



optimorthopedics

Dr. George Sutherland

Discharge Instructions –Hip Joint Replacement / Hip Nail

Your **Follow up Appointment** is scheduled for:

(Date) _____ (Time) _____ (Location) _____

If you have been given a script for your **Physical Therapy Appointments**; please call a location of your choice to schedule for the first weekday after returning home.

Medications: Take all medications as directed follow the instructions on the “Pain Medicine” sheet attached.

Diet and Fluids:

- Eat a well balanced diet to include all of the basic food groups (fruits, vegetables, whole grains, meat and fish)
- Foods rich in Vitamin C and protein will help the healing process
- Drink 6-8 glasses of water to stay hydrated and minimize constipation. Take an over-the-counter stool softener listed on the “Pain Medicine” sheet, if needed.

Hygiene / Wound Care:

- Keep your incision clean and dry. Change dressing daily, or sooner if becomes soiled or wet.
- You may shower on _____ (3 days post op), then daily after that.
- Leave your Coverderm dressing on while you shower then remove the wet dressing.
- Cleanse the incision with Dyna-Hex 4 antiseptic solution for days 3-7, pat dry and apply a new Coverderm dressing.
- Do NOT submerge in a tub, pool or hot tub.
- Do NOT apply lotions, ointments or salves to your incision until you have seen Dr. Sutherland at your post-op visit, and he advises that this is ok.
- If you run out of Coverderm, use a ladies’ *non-deodorized* panty liner with pad side to the incision and secure with tape.

Activity:

- Do NOT drive until directed by Dr. Sutherland. Usually 4-6 weeks after surgery.
- YOU ARE WIEGHTBEARING AS TOLERANTED unless otherwise instructed by Dr. Sutherland.
- Elevate your foot above heart level to minimize swelling. Sitting in a recliner is not true elevation, lay flat.
- Place pillow under your ankle and foot when elevating.
- Ice 4-5 times daily for 20 minute intervals to minimize swelling and pain.
- Wear your compression stockings continuously for 6 weeks; this prevents the chance of blood clots.
- You may wean yourself off your walker as you see fit, as long as you are steady.
- You will attend physical therapy 2-3 times a week for 6-8 weeks.
- Perform your exercises as instructed by therapy every day.

Complications to Watch for, and Call Sara at (843) 705-9401 if:

- Fever over 101 by mouth
- Pain increasing in intensity rather than decreasing and not relieved by the medication ordered
- Increased redness, warmth, hardness, or pus (creamed color) discharge from your incision
- Excessive calf swelling
- Calf or thigh pain or tenderness, swelling, redness, warmth
- If you experience chest pain, shortness of breath or difficulty breathing call 911



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PAIN MEDICATION LIST

Primary Pain Medications given after surgery:

-Hydrocodone (Vicodin, Norco, or Lortab)

-Oxycodone (Percocet)

Follow the instructions on the bottle for these given medications. If the medication is not easing your pain as prescribed you may take 1 pill every 4 hours or 2 pills every 6 hours. DO NOT take it more than this, as serious health problems may arise.

If you are not taking a blood thinner or Celebrex, You may also take 2-3 Ibuprofens (Advil or Motrin), 200mg tablets every 4 to 6 hours.

Side effects of Pain Medication:

-Constipation: Take whatever works for you. There are some options below:

- Prune Juice
- Senekot
- Miralax
- Colace or Pericolace

-Nausea: If you were given a prescription for Zofran/ Phenergan, take as prescribed. If you were not given a prescription, call Sara at (843) 705-9401.

For surgeries of larger magnitude, you may have been given Oxycontin (10mg) and Celebrex (200mg).

-Take 1 Celebrex daily. Do not mix Ibuprofen (Advil, Motrin, ext.) if you were given Celebrex.

-If given Oxycontin, take 2 tablets daily (1 in AM, 1 in PM). Do not take more than this as it is a long lasting pain medication. You will only be given 6 pills to last 3 days. If you have pain in between these 2 doses, take the Hydrocodone or Oxycodone as prescribed above.