Hip Replacement Surgery: Home Instructions

Now that you’re home after your hip surgery, your homecare team will help you to continue to get better. And there’s a lot you need to do to help your hip recover. This handout has information on how to care for yourself by:

- Protecting against infection
- Caring for the surgery site
- Preventing swelling
- Taking medication and following a diet that helps your medication work well
- Protecting your new joint
- Using assistive equipment
- Following an exercise plan to help you heal
- Knowing who to contact when you need help

Following these instructions carefully will help you get better faster.

Protecting against infection

After surgery you have a greater chance of getting an infection, but you can take action to avoid this.

Good handwashing is the most important thing you — and those who care for you — can do to prevent infection. Wash your hands before you touch the area where your surgery was done.

Call your doctor if you notice symptoms that might mean an infection is starting:

- Fever (an oral temperature over 101°F)
- An increase in redness or swelling at the area of your surgery, or the area feeling hot to the touch
- An increase in amount of drainage from the surgery site, or the drainage changing color
- A lot more pain (different from the pain when you increase your activity)

Breathing deeply will help prevent a respiratory infection following surgery. You started deep breathing exercises in the hospital and you’ll want to continue now you are home.

- Take deep breaths every hour until you are back to your usual level of activity.
- Do your breathing exercises — use a spirometer if you were given one in the hospital.

Caring for your surgery site

If your wound is closed with staples: If your doctor closed your wound with staples, you’ll get instructions on how to clean the area and change the dressing. Your doctor may want you to leave the dressing on as long as it is clean and dry, or may want you to change the dressing. The staples will be removed by your doctor or physical therapist.

If your wound is closed with steri-strips: On your surgery site you may have special strips of tape called steri-strips. Steri-strips help keep the skin closed while it heals. Leave the steri-strips on until your healthcare provider tells you it’s okay to remove them. It’s okay to get the steri-strips wet in your shower — just gently pat the area dry when you are done.
Showering: Unless your doctor tells you otherwise, you can shower once you are home and can safely move in the bathroom. Getting in and out of the shower can be very tiring. The heat from the shower can be soothing, but it may make you more unsteady. At first, you’ll need help with your shower so you don’t fall. Use a tub bench or chair in the shower.

Special instructions about the surgery site:
- Cover with clean gauze
- __________________________

Preventing swelling
Swelling around your surgery site will increase your pain and make your joint stiff. To prevent this:

- **Keep your leg elevated** when you are lying down.
- **Wear your compression stocking** for the number of weeks your doctor has prescribed (see below). Unless your doctor tells you otherwise, you may leave it off for an hour or so each day.
- **Use an ice pack** over the area of your surgery to help control swelling. Your doctor or therapist will tell you how long to keep using ice packs.

Special instructions to prevent swelling:
- Wear your compression stocking _______ weeks.
- Apply ice pack ________________________

Taking pain medication
Getting your pain relieved will help you rest better, exercise and participate in therapy. Now that you’re home and more active, you may need more pain medication. It’s important to **take your pain medication just like your doctor tells you**. This will help you get better faster and avoid complications. Also follow these tips:

- Don’t drink alcohol while you are taking pain medication.
- Tell your doctor when your pain medication is running low — you don’t want to run out, especially after hours or over the weekend.

- Your pain medication is:

Taking anticoagulant medication
Following your surgery, your doctor wants you to take an **anticoagulant** medication to keep your blood from clotting too easily while you are healing.

**Your doctor has ordered these anticoagulants:**
- Coumadin (by mouth) at night
- Lovenox or Arixtra (injection in the skin)

**Special instructions about anticoagulant medications:**

**About Coumadin (warfarin)**
Take Coumadin exactly as your doctor instructs. It’s important to have just the right level in your blood. If the Coumadin blood level gets too high, you might bleed too easily. If it gets too low, your blood might form a clot in your veins.

- **Blood testing:** Your doctor will regularly order a blood test to monitor your Coumadin levels. This blood test is called a **PT/INR** and it measures the ability of your blood to clot.

- **PT/INR goal:** Your doctor will set a goal for your PT/INR level. You need to track your PT/INR test results, as well as how much Coumadin you are taking. The Intermountain patient fact sheet **Total Hip Exercises**, which you will use daily to track your exercises, also has a chart where you can track your Coumadin and PT/INR level.

- **Eating plan:** Since there are many foods that affect Coumadin, you may need to make some changes to your diet. See “**Foods affecting Coumadin**” on page 3 for more details.

