

Orthopedic Care

Anterior Minimally Invasive Hip Replacement

How to Get the Best Possible Outcome
from Your Surgery



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Welcome + Overview

Welcome to Hip Replacement Class

Look Forward to Less Pain, More Mobility and Improved Health

Now that you and your doctor have decided hip replacement is right for you, it's time to prepare for your surgery and recovery. There's much you can do to achieve the best possible result. Positive thinking, healthy habits and therapeutic exercise make all the difference.

Here's a Quick Overview of What to Expect:

Attend Preoperative Class with Your Caregiver

Pre-Op class lets you ask questions of our joint replacement experts — nurses, therapists, pharmacists and case managers. We want you to be well informed so you can take an active role in your recovery. But we don't want you to do it alone. Bring a devoted caregiver to class — like a friend or family member. Their personal support and practical help will benefit you greatly during recovery. So please bring them to class.

Surgery Registration and Pre-Op Lab Tests

We will help you schedule the tests you need before surgery. Your Pre-Op lab work and necessary tests will be ordered by your doctor and will be completed at the hospital or arranged by your doctor's office. Our staff will tell you when to register for surgery.

Prepare Your Home for Recovery

One to two weeks before surgery, you will want to make all needed arrangements with your caregiver, provide yourself with healthy foods — then clear your house of obstacles and your mind of worries.

Take Steps to Prevent Infection

At home, the day before surgery, you will launder the sheets, towels and pajamas you'll use that night. That night (the night before surgery), you'll give yourself a "Pre-Op" wash to reduce the amount of bacteria on your skin. In your Pre-Op class or Pre-Op appointment, our nurse will give you instructions and soap to cleanse your skin.

Day of Surgery

You'll arrive two hours before the time of your surgery, spend one to three hours in surgery and approximately one hour in the recovery room. Soon after that, the staff will help you get up and about.

Return Home for Recovery Time

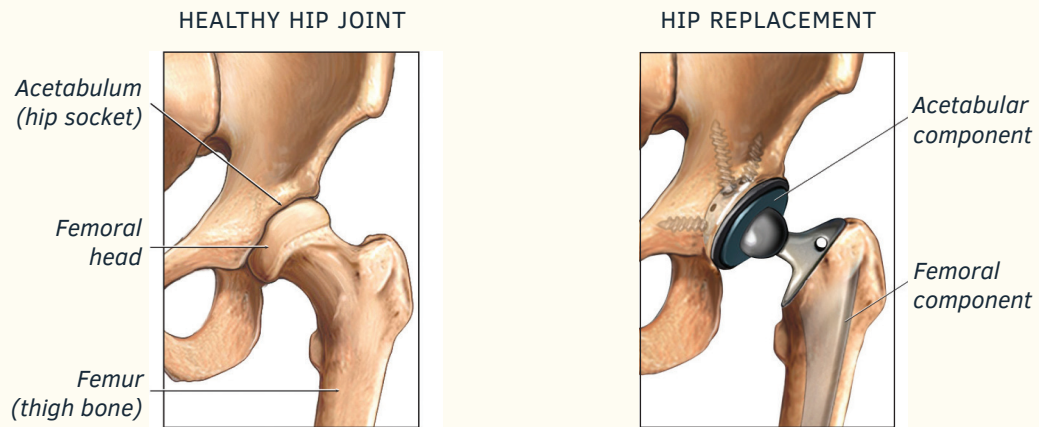
This is an exciting time! You'll soon feel less pain and enjoy a more active life. But each patient is unique. Your care team will decide when you can go home (or in a very few cases, to a rehabilitation facility). Generally speaking, you'll be able to do most of your normal daily activities in three to six weeks, if you follow your recovery guidelines.

Anatomy Review

Hip replacement surgery means the worn ends of the bones causing pain in your hip joint will be removed and replaced with new, artificial parts. At this point, your surgeon has discussed this with you in detail and has chosen the surgical method that is right for you.

For Patients Undergoing the *Anterior Approach* for Hip Replacement:

In anterior hip replacement, your surgeon makes a small incision through the front of the leg, avoiding muscle tissue to access the hip joint. With this surgical technique, there are few limitations in mobility. Your therapists will discuss these with you.



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The Anterior Minimally Invasive Approach

Advantages of the Anterior Minimally Invasive Approach

Total hip replacements can now be safely performed through minimally invasive surgery (MIS), utilizing small incisions. However, not all MIS approaches are alike, and most have similar or higher complication rates compared to standard approaches. Orthopedic surgeons at El Camino Health use the anterior MIS approach because of its tremendous advantages over all other MIS and standard techniques.

A major advance in hip surgery, the anterior MIS technique involves placing a total hip prosthesis through a small three- to four-inch incision in the front of the hip joint. El Camino Health was one of the first adopters in the nation to utilize this advanced surgical approach. The benefits of this approach include the following:

1. No total hip precautions are needed postoperatively to prevent dislocation. All other MIS and standard techniques require three months of not being able to bend past 90 degrees at the waist, not sitting on low chairs, not crossing your legs, and utilizing a large wedge pillow between your legs during sleep. None of these precautions are necessary with the anterior approach.
2. The dislocation rate is significantly lower (0.3–0.5 percent rate of dislocation with the anterior MIS technique versus 3–5 percent with standard and other MIS techniques).
3. This technique allows the surgeon to operate through an interval in the muscles, without having to cut through muscle tissue. Because the muscles are spared, there is less post-operative pain and a shorter time before walking without a cane. This allows for a more rapid return to work and recreational activities.
4. X-rays are used during surgery (fluoroscopy). This enables immediate confirmation of proper implant alignment and a more accurate assessment of limb lengths. The surgeon can easily make adjustments during the procedure, ensuring consistently good outcomes.
5. The anterior MIS technique has a long, safe, and reproducible track record. This procedure has been performed successfully in Paris, France, since the 1960s. Surgeons in the United States have been using the anterior MIS approach for the past 20 years with consistently good results.



