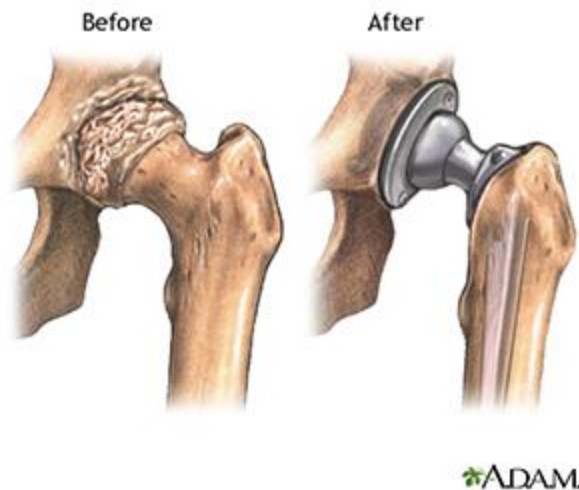


TOTAL HIP REPLACEMENT - Discharge Care

Total Hip Replacement

WHAT YOU SHOULD KNOW:

Total hip replacement is surgery to replace a hip joint damaged by wear, injury, or disease. It is also called total hip arthroplasty. The hip joint is where the top of your femur (thigh bone) sits in the socket of your pelvic bone. The joint is held together by ligaments and muscles. The top of your femur is shaped like a ball and covered with cartilage. Cartilage is a tissue that helps joints move.



AFTER YOU LEAVE:

Medicines:

- **Pain medicine:** You may be given a prescription medicine to decrease pain. Do not wait until the pain is severe before you take this medicine.
- **NSAIDs:** These medicines decrease swelling, pain, and fever. NSAIDs are available without a doctor's order. Ask your primary healthcare provider which medicine is right for you. Ask how much to take and when to take it. Take as directed. NSAIDs can cause stomach bleeding and kidney problems if not taken correctly.
- **Antibiotics:** This medicine will help fight or prevent an infection. Take your antibiotics until they are gone, even if you feel better.
- **Stool softeners:** This medicine makes it easier for you to have a bowel movement. You may need this medicine to treat or prevent constipation.
- **Anticoagulants**

are a type of blood thinner medicine that helps prevent clots. Clots can cause strokes, heart attacks, and death. These medicines may cause you to bleed or bruise more easily.

- Watch for bleeding from your gums or nose. Watch for blood in your urine and bowel movements. Use a soft washcloth and a soft toothbrush. If you shave, use an electric razor. Avoid activities that can cause bruising or bleeding.
 - Tell your caregiver about all medicines you take because many medicines cannot be used with anticoagulants. Do not start or stop any medicines unless your caregiver tells you to. Tell your dentist and other caregivers that you take anticoagulants. Wear a bracelet or necklace that says you take this medicine.
 - You will need regular blood tests so your caregiver can decide how much medicine you need. Take anticoagulants exactly as directed. Tell your caregiver right away if you forget to take the medicine, or if you take too much.
 - If you take warfarin, some foods can change how your blood clots. Do not make major changes to your diet while you take warfarin. Warfarin works best when you eat about the same amount of vitamin K every day. Vitamin K is found in green leafy vegetables, broccoli, grapes, and other foods. Ask for more information about what to eat when you take warfarin.
- **Take your medicine as directed.** Call your primary healthcare provider if you think your medicine is not helping or if you have side effects. Tell him if you are allergic to any medicine. Keep a list of the medicines, vitamins, and herbs you take. Include the amounts, and when and why you take them. Bring the list or the pill bottles to follow-up visits. Carry your medicine list with you in case of an emergency.

Follow up with your primary healthcare provider or orthopedist as directed: You may need to return to have your wound checked and stitches or staples removed. Write down your questions so you remember to ask them during your visits.

Physical therapy: You may need to see a physical therapist to teach you special exercises. These exercises help improve movement and decrease pain. Physical therapy can also help improve strength and decrease your risk for loss of function.

Self-care:

- **Use a cane, walker, or crutches as directed:** These devices will help decrease your risk of falling.
- **Wear pressure stockings:** These are long, tight stockings that put pressure on your legs to promote blood flow and prevent clots.



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- **Keep your knees apart:** Place a pillow or wedge between your knees when you sit or lie down. This helps support your hip.
- **Prevent dislocation of your hip implant:**
 - **Do not** lean forward when you are in bed or sit up with your legs straight out in front of you.
 - **Do not** sit on a low chair. Use armrests when you rise from a sitting position to decrease the force and pressure on your hips.
 - **Do not** cross your legs. Lift objects with your knees bent rather than straight.

Contact your primary healthcare provider or orthopedist if:

- You have a fever.
- You have chills, a cough, or feel weak and achy.
- You have more pain and swelling in your hip joint, even after you take pain medicine.
- You are constipated.
- You have pain or burning when you urinate.
- You have questions or concerns about your condition or care.

Seek care immediately or call 911 if:

- You have a seizure or feel confused.
- Blood soaks through your bandage.

- Your incision comes apart.
- Your incision is red, swollen, or draining pus.
- You urinate less than usual or not at all.
- Your leg feels warm, tender, and painful. It may look swollen and red.
- You suddenly feel lightheaded and short of breath.
- You have chest pain when you take a deep breath or cough. You may cough up blood.

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