



Patient Information Sheet

Advice Booklet

Hip Replacement Surgery

Name:

Introduction

This booklet has been given to you because you are due to have a **Hip Replacement** and will provide you with information about what to expect and how to prepare for your surgery.

Recovering from joint replacement surgery has progressed a lot over the years. **The sooner you get up and walking after your surgery, the better the outcomes will be.**

Recovery is more successful if you recover in your own home rather than in hospital. Our aim is to get you home as soon as possible after your surgery, this should be within 24 hours.

This could mean you will not need to stay in hospital overnight and will be discharged home the same day as your surgery. Occasionally patients may need to stay a little longer especially if your medical history requires monitoring following your operation.

More information about your planned journey will be provided based on your own personal requirements.

Preparing for Surgery

The months leading up to your operation are as important as the operation itself. **You must prepare for your surgery and plan for how you will manage at home after.** We have developed a patient information video to provide more in-depth information on this (please see the back page of this booklet for information on how to access this video).

The fitter you are before your operation, the less likely you are to have complications during or after your operation and you will have a quicker and better recovery.

Making lifestyle changes can make a real difference to your recovery.

These include:

- **Controlling any medical problems** such as diabetes, anaemia, blood pressure and chest problems. Your GP will be able to offer further advice about this if required.
- **Make sure your dental health** is good and go for a check-up if you have not had one for a while.
- **Reduce infections** by protecting your limbs from cuts and grazes in the weeks leading up to your surgery to prevent any on the day surgery cancellations.
- **Keep physically fit** and as mobile as possible prior to surgery. This can include walking short distances daily or completing exercises which involve less weight bearing such as swimming, cycling or Pilates.
- **Stopping smoking, reducing your alcohol intake and maintaining a healthy weight** will help you recover quicker from your surgery.

Your GP can provide more information regarding all of these and signpost you to additional advice and programmes in your local area should they be required

Pre-operative assessment

Prior to your surgery, you will be required to undergo a pre-operative assessment. You will be asked to provide information about your general health, current medications and home situation. **Please ensure you bring a list of your regular medications to your appointment.**

You will be given clear instructions about if any medications are required to be stopped before your surgery such as blood thinning medications and you will be advised when to do this.

In some instances, you may even be called by a pre-assessment pharmacist to go through prescribed medications and allergies. This would usually take place 7-14 days before your operation. During this consultation we may provide additional advice regarding your medications. Please feel free to ask any questions you might have at this point.

Please remember to bring into hospital your current prescription along with all the medications you will need to take whilst you are with us in the original packaging. This includes any inhalers, sprays, patches and any medications you purchase from your pharmacy. Always bring more than you think you will need.

Please inform us of any allergies to any medications or dressings.

Ensure you have a good stock of your regularly prescribed medications at home to prepare for a safe and effective discharge.

Preparing to return home

Preparation is key to ensure a safe discharge home.

- **If you live alone you will need to arrange support to be available at home once you are discharged**, for example from family and friends.
- **Ensure your home environment is clear of obstacles and trip hazards** such as loose rugs and general clutter.
- **Set up your home ready for your return.** Make sure everyday items are within easy reach, particularly items that you would normally store low down, to avoid bending down too far following your surgery.
- **Prepare food supplies** and stock up with easy to cook meals, ready meals and frozen food.
- **Be prepared to increase your own independence as quickly as possible.**

Please make sure you ask any questions you may have about your surgery and raise any concerns so these can be addressed prior to your admission.

On the day of your operation

You will be admitted to hospital on the day of your surgery.

Please make sure you adhere to the day case fasting guidelines:

- No food within 6 hours of admission.
- You can have coffee/tea with a dash of milk up to 2 hours before admission.
- Water is permitted until taken to surgery.

On the morning of your surgery, you will be reviewed by multiple members of the multidisciplinary team including anaesthetists, nurses etc. to prepare you for your surgery.

Dependent on your position on the theatre list, you may be reviewed by a member of the therapy team prior to your surgery to practice mobilising with crutches. You will be taught immediate exercises to do after your surgery as well as discussing your home and environment.

Your operation will be done under general or spinal anaesthetic (plus a sedative). The anaesthetist will discuss this with you prior to your operation. If you have a spinal anaesthetic, you will have numbness in your legs when you wake up.

After your operation, you will be transferred back to the ward and have something to eat and drink in preparation for mobilising. **Remember eating and drinking well after your operation is essential to prepare you to mobilise early.**

As soon as your spinal anaesthetic block has worn off and you are medically stable, you will be allowed to mobilise with the nursing or therapy staff. For example, transferring to a commode or toilet. This can be on the same day as your surgery.

