

# Young Adult Hip Open Preservation Surgery Journey Guide

Thank you for choosing Washington University Orthopedics. Our team of highly-specialized health care providers will work with you to optimize your treatment and care. We are committed to making a correct diagnosis and developing your treatment plan to ensure that you receive the highest quality and safest care possible.

Open hip preservation procedures are used to treat a variety of hip conditions in young adults. Your surgeon has determined that \_\_\_\_\_ is the best treatment for you. Please refer to your handout for more information on this procedure.

With this guide, you will start to prepare for living a healthier and more active lifestyle. During your stay with us we will safely help you recover. By reading this, you're already on a journey back to your favorite activities.

## YOUR JOURNEY TO RECOVERY STARTS NOW.



**This is your journey guide for a successful surgery. You will have an excellent care team to lead you along the way**

- Use this guide to learn more about what will happen before, during and after surgery.
- Complete the guide checklists. This will help you recover as fast as you can.
- Bring this guide along with you to all appointments, classes, meetings and your hospital stay.
- Review your surgery timeline on page 2.

Patient

Surgeon

Procedure

**My surgery will take place at:**

- Barnes-Jewish Hospital**  
 One Barnes-Jewish Hospital Plaza Drive  
 St. Louis, MO 63110
- Barnes-Jewish West County Hospital**  
 12634 Olive Blvd.  
 Creve Coeur, MO 63141
- St. Louis Children's Hospital**  
 One Children's Place  
 St. Louis, MO 63110

**SURGERY TIMELINE**

	DATE	TIME	NOTES
<b>Getting healthy for surgery</b> Meeting with your orthopedic surgeon			Learn more on page 5
<b>Getting ready for surgery</b> Surgery evaluation at the Center for Preoperative Assessment and Planning (CPAP)			Learn more on page 6
<b>Imaging</b> CT and radiology tests			Refer to your map
<b>Preparing your skin for surgery</b> Start your preparations 5 days before your day of surgery			Learn more on page 9
<b>Day of surgery</b> 1-3 days before surgery, your surgeon's office will call you and tell you what time to arrive			Learn more on page 14
<b>Planning your discharge</b> Meeting with your care team			Learn more on page 17
<b>Your journey home</b> Visit from your home care team			Learn more on page 19
<b>Continuing your recovery</b> Visit an outpatient therapy center			Learn more on page 19
<b>Follow-up appointment</b> Talk about your progress with your surgeon and next steps of your treatment plan			Learn more on page 21

**If you have questions at any point in your journey, contact:**



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## GETTING TO KNOW YOUR CARE TEAM

*Your care team is here to provide world-class health care in a compassionate, respectful and responsive way. We are committed to help you during this journey.*

<p><b>Orthopedic Surgeon</b></p> <p>Your surgeon and surgical care team will guide your care and perform your hip surgery.</p>	<p><b>Registered Nurse (RN) and Patient Care Tech (PCT)</b></p> <p>Your care team is trained in orthopedics and will follow your surgeon’s plan for your rapid recovery. They will teach you and your coach how to stay safe and healthy during every step of your recovery.</p>
<p><b>Anesthesia Team</b></p> <p>An anesthesia physician or advanced practice nurse will evaluate your surgery needs. This team is specially trained to keep you safe during surgery and in recovery. They are key team members to manage your pain. You will meet a member of this team at your surgical evaluation at the Center for Preoperative Assessment and Planning (CPAP).</p>	<p><b>Physical Therapist (PT)</b></p> <p>Your physical therapy team plans the best way for you to build your strength before and after your hip surgery. This team utilizes special training to help get you moving and boost your abilities after surgery.</p>
<p><b>Nurse Practitioner (NP)</b></p> <p>Your advanced practice registered nurse will work with your surgeon to manage your care. Your nurse practitioner will see you on the floor after your surgery.</p>	<p><b>Occupational Therapist (OT)</b></p> <p>Your occupational therapist will help you plan to safely complete daily activities, like dressing and bathing. They will teach you how to be independent at home.</p>
<p><b>Case Manager</b></p> <p>Your case manager is trained as a registered nurse or social worker. Your case manager will plan with your care team to best assist your needs about discharge, home equipment and help you with your insurance questions.</p>	<p><b>Patient Experience Team (available at Barnes-Jewish Hospital)</b></p> <p>We want you and your loved ones to have an excellent experience during your hospital stay. Our patient liaisons and hospitality services team members are available to answer questions, as well as provide information about the campus area resources.</p>

## GETTING HEALTHY FOR SURGERY

Let's get started! Here is a checklist that will guide you to be your healthiest for your hip surgery.

