

What happens *AFTER* my hip surgery?

Hospital Day	Physical Therapy	Occupational Therapy	Nursing/Case Management
Day of Surgery	Recover from surgery in your room.	Recover from surgery in your room.	Although bedfast, you will be instructed to cough, deep breathe, and blow into a device that encourages you to expand your lungs; You will have a dressing to your hip, and possibly a drain, which will be monitored; You'll be able to take fluids and progress to your regular diet; There will be different options for pain control which will be discussed with you, and pain will be aggressively managed.
Post Operative Day #1	Initial visit to assess your mobility in bed and to the chair using walker; try to sit in the chair for 15-30 minutes; walk 15-25' with walker; teach easy leg exercises and hip precautions.	Initial visit to get background on pre-surgery abilities and home obstacles with bathing/dressing; begin self bathe at bedside; look at equipment needs for home.	Nursing will work in tandem with therapy staff to begin mobilization; Medication needs will be attended to; The surgical wound will be monitored; Continue with deep breathing exercises; The Case Manager will work with therapists to assess home needs for discharge.
Post Operative Day #2	Continue working on improving bed mobility and confidence with transfers to the chair; sit in the chair for 30-60 minutes at a time; walk 25-50' with walker; continue to emphasize hip precautions and easy leg exercises. Begin to discuss discharge plans.	Continue with self bathe at bedside focusing on post operative hip precautions ; issue and train you on use of long handled sponge for bathing; practice dressing techniques using adaptive equipment with correct hip precautions; discuss discharge plans and possible equipment needs upon discharge; continue to practice transfers to/from chair or bedside commode.	Nursing will encourage activity and reinforce hip precautions; Medical management will continue in regards to your medications and wound care; Fluid intake and nutrition will be encouraged.



Hospital Day	Physical Therapy	Occupational Therapy	Nursing/Case Management
Post Operative Day #3	Continue to emphasize hip precautions; continue to work on transfers in/out of bed, chair, and other household surfaces; walk 50-100' with walker on level surfaces; practice maneuvering a curb with walker; increase leg exercises.	Continue to practice self care techniques with the adaptive equipment; teach shower/bathroom safety with shower; continue to practice safe dressing techniques utilizing adaptive equipment; recommend discharge equipment to physician; continue to practice transfers.	Continued collaboration with therapy staff to encourage mobility and emphasize hip precautions; Transition to oral pain medications as discomfort decreases; Continue to monitor surgical site; Case Manager remains involved in planning for discharge.
Post Operative Day #4	Continue to emphasize hip precautions; continue to work on transfers and leg exercises; increase walking distance to 80-120'; practice 2-3 steps using walker/rails; recommend discharge needs to physician regarding equipment and continued therapy needs.	Continue to work with adaptive equipment and getting dressed and grooming self; practice moving in the kitchen and other home scenarios with walker for basic safety and independence; continue to make discharge recommendations for equipment and continued therapy needs.	Therapy continues; Nursing continues medical management; Begin to assess learning needs for home medications, skin care, exercises; Reinforce hip precautions.
Post Operative Day #5	Begin to prepare for discharge; increase walking distance to 150' with walker; teach family how to help with getting in/out of car safely, how to help at home, and the importance of hip precautions after leaving the hospital; continue to practice transfers.	Begin to prepare for discharge; train the family as needed on bathroom/home safety, techniques for dressing and bathing; continue to practice dressing and grooming techniques with hip precautions.	Begin to prepare for discharge; Address identified learning needs with patient and family; Reinforce the importance of continuing exercises and hip precautions at home; Case Manager arranging for equipment or therapy that will be needed after discharge.
Post Operative Days #6-7	Continue with above plans in Day #5 working towards independence and safety.	Continue with above plans in Day #5 working towards independence and safety.	Continue with above plans in working toward independence and safety.

Hip Precautions for MOST Total Hip Replacements

1. *Do not* let your surgery leg cross the middle of your body.
2. *Do not* let your surgery hip be lower than your knee when you are sitting.
3. *Do not* let your knee on the surgery side roll in towards the other leg.

***If your surgeon chooses a different surgical approach that would change your post operative hip precautions from above, your therapy team and nursing team will help you adjust your therapy according to the surgeon's recommendations.