



**HOME INSTRUCTIONS**

**PHYSICAL THERAPY**

Hip Surgery / Anterolateral Approach

Therapist \_\_\_\_\_  
(919) 681-2030

- I. **Positions to avoid for the next**  6-8 weeks  12 weeks
  - \_\_\_\_\_A. Do not extend \_\_\_\_\_ leg behind you. Do not step backwards with your \_\_\_\_\_ leg. Do not roll onto your stomach.
  - \_\_\_\_\_B. Do not cross midline of body with \_\_\_\_\_ leg.
  - \_\_\_\_\_C. Do not rotate \_\_\_\_\_ leg outward. Toes and kneecap should point towards ceiling.
  - \_\_\_\_\_D. Do not slide \_\_\_\_\_ leg out to side without assistance.
  
- II. A. **Walking:** Use walker/crutches until your doctor says you no longer need them (approximately 6-8 weeks). You should rest your \_\_\_\_\_ foot flat on the floor putting
  - No weight  Touch-down weight
  - Moderate weight  Weight as tolerated

on it. If allowed, make sure the foot does rest on the floor because it is less stressful to let it rest there than to hold it up.
  
- B. **Steps:** Always go up with your stronger leg first followed by weaker leg, then assistive device. To go down: assistive device first, weaker leg, then stronger leg. If a railing is available to you, use it.
  
- III. **Positioning**
  - A. Avoid prolonged sitting: i.e., more than one-two hours at a time. Stand up, walk or lie down instead.
  - B. Do not put a pillow under knee while in bed or sitting.
  - C. You are encouraged to lie flat on your back in order to maintain flexibility of the hip muscles.



- IV. **Swelling:** Some swelling of your hip and leg is normal but needs to be alleviated before optimum pain relief is felt. To prevent further swelling and to help decrease present swelling, do the following:
- A. Elevate your entire operated leg up on two pillows.
  - B. Do ankle pumps exercise. The calf muscle acts like a second heart by pumping fluid out of your leg.
  - C. Put ice packs on operated hip (to make an ice pack, fill a plastic bag with ice, place a towel over hip and put ice over towel).
  - D. Do not put any form of heat on your hip. This includes creams such as Ben Gay, Icy Hot, etc.

- V. **Infection/Phlebitis:** Notify your doctor immediately if you notice the following symptoms:
- A. Different pain, redness, swelling and/or possible drainage in the operated hip. This may also be accompanied by a fever. These are symptoms of infection in your new hip and should not be ignored.
  - B. Redness, swelling, heat and tenderness in your calf. This could be a sign of phlebitis (blood clots) and also should not be ignored.

*NOTE: It is imperative that you stay on bedrest with either of the above conditions until you have talked to your doctor.*

- VI. **Activities of Daily Living:** next 6-8 weeks
- A. Do not drive until given permission by your doctor.
  - B. Riding in a car is permitted as long as you stop every 1-2 hours to walk around for several minutes before resuming your ride.
  - C. Sitting: Avoid low chairs and sofas because it can be difficult to get out of them. Instead, sit on higher chair or chair with a firm pillow in it. A recliner would be more comfortable.
  - D. You may lie on either side with a regular pillow between your legs. If this is a revision surgery, use the blue abduction pillow.
  - E. Avoid gaining excessive weight. Try to maintain ideal weight.
  - F. Bathing-sitting in the bottom of the bathtub is forbidden. Take a shower or sponge bath instead.
  - G. Wear sturdy, comfortable walking shoes. Avoid high heeled shoes or slip on slippers.



- H. Avoid squatting. If item is needed in lower cabinets or floor call for assistance or use “reacher”.
- I. When sitting or standing, always kick operated leg out in front to prevent excessive pressure in hip. Studies show a hip receives more pressure during sit and stand transfers than actual walking.

**VII. Exercise: Next 6-8 weeks**

- A. Continue the exercise program that your therapist has given you. You may add small (1-3 lb.) ankle weights after 4 weeks.
- B. You may be instructed by your therapist to progress your exercise program after 6 weeks. You may do this on your own, or with a family member’s help.
- C. Continue to walk with your walker or crutches to help increase your endurance.
- D. You may ride a stationary bike 4 weeks after surgery with no resistance on the pedals.
- E. You may begin swimming after your incision heals (usually about 2 weeks after surgery). Use a ramp or steps with a railing to get in and out of the pool (don’t use the ladder).

**VIII. Exercise: After 8 weeks**

- A. Continue a walking, swimming, or stationary biking program for aerobic conditioning.
- B. You may resume golf or cycling after 3 months.
- C. Avoid jarring or stop-start sports such as jogging, tennis, or aerobics-these might loosen your prosthesis.