Preparation

Attend Preoperative Class

Get Ready to Take Notes and Ask Questions

You must attend Pre-Op Class so you'll know what to expect from your hip replacement surgery — from preparation to the day of surgery and throughout your recovery. Successful recovery takes planning, awareness and involvement on your part.

Our joint replacement experts lead the class. They are the members of your medical team who support your surgeon and anesthesiologist. They may include nurses, case managers to coordinate your care, occupational therapists who help you with self-care activities, physical therapists for safe movement and pharmacists.

Don't be shy about asking questions! You'll be among other patients and their families sharing their concerns. Asking questions helps everyone.

Choose a Caregiver

It's great to have the support of friends and family during your hip replacement. We encourage you to ask a family member or close friend to act as your special assistant during the process. Their help and support will make things easier. As your caregiver, they can:

- Attend Pre-Op Class with you.
- Prepare your home for your return after surgery.
- Be there after surgery to provide encouragement and cheer on your first steps.

At home, they can help you with exercises and remind you to follow Post-Op instructions

Lab Tests

By this time, your surgeon and anesthesiologist have decided which preoperative tests you should have, so they can see if you need any special care. Your surgeon will tell you where your preoperative tests will be completed. You will also meet with a nurse for a Pre-Admission Screening (PAS) appointment.

For questions about scheduling your class or your Pre-Admission appointment at the Mountain View campus, please call Pre-Admission Services at **650-962-4547**.

For class scheduling or questions about your Pre-Admission appointment at the Los Gatos campus, please call Outpatient Services at **408-866-4027**.

Check the Health of Your Skin; Stop Shaving

During the remaining days before surgery, check your "surgical" hip to make sure that area of your body is free from rashes and scratches. If you do find a rash or scratch, call your surgeon. Also, don't shave any of the areas that will be prepped for surgery.



Review Your Current Medications

If you haven't already done so, check with your medical team to see if you need to stop taking medications that might increase bleeding. For example, you might need to avoid aspirin, fish oils, herbal supplements, and anti-inflammatory medicines (Motrin,[®] Aleve,[®] Advil,[®] ibuprofen) before

surgery. Tell us if you're taking a blood thinner; your doctor may give you special instructions for taking it.

When asked, be honest about your drug and alcohol use, since it can affect your anesthesia and pain management.

You Have Homework to Do

Home Checklist

Your recovery goes much smoother when you prepare your living quarters for your post-surgery return.

- **Clear your calendar** – Take care of things like dental appointments well in advance of surgery.
- **Arrange for help** – For bathing, dressing, meals, or medication if needed. Do you need someone to drive and run errands? Mow the lawn? Walk the dog?
- **Do the shopping** – Have healthy food and beverages waiting when you get home.
- **Do your banking** – Pay bills and have cash on hand to avoid worry.
- **Fill the tank/charge the car** – Get the car ready so your driver can transport you.
- **Get nonskid shoes** – Well fitting, with good support.
- **Improve access to bed and bath** – Make sure your doorways and walkways allow for a walker if one is needed. It's ideal to have your bed and bath on the same floor, since stairs may be difficult. Your physical therapist will practice stairs with you before you leave the hospital. However, you may want to consider staying on the first floor during your recovery.
- **Remove obstacles** – Throw rugs, extension cords, pets, and pet toys.
- **Make the bathroom safer** – Add a rubber mat or nonskid adhesive strips on the bottom of your tub or shower.
- **Put things within easy reach** – Put a phone near at hand. Make kitchen and bath items accessible without bending or reaching up.
- **Find an armchair** – Have a chair that will allow you to sit high enough to keep your hips higher than your knees. This makes it easier to get out of the chair.
- **Fill prescriptions.**
- **Get any medical equipment needed** – Such as a front wheeled walker, raised commode seat with arms, shower chair or tub transfer bench. We can provide you with a list of the durable medical equipment stores that carry these items. The front wheeled walker is covered by insurance while the other items usually are not. You may reach out to our case managers for questions related to equipment needs or discharge arrangements. Mountain View **650-988-8266**. Los Gatos **408-866-3955**.
- **Disabled Parking Placard** – You may qualify for a temporary disabled parking placard from the DMV or AAA (must be an AAA member). Contact your doctor's office for an application form.
- **Do the laundry** – Put clean linens on the bed and clean towels in the bathroom before you leave for the hospital.
- **Pack your hospital bag** – Loose, comfortable clothing and toiletries, but no valuables.

Review Your Healthy Eating Habits

If you have special dietary needs or questions about healthy nutrition for healing, we can arrange for a dietitian to consult with you while you are in the hospital.

However, most of us know what healthy eating is. It's eating a variety of foods that give you the nutrients you need to maintain your health, feel good and have energy — vegetables, fruits, lean protein, fish, whole grains and plenty of water. Sugar and greasy, salty snacks should be kept to a minimum. But we need to be reminded.

When your body is recovering from surgery, it's time to rededicate yourself to a healthy diet and add some foods that will give your tissues the fuel they need to heal.

- The fiber in fruits, vegetables and oatmeal can prevent constipation. The carbohydrates in them help fight fatigue and increase energy.
- Poultry, fish and lean meat help your body repair bone and muscle tissue.
- Heart-healthy fats like those in olive oil, avocado, nuts and seeds boost immunity.
- Make sure you're getting calcium, iron and vitamin C — your dietitian may want you to take a multivitamin.
- Stay hydrated! Eight glasses of water a day are essential.