It is normal for you to experience discomfort and for your surgical site to feel tight and sore. Make sure you ask for regular recovery medication as this will aid your progression.

You will be taught exercises to complete after your operation which aim to start to get your leg moving and muscles working. Try to complete these regularly throughout the day.

Hip Replacement Exercise Guide

The information in this guide will help you with the exercises and your mobility plan which you need to do following your operation.

The exercises may be uncomfortable at the start, so work to a level of discomfort that is acceptable to you.

Please speak to a member of staff if you cannot perform the exercises as it may be that your recovery medication needs to be reviewed.

Please **complete the following exercises a minimum of 3-4 times** throughout the day as this aids recovery and will reduce the likelihood of any complications following your surgery.

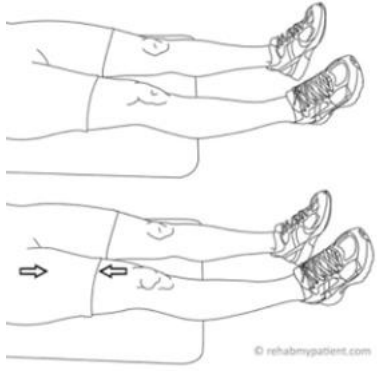
Bed exercises. Start these exercises as soon as you can move your leg after surgery.

Chair exercises. Start these exercises once you have got out of bed.

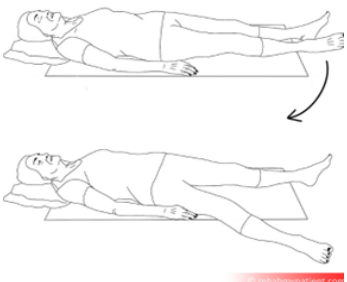
Progression exercises: Start these exercises once you feel confident enough to begin these (usually after 1-2 weeks).

Hip replacement bed and chair exercises

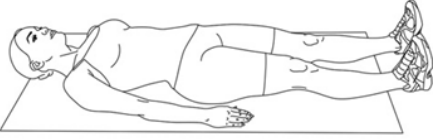

Static Quad

 <p>The diagram shows two views of a person lying on their back. The top view shows the legs straight and feet flat on the floor. The bottom view shows the person pulling their feet towards their buttocks, with arrows indicating the direction of movement. A copyright notice '© rehabmypatient.com' is visible at the bottom right of the diagram.</p>	<p>Lying down on the bed:</p> <ul style="list-style-type: none">• Keep the leg that has been operated on straight and pull your ankle towards you.• Push the back of your knee into the bed.• Tighten your thigh muscle.• Hold for 3 seconds.• Repeat 10 times.
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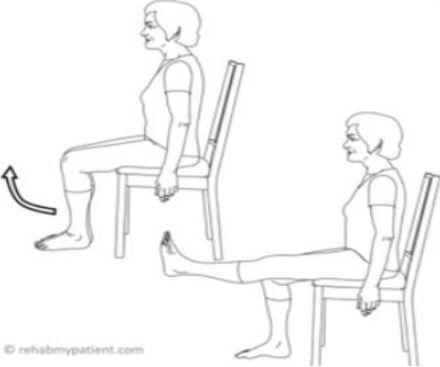
Hip Abduction

 <p>The diagram shows two views of a person lying on their back. The top view shows the legs straight and feet flat on the floor. The bottom view shows the person moving one leg out to the side, with an arrow indicating the direction of movement. A copyright notice '© rehabmypatient.com' is visible at the bottom right of the diagram.</p>	<p>Lying down on the bed:</p> <ul style="list-style-type: none">• Keep both legs out straight.• Whilst keeping your heel on the bed, bring the leg that has been operated on out to the side, then bring back to mid position.
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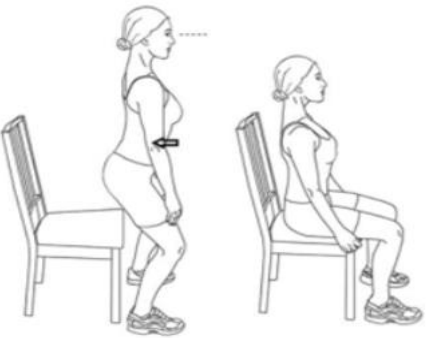
Static Gluteus

	<p>Lying down on the bed:</p> <ul style="list-style-type: none"> • Keep both your legs out straight. • Squeeze your bottom muscle together. • Hold for 3 seconds. • Repeat 10 times.
	<p>Sitting in a chair:</p> <ul style="list-style-type: none"> • Keep your feet flat on the floor. • Squeeze your bottom muscles together. • Hold for 3 seconds. • Repeat 10 times.