**About Lovenox (enoxaparin) or Arixtra (fondaparinux sodium)**
If your doctor wants you to take either Lovenox or Arixtra, you will be taught how to give yourself an injection.
Foods affecting Coumadin

To help keep a steady level of Coumadin in your blood, do this:

- **Be consistent with Vitamin K.** Coumadin levels in your blood rise and fall when you change the amount of foods you eat that are high in Vitamin K. This makes it hard to keep the medicine at the right level. **Each day,** eat a **consistent amount of foods with Vitamin K:**
  - Green vegetables such as dark green lettuce, cucumbers (unpeeled), broccoli, green peas, green beans, brussels sprouts, avocado, asparagus, and cabbage
  - Cauliflower
  - Soybean and canola oils

- **Avoid or limit alcohol.** Drinking can affect your PT/INR level, making it difficult to manage your Coumadin dose. If you drink and don’t want to quit, be consistently moderate in your alcohol intake.

- **Limit cranberry juice.** Drink no more than ½ cup per day. More than that will affect your blood level of Coumadin.

**Check with your doctor before using teas, herbs, or supplements.** Green tea, black tea, tea leaves, seaweed, and alfalfa are known to interact with Coumadin.

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Precautions

While your hip heals, there are certain positions and movements that could cause your new hip joint to come out of the socket (dislocate). The precautions you need to follow are specific for how your hip surgery was done.

- **If your incision is in back, along the buttck or along the side of the leg:**
  - Do not cross your legs or ankles in any position — sitting, standing, or lying down.
  - Turn away from your surgical leg when you are standing. For example, if your surgery was on the left leg, turn to your right.
  - Do not flex your hip more than 90 degrees (like the letter “L”) in any position — sitting, standing, or lying down.
    - Do not lean forward in a chair. Keep your knee below the level of your hip when you are sitting.
    - Do not bend over at your hip.
  - Do not turn your toes inward (“pigeon toes”) when you are sitting, standing, or lying down. Follow this precaution for at least 3 months after your surgery. Why? It takes a while for your ligaments and muscle tissue to completely heal and support your new joint.

- **If your incision is in front, on your thigh:**
  - Do not rotate your knee or foot out while bringing your leg back. Examples of this include kicking a ball with the arch side of your foot, or a plié move in ballet.

**Be safe with stairs.** Your doctor may not want you to climb stairs unless you have assistance or hand rails in your home. Follow the instructions from your doctor or physical therapist. If stairs are permitted by your doctor, there are a few things to keep in mind to be safe:

  - Avoid stairs if you are unsteady or dizzy.
  - Climb the stairs one at a time. Do not switch feet for each new stair.
  - Use crutches if instructed by your physical therapist. He or she will have you practice stair climbing, if needed.
Be careful with bearing weight. Your doctor may want you to limit the amount of weight you place on your affected leg. Follow your doctor’s instructions carefully, so you heal properly. If you have a walker or a cane, use it as instructed by your physical therapist.

**Special instructions about bearing weight:**

- Full weight bearing
- Partial weight bearing
- Non-weight bearing

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**Using assistive equipment**

You may use assistive equipment to help you with tasks while you are recovering at home. This equipment will help you function while keeping your new hip in a safe position. You may have:

- A tool to reach items
- A raised toilet seat
- A sponge with a handle for the shower or bath
- A device to help you put on your shoes or socks
- A large pillow to place between your legs to help keep your legs in the correct position (this looks like a tall triangle)

Consistently use any assistive equipment you have. Keep using these devices until your therapist says you no longer need them. They will make it less likely for you to damage your hip.

**Following a physical therapy plan**

Your physical therapist has created an exercise plan to strengthen and retrain your muscles as you get used to using your new joint. See the Intermountain patient fact sheet *Total Hip Exercises* for more information. Keep these tips in mind:

- Stop exercising when you feel excessive pain.
- Be careful to do each exercise just as you were taught. You are retraining your muscles — and the movements you learn now will affect how well the joint works once you are healed. By doing your exercises just as your therapist instructs, you are more likely to make a full recovery.
- Keep your knee aligned with your hip when you are exercising or walking.

**Getting help**

**Call your doctor** if you notice signs that might mean there is a problem starting. These include:

- Signs of an infection, such as fever, more redness or swelling, skin that feels hot, more drainage, drainage that changes color, or more pain
- Bleeding (for example, bruising or nosebleeds)
- Any new symptom, such as pain that gets worse or doesn’t go away with medication

**Call the doctor even after hours** if you have symptoms of a deep vein thrombosis (DVT), a clot forming in your lower leg. Watch for:

- Pain or tenderness in the calf of your leg that gets worse when you pull your foot forward
- Increased skin temperature over your calf

If you notice these symptoms, do not massage your calf and get to the doctor right away. If the doctor isn’t available, go to the Emergency Room.

**Call 911** if you have severe bleeding, chest pain, or severe shortness of breath.

**Call your physical therapist** if you have questions about the exercises that can’t wait until your next therapy session, or if you need to change a visit time.

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