After you have been admitted to the hospital, you may consult a dietitian. If you need a nutrition refresher later, visit:

www.eatright.org for nutrition fact sheets.

www.diabetes.org if you're diabetic.

www.americanheart.org for healthy recipes and meal plans.



Get Spiritual Support and Reassure Your Loved Ones

Being physically, mentally and emotionally prepared is the key to a relaxed recovery. Before their surgery, some of our patients make time to speak with their pastor or ask their faith community for positive thoughts and prayers.

All surgery presents some risk, so it's a good idea to "set your house in order" so you and your family are prepared in the event of a rare and unexpected complication. It's very important to put your healthcare preferences in writing in the form of advance directives, and file them with your doctor and hospital.

If you're ever unable to speak for yourself, your advance directives tell us how you want your medical care handled. At El Camino Health, we are committed to honoring your wishes. But first we have to know them.

Take advantage of our free, personalized assistance through the online Health Library & Resource Center at El Camino Health. We'll help you put your wishes in writing. To schedule a 60-minute appointment, call:

- Mountain View Campus **650-940-7210**
- Los Gatos Campus **408-866-4044**

Will I Need a Blood Transfusion?

No, it's not likely. However, in California, your surgeon must discuss blood management options with you before your operation. If a transfusion is needed, you have the right to refuse it for religious or safety reasons. Your surgeon may discuss alternative methods for blood conservation with you, too.

The Day Before Surgery

Wash Your Towels, Bedding and Clothing

Do a fresh load of laundry to reduce the risk of infection from bacteria. Include:

- A set of sheets
- Towels
- Pajamas
- The clothes you'll wear and take to the hospital

Linens and clothing that have been sitting in the closet or drawer for awhile have been collecting dust, bacteria and other microbes. Change the sheets you sleep on the night before surgery. They must be freshly laundered. So should the towels you dry off with after your shower(s). Any pajamas and clothing you'll take to the hospital must be as freshly washed as possible.

The Evening Before Surgery

Skin Preparation and Relaxation

Have a nice relaxing dinner the night before your surgery and follow the "Bathing Instructions Before Surgery."

Suspend Some Normal Medications

Follow your doctor's instructions for taking or not taking medications that night or the next morning.

Check Your Bag

Use our checklist to make sure you packed everything you need in a small traveling bag — personal care items, sleepwear, nonskid shoes and loose clothing.

Eating and Drinking Instructions Before Surgery

Drinking plenty of fluids up to three hours before your surgery will help you stay hydrated and reduce related headaches after surgery.

Eating Instructions

Eat regular meals up until 8 HOURS before your surgery, and then stop eating any food, dairy, or liquids with pulp.

Hospital Bag Checklist

Pack These Items for Your Hospital Stay:

- Toothbrush, deodorant, denture gear
- Comb, brush and hand mirror
- Battery-operated razor
- Hearing aid, reading glasses
- Makeup and moisturizer
- Socks and undergarments
- Well-fitting, nonskid slippers
- Pajamas and robe
- Any special pillow
- Loose-fitting shorts (1 pair)
- Loose-fitting shirts (1 or 2)
- Flat shoes or tennis shoes
- Contact phone numbers
- A list of your normal daily medications
- This handbook



Leave These at Home:

- Jewelry
- Valuables
- Money

Cell Phone and Tablet:

Do not pack these. Have your caregiver bring them to you after surgery, along with their chargers. The hospital has Wi-Fi.

Positive Air Pressure/CPAP Machines:

Do not bring your CPAP machine to the hospital. We will use our hospital equipment for safety reasons.

Carbohydrate Drinking Instructions

You may be given a specially formulated Pre-Surgery drink prior to your operation to help provide the energy and nutrition your body needs to handle the stress of surgery and improve your recovery.

If ordered, complete the Pre-Surgery drink 3 HOURS before surgery. STOP drinking any liquids after you complete the drink.

Patients with diabetes:

- Type 1 diabetics or insulin dependent diabetics: do not drink the Ensure® Pre-Surgery drink.
- Type 2 diabetics taking pills: drink half of the Ensure® Pre-Surgery drink.

The Day of Your Surgery

The Morning of Surgery

On the day of your surgery, please cleanse your skin again by taking your second pre-op shower with the soap provided to you at your Pre-Op appointment or class. Wear your freshly laundered clothing to the hospital.

It's Time to Put on Your Surgical Gown

Whether you're having your surgery at the Mountain View or Los Gatos campus, the arrival procedure will be the same.

Preparing for Surgery

Our staff members will check you in two hours before your surgery, and your nurse will take you to our operating room holding area. Your caregiver is welcome to join you.

You'll meet with your surgeon, your anesthesiologist, and your surgical nurse. They will be happy to answer any questions you may still have.

We'll ask you to put on your surgical gown and remove any makeup. It's not necessary to remove nail polish. Your nurse will prepare your skin and start an IV (a tiny catheter put into a vein for fluids and medications).

We will then take you to surgery and ask your caregiver to wait in one of our comfortable waiting areas.

Surgery

The surgery will take two to three hours. A urinary catheter (a thin tube inserted into the urethra to drain urine) may also be inserted while you're asleep to collect your urine during surgery and for a short time after. After surgery, your surgeon will tell your caregiver and family how you're doing.

Post-Anesthesia Care

When the surgery is complete, we will take you to the post-anesthesia care unit (PACU), where your nurses will monitor you closely. You'll remain in the PACU for about one hour while the anesthesia wears off and the nurses begin pain management.

