elevated toilet seat etc.)
 - Return to work
 - Normalize gait
 - Resume light recreational activities

Items to aid in your recovery

Your ability to move your hip in certain positions is temporarily restricted for several weeks after surgery due to hip precautions. Below are some additional items to help you perform activities of daily living more easily and with greater independence. Most can be obtained from Amazon or local pharmacies.

- Toilet seat riser
- Grabber/reacher tool
- Sock aid, long shoehorn. Choose footwear that can slide easily but securely on your foot.



Please contact our office with any additional questions or concerns-thank you for allowing us to participate in your care!

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