### Choose a coach/caregiver for your care journey

Your coach or caregiver plays an important role in your recovery. Select a spouse, family member, or friend who can be by your side during your entire journey. Please choose a coach based on the following:

- **Your coach must:**
  - Be in good physical condition.
  - Stay with you after you are discharged from the hospital for up to 1 week.
  - Provide transportation to and from surgery and doctor visits.
  - Communicate clearly with your doctor's team as needed.
- **Your coach will assist you with:**
  - Medication and pain management.
  - Personal care such as bathing and using the bathroom.
  - Household chores, meal prep, etc.
  - Position changes, including getting in and out of bed.
  - Following all instructions from your doctor's office including exercises and restrictions.
- **Your coach will:**
  - Motivate you to be your best during your journey.
  - Help you stay on track and reach your recovery goals.
  - Be a second set of ears to learn with you.
  - Help you become independent faster.
  - Learn the proper exercises from therapy and encourage these exercises.

### Check-in with your primary care doctors

It is important to check in with your primary care physician. Please tell your orthopedic surgeon if you are being treated by any other doctors.

### Stop smoking and the use of nicotine products

Nicotine products include cigarettes, patches, nicotine gum, tobacco, e-cigarettes and vaping products. **You must stop smoking.** Your body will recover faster and prevent infection.

- The Washington University Living Well Center offers individual and group smoking cessation classes and direct access to a variety of medical services to help you stop smoking for good. To sign-up or learn more, call 314-514-3565 or visit [livingwellcenter.wustl.edu](http://livingwellcenter.wustl.edu).
- For tips on how to change habits, reduce stress, and prevent relapses, visit [smokefree.gov](http://smokefree.gov) or call toll-free 1-800-QUIT-NOW (1-800-784-8669).

### Diabetes

It is very important to control your blood sugar levels during your journey. This will help you heal faster, prevent wound complications and assist in preventing infection. *For more information, call the Barnes-Jewish and Washington University Diabetes Center at 314-TOP-DOCS (314-867-3627) or toll-free at 866-867-3627.*

### Nutrition

Eat well-balanced meals to be healthy for surgery. We will teach you how to be at your best health for your surgery and how the food you eat can benefit your healing and improved lifestyle after surgery. A registered dietician can help you understand how to reach your goals faster, perform better and be healthier. *If you are interested in additional nutrition counseling, call Move by BJC at 314-286-0525.*

### Returning to work and/or school

Ask your surgeon's office when you are likely to return to work. Your care team will help you prepare to go back to work safely and return to your active lifestyle. Typically, patients are out of school for 4-6 weeks. For a desk job, we recommend taking off 6-8 weeks and for a labor-intensive job, we recommend 3-4 months.

## GETTING READY FOR SURGERY: PRE-TESTING

*The surgical evaluation is an important step in your journey.*

### SURGICAL EVALUATION VISIT AT THE CENTER FOR PREOPERATIVE ASSESSMENT AND PLANNING (CPAP)

- You and your coach will meet with the anesthesia team at your CPAP visit.
- We will schedule your visit 2-4 weeks before surgery.
- If you need to change the time of your CPAP visit, please call (314) 362-4275 between the hours of 8am and 5pm. Please let your doctor's office know the new date and time.

#### CPAP locations

##### Center for Advanced Medicine – 1st floor

4921 Parkview Place  
St. Louis, MO 63110

##### Barnes-Jewish West County Hospital

Main entrance, registration desk  
12634 Olive Blvd.  
Creve Coeur, MO 63141

##### St. Louis Children's Hospital\*

One Children's Place  
St. Louis, MO 63110

*\*Your chart will be reviewed by the pre-surgery team and you will either have a phone or in-person visit, which may include additional testing.*

### WHAT TO BRING

- Patient journey guide.**
- Insurance card, driver's license or state ID.**
- Advance directive (if you have one).**
- Complete list of your current medications including prescriptions, over-the-counter, vitamins and herbal supplements.**

### WHAT TO EXPECT

- Health review**
  - We will talk about your health history and past surgeries.
  - Please tell us if you ever had a problem with anesthesia.
  - You will receive a health exam that includes blood tests, EKG and other tests.
- Medicines**
  - We will talk about your current medicines.
  - You will be given instructions about which medicines to take and which one to stop before surgery. **It is important to follow these instructions.**
  - You will be given surgical soap to shower with before surgery.

#### MAPS AND PATIENT INFORMATION

##### **Barnes-Jewish Hospital/Center for Advanced**

**Medicine:** [barnesjewish.org/directions](http://barnesjewish.org/directions)

##### **Barnes-Jewish West County Hospital:**

[barnesjewishwestcounty.org/directions](http://barnesjewishwestcounty.org/directions)

##### **St. Louis Children's Hospital:**

[stlouischildrens.org/visit-us](http://stlouischildrens.org/visit-us)



## SAFETY ITEMS AND EQUIPMENT

The following is a checklist of safety items and equipment you need to be independent at home.