Recovery in Your Hospital Room

You'll be brought directly from the PACU to your hospital room, where your care team will continue to check your progress, keep you comfortable and care for your incision. Your caregiver or a few close family members may now visit. They may also bring you your cell phone and other devices. The hospital has guest Wi-Fi available for you to use.

Your first session with a physical therapist will most likely be on the day of your surgery. We stress again: physical therapy is vital for your new hip to work well. We'll remind you of any mobility limitations, have you do exercises in bed and get you up and moving as soon as possible.

You'll feel some discomfort at first. It will lessen. Frequent exercise decreases pain. Keep your goals in mind — you'll soon be returning to many activities that you enjoy.

Bathing Instructions Before Surgery

Cleaning your skin before surgery will reduce the risk of infections at your surgical site. You can play an important role in your own health to reduce the number of germs on your skin by following these instructions.

Use Chlorhexadine 4 oz antiseptic skin cleanse. If it is not provided, it is available to purchase over the counter at a pharmacy.

Two showers:



One the night before surgery



One the morning of surgery

Two Days Before Surgery:

1. Do not shave or remove any body hair

The Night Before Surgery:



1. If you are allergic to Chlorhexadine or your skin becomes irritated with the cleanser, follow instructions using antibacterial soap.



5. Keep the cleanser on for 3 minutes. Turn on the water and rinse off the cleanser.



2. Clean your entire body using regular soap. Shampoo your hair. Do not use conditioner. Rinse.



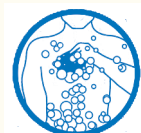
6. Dry with a freshly washed towel after each of these showers.



3. Wet a clean sponge or washcloth. **Turn off the water.** Pour **half** of the Chlorhexadine cleanser onto the sponge or cleanser.



7. Wear freshly washed clothes and use freshly washed bed linens after each shower.



4. Wash from jaw to feet, front and back, including belly button. Do not apply cleanser to face, head or genitals.



8. Do not use lotion, cream, powder, or deodorant after you shower with the Chlorhexadine cleanser.

The Morning of Surgery

1. Rinse and follow steps 3-8 above.

Post-Op Pain Control: What You Can Do

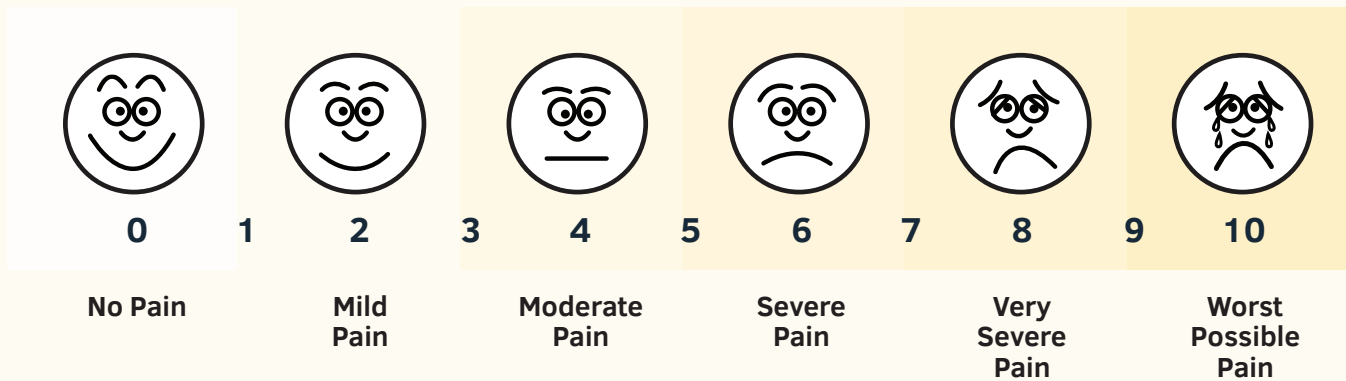
Most hip replacement patients worry about pain control. Today's advanced pain management techniques — oral and regional (that is, a region of your body) — offer several very effective pain control methods. Your surgeon chooses the one that is right for you based on your medical history and your recovery.

Your care team will work with you to keep the level of pain and activity right for you. You can help:

- **Try to relax.** When you're relaxed, pain medications work better.
- **Make yourself comfortable.** Position yourself for comfort and ease of breathing. We can help.
- **Speak up.** When pain increases, or if you feel nauseated, let your care team know. Pain has a cycle, and our goal is to stop it with medication as soon as you've noticed an increase in pain.

We'll be using a pain scale to help you communicate your level of discomfort.

PAIN MEASUREMENT SCALE



Adapted from Wong-Baker Faces Pain Rating Scale

Deep Breathing Prevents Pneumonia

Patients recovering from surgery tend not to breathe very deeply. Without deep breathing and coughing, pneumonia is more likely. We may ask you to use an incentive spirometer to help you take deep breaths correctly.



Use the incentive spirometer according to the instructions given by your medical team.

In general:

- Sit on the edge of your bed, or sit up in bed as far as possible.
- Hold the incentive spirometer upright.
- Seal your lips tightly around the mouthpiece.
- Breathe in slowly and deeply, moving the indicators as you have been instructed.
- Set a goal to work toward, and move the indicators to those levels.
- After each set of 10 deep breaths, cough to be sure your lungs are clear.

Preventing Blood Clots

Following surgery, there's a risk that a blood clot may form inside one of your veins. It won't always dissolve on its own. An immobile blood clot generally won't harm you, but if it should dislodge and move it becomes dangerous.

Your surgeon may prescribe a medication to prevent clotting called an anticoagulant medication (aspirin, Coumadin®, Lovenox®, or Xarelto®). You will be wearing a sequential compression device (SCD) to improve blood flow in your legs. SCDs are "sleeves" that wrap around the lower legs and inflate with air one leg at a time to imitate the action that occurs in your veins when you are walking. We now provide rechargeable portable compression sleeves for use in the hospital and at home after discharge. You may also be asked to wear compression stockings. Your surgeon will decide how long you need to continue these preventions.

