

Dr. Paul Grutter, MD

Johns Hopkins Fellowship Trained
Shoulder Surgery-Sports Medicine-Joint Replacement

Anterior Hip Replacement Post-op Instructions

Icing: Cryotherapy (icing an injury) has been shown to decrease pain, improve sleep and decrease the need for pain medications. There are many different methods for icing. These can be as simple as putting a bag of ice on the injured area to as complex as using state of the art cold therapy compression devices. If you elected to get a cold therapy device, please refer to the device handout for instructions on proper usage. Ice the knee for 20-30 minutes each hour as needed. This is especially important for the first 48 hours after surgery. Be sure to protect your skin by placing a T-Shirt or cloth between your skin and the cooling unit or icepack.



Warning: any type of cryotherapy can be cold enough to seriously injure the skin. When using cold therapy, inspect the skin at least every 10 minutes. Stop using cold therapy if you experience any adverse reactions, such as: increased pain, burning, blisters, increased redness, discoloration, welts, or skin changes.

Swelling: After surgery swelling and bruising of the operative leg is normal and will gradually decrease as the days pass. Keep your leg elevated for the first few days after surgery to decrease swelling and speed your recover.

Dressing Care: You will leave the hospital with a special dressing covering your incision. Leave the dressing in place until your follow up appointment. The incision must be kept clean and dry.

Bearing Weight: Unless instructed otherwise you may walk and put full weight on your operated leg. Most people will need to use crutches, a cane, or a walker for a period of time after surgery. You can gradually put more weight on your leg as your discomfort subsides and you regain strength.



Bathing/ Showering: Keep the incisions dry until your follow up appointment.

Driving: It is illegal for you to drive if you have any disability or if you are taking narcotic pain medication. You may drive when your leg is pain free, you have good control of it and are walking normally and you are not taking narcotic pain medications. This is generally two to four weeks after anterior total hip replacement.

Medications: Generally you will be prescribed a narcotic pain medication to help relieve discomfort following surgery. Narcotic pain medications are constipating, so it is important that you eat a high fiber diet and drink plenty of water while you are taking them. You can not drive or operate any kind of machinery while taking pain medications. Do not drink alcohol while taking pain medications. It is important to take these medications as directed and only take them as necessary for pain.



TED Hose: It is common to have swelling in the legs, ankles and feet after surgery. It is beneficial to wear TED hose until your follow up appointment to decrease swelling. It is ok to remove the stockings if they are uncomfortable or to wash them. It is best to wear them as much as possible.

Blood Clot Prevention: Unless you are on blood thinners, take aspirin, 81mg, 1 tablet, twice a day, (usually with breakfast and dinner) for one month after surgery to thin out your blood.

During the first 10 days after surgery, do not sit in a chair for long periods of time (no more than 30 minutes at a time, 3-4 times per day), then progress to longer periods if there is no swelling of the legs. When not walking or exercising, you should be lying down in bed with legs elevated to prevent swelling, doing ankle pumps to prevent blood clots. You should be decreasing the time in bed in a gradual manner.

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Warning Signs: Call your orthopaedic surgeon immediately if you experience any of the following:

- Fever of 101.5° F or higher.
- Chills.
- Persistent warmth or redness around the shoulder.
- Persistent or increased pain.
- Unusual bleeding (some surgical wound drainage is normal)

Go to the Emergency Room immediately if you experience any CHEST PAIN or SHORTNESS OF BREATH, as these symptoms can be a sign of a life threatening condition.

Follow-up Appointment: You should have a follow-up appointment to see Dr. Grutter 10-14 days following surgery. If your follow-up appointment was not previously scheduled please call the office when you get home.