### REQUIRED EQUIPMENT

#### Walker or crutches

- If you do not have a walker or crutches, please do not purchase these items on your own. While you are staying with us your care team will want to help you get equipment specially fit for you.
- If you own this equipment, pack it in your car for when you go home.

#### Toilet

- Raised toilet seat with handrails and locking clip  
Make sure it fits your style of toilet.  
-OR-
- 3-1 commode/bedside commode, an easy-to-use toilet

### OPTIONAL EQUIPMENT

#### Tub transfer bench

This will help you get in and out of the bathtub.

#### Shower chair

You will sit on this while taking a shower.

### REQUIRED EQUIPMENT (not covered by insurance)

#### Hip kit

The kit includes a plastic sock aide, dressing stick, 32" reacher, elastic shoelaces (2 pairs), long-handled sponge and a long-handled shoe horn.

#### Continuous Passive Motion (CPM) Machine

A CPM machine will be used for gentle motion of the hip. Our hospital case coordinator will make arrangements to have this equipment delivered to your home. You will use this machine 4-6 hours/day with up to 60 degrees of flexion as tolerated for 3-4 weeks.





## WHEN TO STOP YOUR MEDICATIONS

### 7 days before surgery, stop taking:

- All oil-soluble vitamins, including fish oil, omega 3, and vitamin E.
- Hormone replacement medications, including Estradiol, Prempro and testosterone.
- Multivitamins
- Glucosamine
- Chondroitin
- Dietary supplements

You may continue taking any Tylenol product until the day of surgery as needed for pain as directed on the bottle.

### Birth control pills (BCP)

Stop your birth control pills at end of menstrual cycle prior to surgery and stay off BCP for 2 cycles. Do not start a pack that you would not complete prior to the surgery. Another form of contraception should be used.

### 2 days before surgery, stop taking:

- Anti-inflammatory medications, including Aleve, Advil, Motrin, Ibuprofen, Naproxen, Voltaren, Diclofenac, Meloxicam, Mobic, Etodolac, Lodine, Indomethacin, Indocin, etc.
- Anti-inflammatory medications may not be resumed until 4 months after surgery.

### Stop blood-thinning medications \_\_\_\_\_ days prior to surgery

### Consult with your prescribing provider/cardiologist before stopping your blood-thinning medication

Some examples of blood thinning medications include:

- Plavix
- Clopidogrel
- Coumadin
- Warfarin
- Pradaxa
- Xarelto
- Eliquis
- Effient
- Jantoven
- Aspirin

**It might be time for you to stop taking other medications before surgery, in addition to the medications and supplements listed above. Please review your Center for Preoperative Assessment and Planning medication instructions.**



## PREPARING YOUR SKIN FOR SURGERY

The purpose of preparing your skin before surgery is to ensure that your skin is thoroughly cleansed to reduce the amount of bacteria that is normally found on skin. This helps lower your risk of developing a surgical site infection.

### DECOLONIZATION THERAPY

Getting rid of MRSA is called “decolonization”. Decolonization helps decrease the amount of germs on your body and helps avoid infections after surgery.

**Germs can live in your nose and on your skin. There are two parts that decolonization therapy focuses on:**

- Nasal ointment:** rub nasal ointment into each of your nostrils (the inside of your nose) twice a day for 5 days. The nasal ointment can be picked up from your pharmacy.
- Scrub Care soap:** take a shower with a special soap called Scrub Care once a day for 6 days. The soap will be given to you at your pre-testing visit.