Physical activity helps to keep your blood circulating normally and reduces the risk of blood clots. This is another excellent reason why we want you to get you up and begin walking soon after surgery!

At Home

Return Home to Recuperate

Follow Your At-Home Healing Plan

Your surgeon will determine how long you will be in the hospital; the decision is based on your post-operative progress. Some patients are appropriate for discharge to home the same day as surgery, while others may need to stay one to two nights. Very occasionally, the patient may need to transfer to a transitional care facility. Your case manager begins planning your discharge right after surgery. He or she will have been assessing and discussing your condition, so you have the services, medical equipment and doctor-ordered care you need — at home.

You'll make great strides toward healing when you're still in the hospital with the full-time attention of your care team. At home, you'll be on your own with the help of your caregiver. Keep the momentum going! You still need to work on your recovery.

Be Comfortable, but Keep Moving

Inactivity can cause your new joint to stiffen, which will slow your recovery, undoing all the progress you made during your hospital stay. You need to work through the discomfort. You can keep pain at bay with ongoing exercise. Ask your caregiver for encouragement and support.

- Take your pain medication 20 to 30 minutes before you begin exercise or physical therapy.
- Control discomfort by applying an ice pack to your hip. (A bag of frozen peas works well, too.) Remember, an ice bag should not be applied directly to your skin or it will cause burning! Put the ice bag in a pillowcase or on a clean towel. Don't ice your hip more than 15 to 20 minutes per hour, as it may slow the healing process.
- Change your position every 45 minutes.
- If you experience swelling in your leg, lie on your back and prop your feet up on pillows so that your feet are higher than your heart. Gravity will help drain the excess fluid and decrease swelling.

Eat for Healing and Prevent Constipation

To help your body heal, you should be eating the healthy foods recommended in this guide.

However, the change to your routine and your pain medications may cause constipation. So you'll want to reduce your dependence on narcotic medications as soon as possible. Remember: exercise prevents constipation — another reason to keep moving. Lastly, you can use the laxatives recommended by your care team. In the meantime:

- Eat fiber-rich foods.
- Drink plenty of water.
- Avoid caffeine and alcohol.

Care for Your Incision

To prevent infection, take proper care of your surgical incision.

- We will cover your incision with an antimicrobial and waterproof dressing before you leave the hospital. Please leave the dressing in place until your first post-op visit, unless your doctor tells you otherwise. Keep the dressing and your incision clean and dry.
- Don't apply any lotions or ointments unless your nurse or surgeon so instructs.

Follow-Up Appointments with Your Surgeon

In one to two weeks you will return to your surgeon's office for a follow-up visit so your surgeon can check your progress and modify your recovery plan.

When to Call Your Surgeon

Your exercise routine and your compression stockings greatly reduce the risk of a blood clot occurring. However, if you see these indications, call your surgeon immediately. He or she will evaluate your condition and decide proper treatment.

Swelling in your thigh, calf or ankle that does not decrease when you lie down with your feet elevated above heart level.

- Pain and tenderness in the calf of either of your legs.
- **If you experience sudden chest pain, difficult or rapid breathing, shortness of breath, sweating, or confusion, call 911 immediately. Ask someone to notify your surgeon.**
- New onset of severe pain.
- You're unable to put weight on your leg or walk.
- Increased numbness and tingling in the leg.
- The appearance of your hip looks odd.

What Infection Looks and Feels Like

Infections aren't common, but just in case, here's what you need to know:

- Redness, heat, swelling and bruising around the incision are perfectly normal. But if redness increases, you see some drainage, and pain doesn't subside, infection may be present.
- Fever or night sweats may be symptoms of infection.
- Look at any drainage or discharge from the incision. Drainage should decrease over time, but if new or increased drainage occurs, notify your doctor.
- Check the color of the drainage. Normal discharge is clear. An infection will cause it to change color (green, yellow) or emit an odor.
- Increased pain not associated with normal exercise is also a sign.

Call your surgeon right away if you see or feel any of these indicators.

The Month After Surgery

Exercise Is the Fastest Way to Achieve the Best Outcomes

Your El Camino Health joint replacement care team will help you set personal goals for the first month of your recovery. Generally speaking, you'll increase your activity over time, increase the mobility of your hip joint, and not only resume normal activities but add new activities once you can move well and with less pain.

Your case manager, surgeon and your occupational and physical therapists will set specific personal goals just for you. Your physical therapist will give you a separate handout with detailed instructions for each of your prescribed exercises. Your occupational therapist will guide you in bathroom and bedroom safety, getting dressed and fixing meals.

The following is a general overview of what you might expect during the first month after surgery:

Weeks One and Two

Typical goals and expected progress may include the following:

- Continue the exercise routine established by your physical therapist.
- Gradually increase your activity each day. For example, use your cane or walker to walk 200 feet twice a day and/or climb stairs using a handrail.
- You may shower when permitted by your surgeon. You will not be able to immerse your hip in a bath tub, swimming pool or hot tub until your incision is completely healed (about three weeks) and your surgeon has given you the okay for these activities.
- Your therapist will prescribe specific hip-strengthening exercises as you become ready for them.
- Gradually resume daily living activities.

Weeks Three and Four

You should notice that activities are becoming easier. Continue doing your exercises as prescribed. In general, your goals are to:

- Become less dependent on your walker or cane.
- Continue to increase the distance and frequency of all your exercises.
- Go about your daily living activities without assistance.