Knee Extension

	<p>Sitting in a chair:</p> <ul style="list-style-type: none"> • Sit with your feet flat on the floor and your knees bent. • On the operated leg, start to straighten your knee fully, pulling your ankle towards you. Aim to lift your foot off the floor. • Return to the starting point. • Repeat 10 times.
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STS from Chair

	<p>Sitting in a chair:</p> <ul style="list-style-type: none"> • Sit on the edge of the seat with your feet flat on the floor. • Push up into standing and fully straighten knees and hips. • At first you may need to use the arms of the chair to do this. Progress this exercise by not using the arms of the chair. • Aim to keep the weight equal through both legs. • Repeat 10 times.
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Mobility and Elbow Crutch Technique

Mobilising is essential to aid your recovery and reduce your risk of complications after your operation.


You will be assessed by the therapy team and provided with an appropriate walking aid. **It is expected that you will continue to practise your walking outside of your therapy sessions to build your confidence ready for discharge home.**


Use your own judgement as to whether you need support whilst mobilising on the ward or discuss with your physiotherapist. **Aim to mobilise regularly whilst awake and build your distance each time ready for home.**

Mobility

	<ul style="list-style-type: none"> • Place the crutches in front of you, shoulder width apart. • Step your operated leg forwards followed by the un-operated leg stepping just behind the elbow crutches. Repeat. • To progress, try to walk as normal as possible by stepping one foot past the other in a normal walking pattern. • As you feel comfortable, progress to one walking aid. To do this place the elbow crutch on the opposite side to your operated leg. You can progress to no walking aid as appropriate. • If you start to walk with a limp or find yourself leaning, go back to using your walking aid.
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Stairs

	<h4>Using a handrail</h4> <ul style="list-style-type: none"> • Remove the crutch on the same side as the rail. • Place the crutch on the outside of the other crutch in the shape of a 'T' as indicated in the picture. • Place your free hand on the rail.
<h4>Going up</h4> <ul style="list-style-type: none"> • Un-operated leg • Operated leg • Crutches 	<h4>Going down</h4> <ul style="list-style-type: none"> • Crutches • Operated leg • Un-operated leg

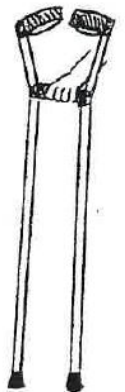
	<p>Without a handrail</p> <ul style="list-style-type: none"> • Keep hold of both crutches.
<p>Going up</p> <ul style="list-style-type: none"> • Un-operated leg • Operated leg • Crutches 	<p>Going down</p> <ul style="list-style-type: none"> • Crutches • Operated leg • Un-operated leg

Sit to stand technique with elbow crutches

Always remember to remove elbow crutches before sitting down. Please use the techniques below to support with this.

To Stand ('H' Technique)

1. Place the crutches together to form the 'H' position (see diagram).
2. Place one hand onto the handles and the other on the chair.
3. Stand up.
4. Put your arms into the crutches (handles facing forwards).



To Sit ('H' Technique)

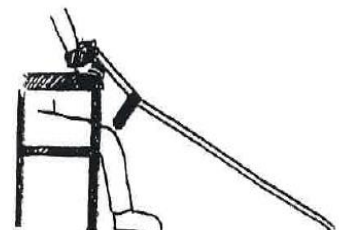
1. Place both crutches in front of you.
2. Take both hands out of the crutches and form the 'H' position.
3. Place one hand on the handles.
4. Reach back to the chair with your free hand and sit down.

To Stand (Bracelet Technique)

1. Place the crutches out in front of you with the handles pointing down.
2. Place your hands through each hoop so that they rest around your wrists.
3. Without holding the handles, push up from the arms of the chair (see diagram).
4. Once standing turn the handles forwards.

To Sit (Bracelet Technique)

1. Place the crutches out in front of you.
2. Turn the crutches around so that the handles point down.
3. Let the hoops rest around the wrists.
4. Reach back to the chair and sit down.



Hip replacement exercise progression

Once you feel able to you can progress to these exercises.

