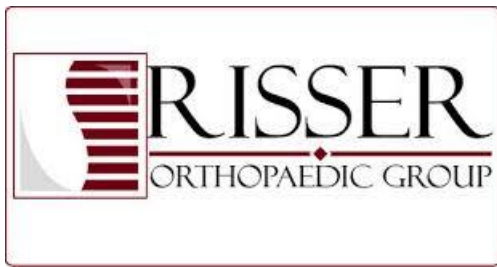




## Total Hip Replacement Instruction Sheet

- 1. Definition:** A total hip replacement is a surgical procedure to change an arthritic (or worn out) hip with one made from metal and plastic. Typically a 4-inch incision is made over the front (anterior aspect) of the hip to allow access to the joint itself. A series of precise bone cuts are then made to allow for the new implant. Trial components and x-ray imaging are utilized to ensure proper fit for stability, limb length, and range of motion. The trial components are then removed and your new hip is press fit into place. Surgical risks are estimated at 1% and can include bleeding, infection, blood clots, fracture, and dislocation.
- 2. Pre-op:** Once you and Dr. Laster have decided to proceed with a hip replacement, Dr. Laster's assistant, Allana Hunt, will schedule a surgery date. Dr. Laster will see you one week prior to your surgery for a pre-op appointment. This visit will allow you to ask any questions you may have regarding the surgery. Allana will arrange for any preoperative labs or tests that need to be completed prior to the surgery. Pre-operative blood donation is not typically required. Allana will also help arrange for any internal medicine or cardiology appointments required for surgical clearance. A joint replacement class is offered at the hospital and patients are strongly encouraged to attend prior to their surgery date.
- 3. Day of surgery:** The typical arrival time to the hospital is two hours prior to your actual surgery time. Be sure to wear comfortable, loose fitting clothes. Please do not apply any creams or lotions to the operative extremity on the day of surgery. One of the staff at the facility will check you in and you will change into a gown. An intravenous (IV) line will be started in one of your veins and you will be given a pre-operative antibiotic. Please let the staff know if you have any drug allergies. You will have a chance to talk to the anesthesiologist at this time. Typically you will be given a spinal anesthetic and a general anesthetic. Dr. Laster will also see you prior to your surgery to mark your operative hip with a pen. You will then be taken back to the operating room and the hip replacement will be performed. The procedure should last about 2 hours.
- 4. Post op:** Once the hip replacement has been completed you will be taken to the recovery room. Dr. Laster will meet any family members or friends in the waiting room at this time to discuss the findings of the case. You will be in recovery for one to two hours before you are transferred to your hospital room. Family members are then free to visit with you there.
- 5. Hospital Course:** Once you have arrived in your hospital room your nurse will make sure that you are comfortable. Your usual diet is resumed at this time. Your pain management will be monitored by the pain service (run by the anesthesia department). Physical therapy will start either the day of surgery or the next post-operative day. You will be placed on a blood thinner (typically aspirin twice a day for 30 days) to prevent blood clots. Usually there is no weight bearing restriction on the operative hip although you will require a walker to assist in ambulation. An abduction pillow will be placed between your legs for the first post-operative night and discontinued the following morning. Usually, there are no "hip precautions" following a hip replacement done through the



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anterior approach. Dr. Laster (or one of his partners) will see you daily while you are an inpatient. On the second post-operative day the hip dressing is removed and the urinary catheter is discontinued. You are typically allowed to shower on this day. After 2 or 3 days in the hospital you will be discharged either to home or to an extended care/rehabilitation facility. Dr. Laster and the social workers at the hospital will assist in this decision. If you go home Dr. Laster will write you a prescription for pain medication.

- 6. Aftercare:** Post hospital physical therapy will be arranged through a home health agency. Usually, a physical therapist will come to your home to perform an intake interview. They will then see you twice a week for the next 2 to 4 weeks. If you are at a rehab facility you will receive your physical therapy there. Dr. Laster will see you in the office 10-14 days after the surgery. X-rays are performed and the incision is inspected at this time. It is normal to have swelling and bruising of the extremity at this time. Arrangements for outpatient physical therapy are usually discussed at this visit. Your next appointment will be one month later (at 6 weeks post-op). Your swelling and bruising should be improved and driving is usually allowed at this time. Overall recovery time is estimated at 6-12 weeks although results can vary. Most total hip replacement patients feel that they are significantly improved by 6 weeks. After 12 weeks you may resume your usual activities. Although there is no general consensus amongst orthopaedic surgeons regarding post replacement activity level, Dr. Laster feels it is safe to resume all activities short of recreational running. Oral antibiotics (4 tablets one hour prior to cleaning/procedure) are required for dental procedures two years after your operation. Dr. Laster or your dentist will provide the prescription.

Questions? Please call or email:

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