Five to Six Weeks After Surgery

You'll be eager to do many of the things you enjoy. However, individuals vary in their healing times. Your surgeon will let you know when it's safe to:

- Return to work
- Enjoy sex
- Drive
- Swim
- Hike
- Bowl
- Garden
- Dance
- Golf

Hip replacements are very successful surgeries. It takes time to heal afterwards, but you can expect to enjoy physical activity without hip pain. Once you can move without pain, your overall health has a chance to improve.

The secret to a happy, healthy life is to keep moving!



Reminders for Safe Movement

How to Use a Walker

Early in your recovery, safe movements require the use of a walker.

- Position the walker in front of you. Grasp the side handles securely.
- Step forward with the surgical leg, placing your foot in the middle of the walker area.
- Step forward with the nonsurgical leg using the walker for support.
- Move the walker forward about 12 inches and repeat.

Getting Into and Out of Bed

- You may need a strap or “leg lifter” to help lift your surgical leg on and off the bed.
- To get into bed, sit down about one third of the way down the bed, as if you were sitting in a chair.
- Lift your legs one at a time onto the bed as you are lying down.
- To get out of bed, lower your legs off the bed as you sit up.
- Have your walker within reach.
- Use both hands to push off the bed. If the bed is low, use your walker by placing one hand on the walker handle while pushing up from the bed with the other.



Getting In and Out of a Chair

Sit in a firm chair with armrests. For comfort, add pillows or folded blankets to elevate seating surfaces.

Have your walker within reach, but don't use the walker with both hands to get yourself up out of a seated position. Instead:

- Position yourself near the front edge of the seat.
- Place both hands on the arms of the chair and push up. If you're on a chair without arms, place one hand on the handle of the walker. With your other hand on the seat of the chair or sofa, lift yourself off of the chair. Balance yourself. Then grasp the walker handles securely and begin your walk.



Cars

You need to be able to swivel your bottom easily on the car seat. If needed, cover the passenger seat with a slippery plastic bag.

- Move the front passenger seat back as far as it will go, and have it semi-reclined.
- Using your walker, face away from the car and back up to the passenger seat. You're going to sit down while keeping your surgical leg straight out in front of you.
- With one hand on the walker, reach back for the car seat and lower yourself down, keeping your surgical leg straight out in front of you. Don't hit your head.
- Swivel your bottom to bring your legs into the car.
- When getting out of the car, reverse these instructions.



Stairs and Curbs

Your physical therapist will teach you how to go up and down a curb and/or stairs before you leave the hospital.

- Ascending: Step up with the nonsurgical leg first.
- Descending: Step down with the surgical leg first.



Bathing in a Shower or Tub

Your occupational therapist will determine the safest bathing strategy for you. There are several different methods, depending on your bathroom setup.

A shower chair or tub transfer bench is generally recommended when you first return home.

- Per your pre-surgery Home Checklist, you should have a rubber mat or nonskid adhesive strips on the bottom of your tub or shower.



Toilet

You'll either have a raised toilet seat or toilet seat with arms as instructed by your occupational therapist. You'll approach the toilet using your walker.

Sitting Down

- Balance yourself. Use small steps to turn yourself until your back is to the toilet. Don't pivot on one leg. Use alternating small steps to turn yourself.
- Step backwards to the toilet until you feel it touch the back of your leg.
- If the toilet seat has armrests, reach back for both armrests and lower yourself onto the seat. If using a raised toilet seat without armrests, keep one hand on the handle of the walker while reaching back for the toilet seat with the other, then lower yourself down.

Getting Up

- If you have armrests, use them to lift yourself up.
- If you have a raised toilet seat without armrests, place one hand on the handle of your walker and push off the toilet seat with the other.
- Balance yourself before taking hold of the walker securely to walk away.



Activities of Daily Living

- An occupational therapist will review dressing, bathing and grooming strategies, and will teach you how to use any adaptive equipment that was recommended.



Exercises After Hip Replacement Surgery

Name: _____

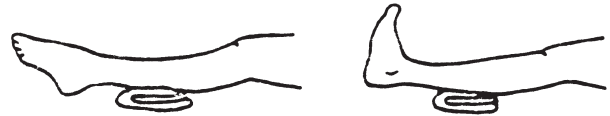
All exercises are to be performed _____ times per day.

While Lying on Your Back

Ankle pumps/ankle circles _____ times

1. Keep surgical leg straight.
2. Move your foot up and down.
3. Move your foot in circles, both directions.

ANKLE PUMPS/ANKLE CIRCLES



Gluteal sets _____ times

1. Squeeze buttocks together.
2. Hold for a count of five. Relax.

GLUTEAL SETS



Quad sets _____ times

1. Keep surgical leg straight.
2. Press back of knee into surface, tightening muscles in front of thigh.
3. Hold for a count of five. Relax.

QUAD SETS



Hamstring sets _____ times

1. Slightly bend knee of surgical leg and press down with the heel.
2. Tighten muscles on back of thigh.
3. Hold for a count of five. Relax.

HAMSTRING SETS



Heel slides _____ times

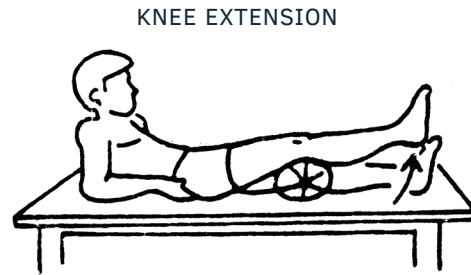
1. Start with surgical leg straight.
2. Keep kneecap pointed toward ceiling throughout exercise.
3. Slowly slide your foot toward your buttocks, keeping heel on bed.
4. Return leg to starting position, making it as straight as possible. Relax.

