

Hip Joint
Replacement
Surgery
at
Rochelle
Community
Hospital



Rochelle Community Hospital



After Surgery

This booklet is meant as a tool to help you achieve the best possible outcome from your recent total hip joint replacement surgery.

Partners in Your Recovery

Rochelle Community Hospital wants you to be successful in achieving a complete recovery. If at any time we can be of assistance, please don't hesitate to contact your healthcare partners:

Office/Department

XCEL Orthopedics
 Gadini O. Delisca, MD
 Harrison J. Swalla, MPAS, PA-C
 or Melanie Bonilla, RN
 Email: GDelisca@rcha.net

Phone

815-561-2774

Rehabilitation Services

815-562-2181, ext. 1140

Case Management, Kelly Morris, RN
 Email: KMorris@rcha.net

815-562-2181, ext. 2590

Anterior Hip Precautions

No forceful twisting at hips



Avoid excessive extension, such as stepping backward with operative leg



Anterior Hip Precautions continued

Avoid excessive hip extension, for example: when getting out of bed



All acceptable positions



Posterior Hip Precautions

No bending past 90 degrees



NO



NO



YES

Do not cross legs at all



NO



YES

No forceful twisting at hips



NO



YES

Strengthening Your New Hip

Ankle Pumps - Do 10 every hour.



Heel Slides - Bend your knee, sliding it toward your buttocks and keeping your heel on the bed. Do not let your knee roll inward.

Work up to 10 reps, 3 times per day.



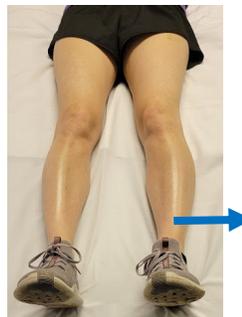
Thigh Squeeze - Tighten thigh muscles and straighten your knee, hold for 5-10 seconds.

Work up to 10 reps, 3 times per day.



Leg Slides - Slide your leg out to the side, keeping your toes up and your heel on the bed. Slide back to midline, do not cross the center of body.

Work up to 10 reps, 3 times per day.



Buttock Squeeze - Tighten buttock muscles, hold for 5-10 seconds.

Work up to 10 reps, 3 times per day.



Knee Extensions - Place a rolled towel or ball under your knee. Lift your heel, straightening your leg while tightening your thigh muscle, hold for 10 seconds. Work up to 10 reps, 3 times per day.



Patient and Support Coach Jobs

Day of Surgery	
<i>What Should I Do?</i>	<ul style="list-style-type: none"> • Ask for assistance from staff (RN, therapist, or aide) to get up from bed or chair. • Ice your hip often. (You need to ask for ice and ice refills.) • Start your exercises. • Let staff know if you have pain, ask for pain medicine.
<i>Prevent Pneumonia And Blood Clots</i>	<ul style="list-style-type: none"> • Use your incentive spirometer 10 times every hour. • Wear your compression sleeves (SCDs) on both calves at all times, unless you are walking. • If your compression sleeves (SCDs) are not on, or you don't feel them squeezing, please let staff know. • Wear TED Hose on both legs.
<i>Diet</i>	<ul style="list-style-type: none"> • You may be hungry, but your stomach may not be able to tolerate solid food yet. Nausea and vomiting are common after surgery. Listen to your nurse.
<i>What should I know?</i>	<ul style="list-style-type: none"> • Some of your home medications may not be given during your hospital stay, i.e., some blood pressure medication, some diabetic medication. • Do NOT take your own medication. All of your medications will be given to you by your nurse.
<i>How do I prevent falls?</i>	<ul style="list-style-type: none"> • Always use your call light to ask for assistance to get up from bed, chair or to go to and from the bathroom. • Expect staff (RN, PT, OT or Aide) to use a gait belt and walker to assist you in walking. • Expect staff to remain with you in the bathroom for your safety for the first 24 hours (effects of anesthesia can last days after surgery).

Patient and Support Coach Jobs

Day One After Surgery	
<i>What Should I Do?</i>	<ul style="list-style-type: none"> • Have your Support Coach arrive by 8:00 a.m. • Let RN know when you urinate (there should be a hat in the toilet). The RN will need to do a bladder scan immediately after you urinate. • Ask for assistance from staff (RN, therapist, or aide) to get up from bed or chair. • Ice your hip often. (You need to ask for ice and ice refills.) • Keep leg straight. Do not put blankets or pillows under your knee.
<i>Prevent Pneumonia And Blood Clots</i>	<ul style="list-style-type: none"> • Continue your exercises. • Use your incentive spirometer 10 times every hour. • Wear your compression sleeves (SCDs) on both calves at all times, unless you are walking. • If your compression sleeves (SCDs) are not on, or you don't feel them squeezing, please let staff know. • Wear TED Hose on both legs.
<i>Diet</i>	<ul style="list-style-type: none"> • You may be ready to eat a regular diet, but eat slowly.
<i>What should I know?</i>	<ul style="list-style-type: none"> • Some of your home medications may not be given during your hospital stay, i.e., some blood pressure medication, some diabetic medication. • Do NOT take your own medication. All of your medications will be given to you by your nurse.
<i>How do I prevent falls?</i>	<ul style="list-style-type: none"> • Always use your call light to ask for assistance to get up from bed, chair or to go to and from the bathroom. • Expect staff (RN, PT, OT or Aide) to use a gait belt and walker to assist you in walking. • Expect staff to remain with you in the bathroom for your safety for the first 24 hours (effects of anesthesia can last days after surgery).

Patient and Support Coach Jobs

Pain Management

<p>How Do I Manage My Pain Here AND At Home?</p>	<ol style="list-style-type: none"> 1. Ice often (20 minutes every hour when awake or 20 minutes on and 20 minutes off). Ice prevents swelling which helps prevent pain and stiffness. 2. Elevate your leg at all times to reduce swelling. 3. Take acetaminophen (Tylenol) on a regular basis; either 500 mg every 4 hours or 1000 mg every 8 hours. 4. Take the narcotic pain medication as needed. Speak with your Orthopedics care team if you have any questions about your dosage or taking the medication appropriately. We want you to stay ahead of the pain.
<p>Medication Refills</p>	<p>REFILLS: After you go home if you need refills for your narcotic pain medication, you must call the clinic during regular business hours (Monday-Friday 8 a.m.-5 p.m.). We cannot fill narcotic prescriptions after hours or weekends/holidays.</p>

Going Home

Keys to Discharge

Most patients are discharged the day after surgery.

- Support Coach here
- Tolerating Diet
- Comfortable on oral pain medication
- Met Physical Therapy Goals
- Met Occupational Therapy Goals
- No difficulties urinating after Foley catheter is removed
- Must have 2 bladder scans less than 250mL (2 separate voids)
- Walker is delivered to room (if needed)
- Discharge order placed in computer by MD / PA-C
- Prescription picked up/e-prescribed to your Pharmacy
- Patient has copy of Home Care Plan

Going Home

Final Steps

- Nurse reviews discharge instructions.
- Nurse removes IV and all medical related equipment.
- Nurse/CNA will take you to the front entrance in a wheelchair, your support coach can pick you up at the entrance.
- Call Dr. Delisca's office at 815-561-2774 to schedule your post-operative appointment within 10-14 days after surgery.