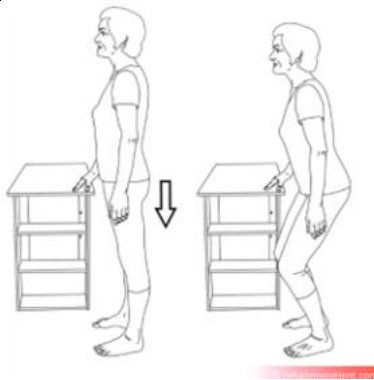
You can still complete the chair exercises but try to focus more on the exercises below.

Everybody is individual and some of you will complete these exercises easily and some of you may find these more challenging.

Please work at your own pace as everyone's recovery journey is personal to them.

For all the exercises stand tall and use support if required.

Mini squat



- Bend your knees as if you were sitting down.
- Hold for 5 seconds.
- Return to the start position.
- Keep your weight equal through both feet.
- **Repeat 10 times.**

As this becomes easy, you can progress by bending your knees further to increase your range of movement and build up the strength in your legs.

Standing calf raise



In standing holding onto a fixed surface for support.

- Keep your knees straight.
- Lift your heels off the floor and rise up onto your toes.
- Hold for 5 seconds.
- Return to the start position.
- **Repeat 10 times.**

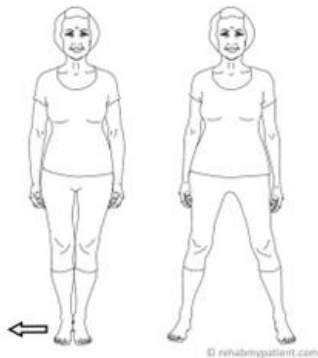
Step up

If you have stairs or an appropriate step you can complete the following to further strengthen your leg.



- Lift your operated leg onto the step bringing your un-operated to meet.
- Step back down with your un-operated leg first followed by your operated leg.
- The aim of this exercise is to increase your strength and confidence leading with the operated leg.
- To progress the exercise, you can reduce the amount of support you are using.

7. Side step



- Stand up straight with your feet hip width apart.
- Step your operated leg sideways, followed by the un-operated leg.
- **Repeat this 10 times in each direction.**
- To progress the exercise, you can reduce the amount of support you are using.

Discharge Home

Once you are medically fit for discharge you will be discharged home. **Please make sure you arrange for family or friends to collect you from the hospital usually on the same day of your surgery.**

You will be provided with a recovery medication pack to take to keep your discomfort levels manageable in the early days post operatively. All new medications will be explained to before you are discharged.

What can you do to help recovery in the early stages?

During the early stages at home, it is normal that your discomfort levels, stiffness, movement and exercise tolerance may fluctuate.

It is common to have some generalised swelling of your leg below your replacement. You may need to rest on the bed for at least 30 minutes a few times a day or rest with your leg elevated initially to help reduce your swelling. If you have increased swelling and pain, please seek medical advice.

It is ok for you to progress your mobility and build up as able. You can try to walk as normally as possible by placing one foot past the other in a normal walking pattern. As soon as you feel able, you can progress to using one walking aid on the opposite side your surgery. If you start to walk with a limp or leaning, go back to using both walking aids.

Aim to complete the exercises taught on the ward 3-4 times per day as these will help to improve the movement and strength around your knee.

You will be referred to the appropriate therapy teams to continue with your rehabilitation on discharge. They will advise you further on increasing your mobility and returning to normal everyday activities.

Use this space to write any question you have or make your own notes:

Resource Links

Patient Education Video

We have developed a patient education video to help prepare you for your surgery. Please scan the QR code or follow the link to watch it:

<https://www.uhnm.nhs.uk/our-services/therapies/therapy-advice-exercises/orthopaedics/>

Need Further Advice or Support?

If you feel that you may not be able to manage after your surgery, or you have further concerns about your recovery or support at home, please contact the therapy team via email for advice and guidance on joint-info@uhnm.nhs.uk



You can also see the frequently asked questions (FAQ) section on our internet page (linked above) where you will find the answers to many commonly asked questions regarding joint replacement surgery.

If you are unable to arrange help and support at home, please get in touch as soon as possible so this can be discussed with you. If you have had your surgery and have a query relating to your rehabilitation, this may be better directed to the Team that you have been referred to on discharge.

Ward Numbers

Elective Orthopaedic Unit County: 01785 230036
Elective Orthopaedic Ward 112 Stoke: 01782 676112

Additional useful resources

Versus Arthritis: www.versusarthritis.org/about-arthritis/exercising-with-arthritis/lets-move-for-surgery-toolkit/