HEEL SLIDES



***Knee extension (lying down)* _____ times**

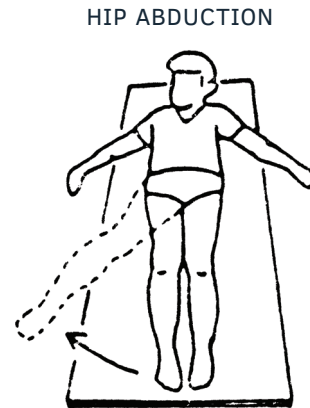
1. Place knee of surgical leg over a firm rolled bath towel.
2. Straighten knee by tightening muscle on top of thigh and lifting foot up.
3. Do not raise knee off roll when lifting leg.
4. Return leg to starting position, slowly. Relax.



While Lying on Your Back

***Hip abduction* _____ times**

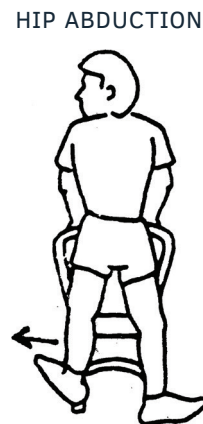
1. Place pillows between legs.
2. Straighten legs and keep your knee caps toward ceiling.
3. Slide your surgical leg out to the side.
4. Slowly return to starting position. Relax.



While Standing, Holding on to a Chair or Counter For Balance, and Keeping Back Straight

***Hip abduction* _____ times**

1. Raise surgical leg out to the side, keeping toes pointed straight ahead.
2. Return to starting position.



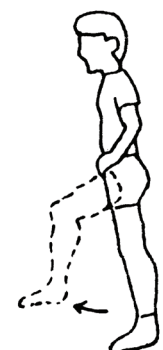
***Knee flexion* _____ times**

1. Bend knee, aiming heel toward buttocks.
2. Return to starting position.

KNEE FLEXION



HIP FLEXION



Mountain View Campus Directory

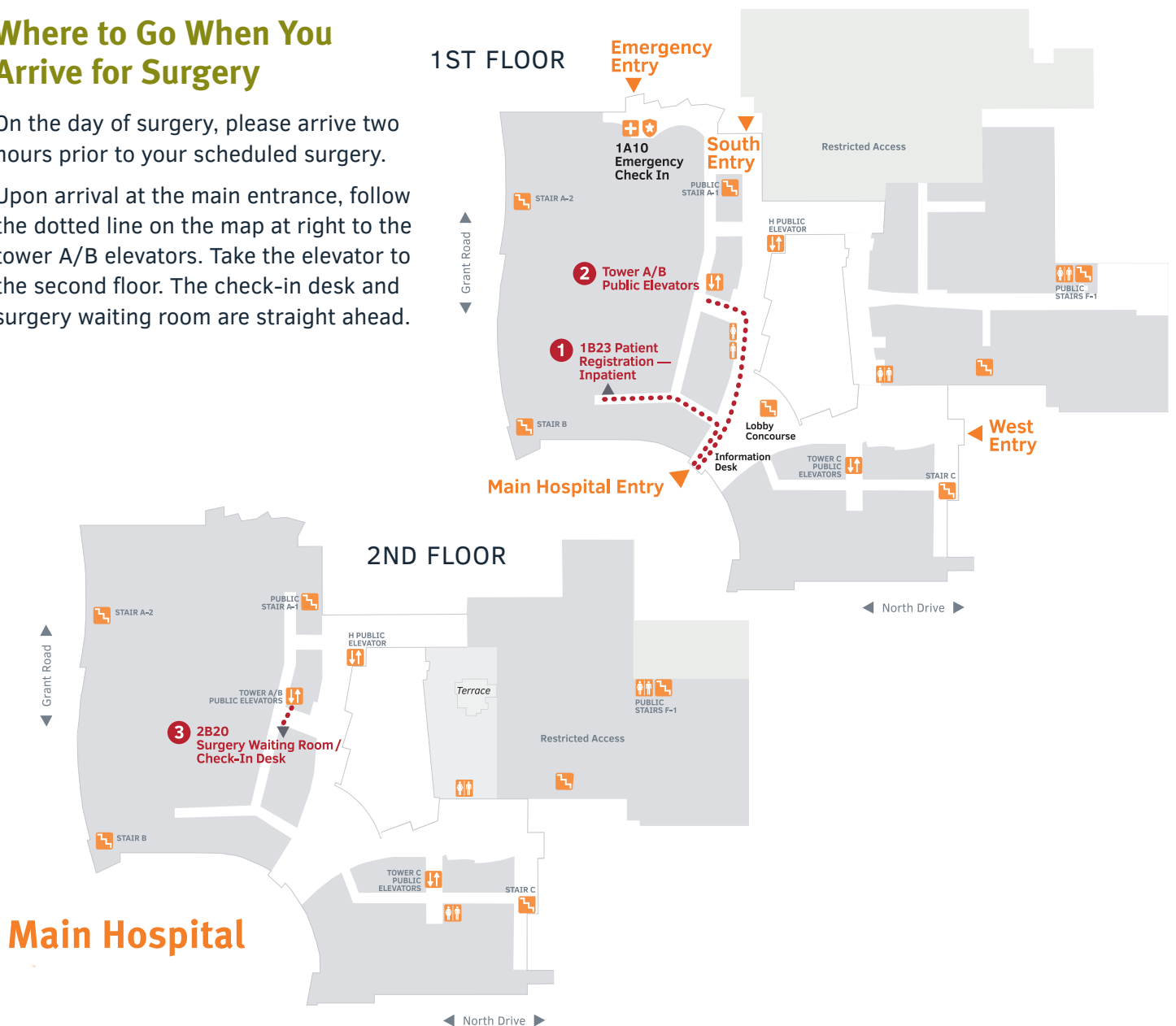
Financial counseling650-988-8275
 Inpatient physical and occupational therapy 650-940-7269
 Nutrition services 650-940-7188
 Orthopedic surgery program coordinator650-962-4914
 Outpatient rehabilitation 650-940-7285

Orthopedic case manager 650-988-8266
 Patient registration..... 650-940-7111
 Pre-Admission Services..... 650-962-4547
 Preoperative & short-stay unit 650-940-7180
 Spiritual care650-988-7568
 Surgical unit..... 650-940-7120
 Health Library & Resource Center..... 650-940-7210

Where to Go When You Arrive for Surgery

On the day of surgery, please arrive two hours prior to your scheduled surgery.

Upon arrival at the main entrance, follow the dotted line on the map at right to the tower A/B elevators. Take the elevator to the second floor. The check-in desk and surgery waiting room are straight ahead.

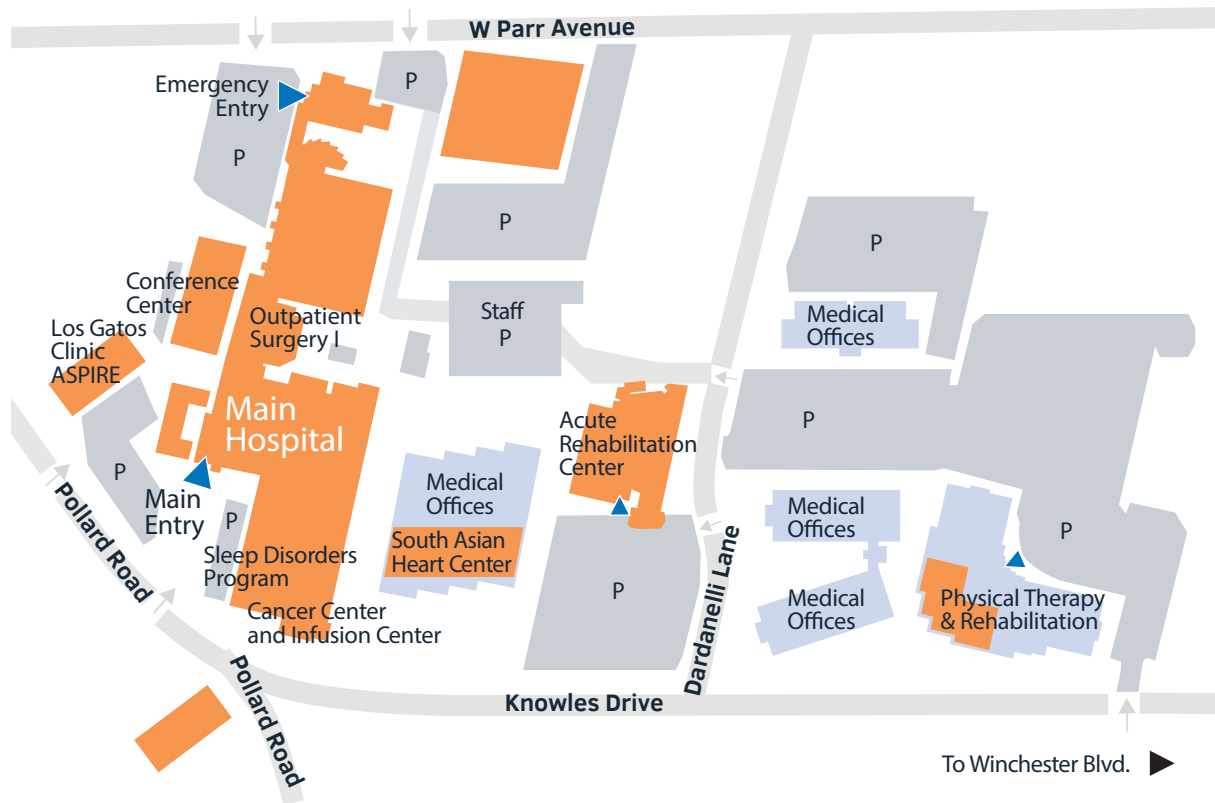


Los Gatos Campus Directory

Financial counseling.....	408-866-4061	Physical Performance Institute (Outpatient therapy).....	408-866-4059
Orthopedic pavilion	408-866-4041	Patient registration.....	408-866-4062
Orthopedic-Spine program coordinator	408-866-3982	Spiritual care	408-866-7568
Outpatient department.....	408-866-4027	Health Library & Resource Center.....	408-866-4044
Orthopedic case manager	408-866-3955		

Where to Go When You Arrive for Surgery

On the day of surgery, please arrive two hours prior to your scheduled surgery. Parking is available in the back of the hospital (see maps). Please report directly to the Outpatient Surgery department on the first floor.



About El Camino Health

El Camino Health includes two nonprofit acute care hospitals in Los Gatos and Mountain View and urgent care, multi-specialty care and primary care locations across Santa Clara County. Hospital key medical specialties include cancer, heart and vascular, lifestyle medicine, men's health, mental health and addictions, lung, mother-baby, orthopedic and spine, stroke, urology and women's health. Affiliated partners include El Camino Health Medical Network, El Camino Health Foundation and Concern. For more information, visit elcaminohealth.org.



Mountain View Campus

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Mountain View, CA 94040
650-940-7000

Los Gatos Campus

815 Pollard Road
Los Gatos, CA 95032
408-378-6131
elcaminohealth.org



Need a doctor referral? Visit our website or call the El Camino Health Resource Line at 800-216-5556.