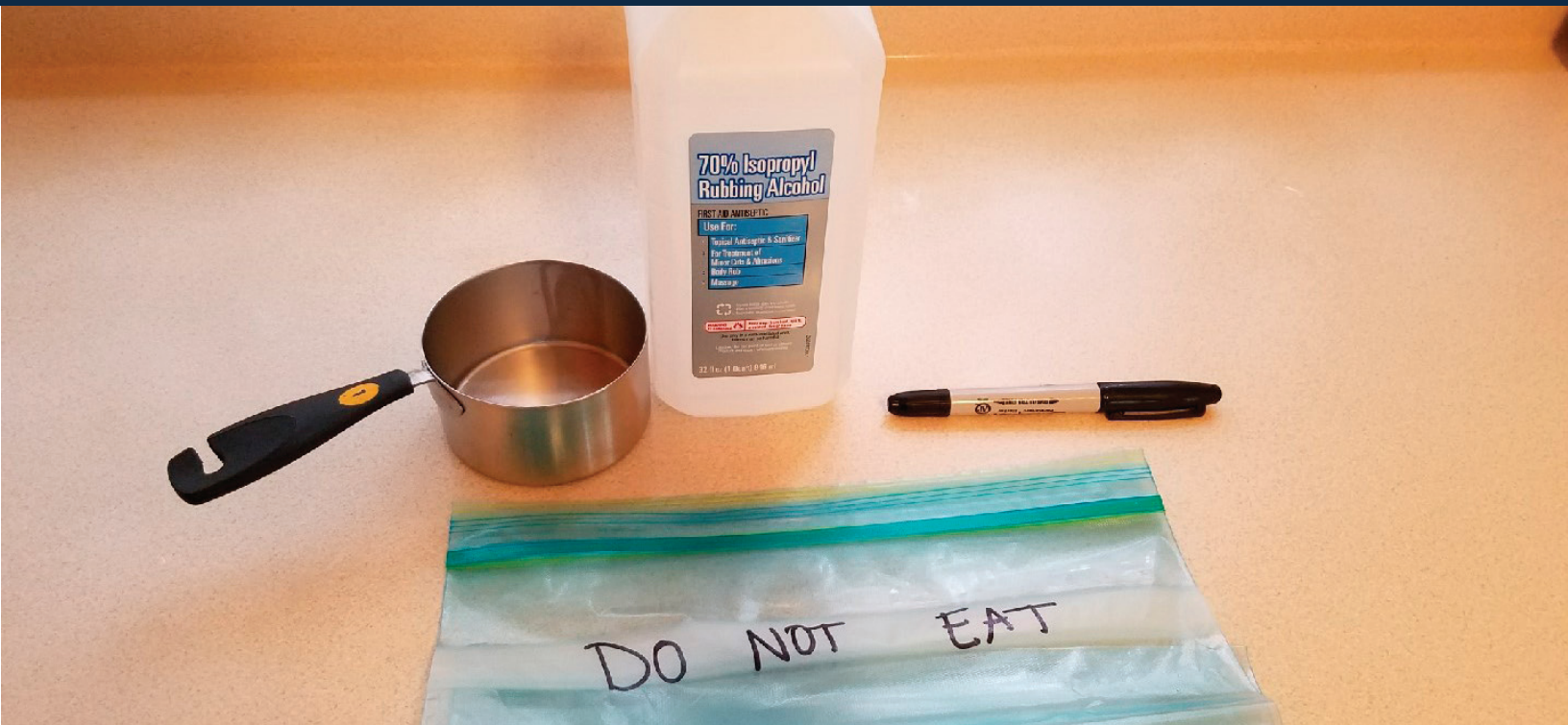
**Start date for decolonization therapy:** \_\_\_\_\_

TASK	DAY 5	DAY 4	DAY 3	DAY 2	DAY 1	DAY OF SURGERY
<b>Nasal ointment</b>	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> AM	<i><b>DO NOT</b> use nasal ointment the day of surgery.</i>
	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	<input type="checkbox"/> PM	
<b>Shower with Scrub Care</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <i>Take your last shower using Scrub Care before surgery. <b>DO NOT</b> apply lotion, ointments, or oils on your skin after showering.</i>

### HEALTH CHECK

- Do you think you may have an infection?**  
Call your surgeon’s office if you feel sick or you think you may have an infection of any kind, such as respiratory, bladder, skin or tooth infection.
- Do you have any open wounds?**  
Check your skin for open sores, wounds and rashes. If you have any questions call your orthopedic surgeon’s office.

**For additional information, please refer to the information you received during your Center for Preoperative Assessment and Planning visit.**



## ICE THERAPY: MAKING YOUR OWN ICE PACK

### Ingredients

- **1 quart or 1 gallon plastic freezer bags (depending on how large you want the cold pack)**
- **2 cups water**
- **1 cup rubbing alcohol**
- **Blue food coloring (optional)**

### Instructions

1. Fill the plastic freezer bag with one cup of rubbing alcohol and two cups of water. Blue food coloring is optional, but please consider using blue food coloring and/or labeling the pack for safety purposes.
2. Try to get as much air out of the freezer bag before sealing it shut.
3. Place the bag and its contents inside a second freezer bag to contain any leakage.
4. Leave the bag in the freezer for at least an hour.
5. When ready to use, place a towel between the gel pack and bare skin to avoid burning the skin.

## SET UP YOUR HOME CHECKLIST

<input type="checkbox"/> Prepare easy-to-eat meals for when you return home.
<input type="checkbox"/> For your safety, put your favorite things in places you can easily reach.
<input type="checkbox"/> Delay mail or have someone take care of your mail.
<input type="checkbox"/> Have someone take care of your children and pets.
<input type="checkbox"/> Have someone take care of your yard work.
<input type="checkbox"/> Do your laundry.
<input type="checkbox"/> Clean your home.
<input type="checkbox"/> Make sure all stairs at your home have a sturdy railing.
<input type="checkbox"/> Pathways must be clear where you walk. Pick up, remove or be aware of anything that could be in the way of you walking or could cause you to slip or trip. This includes loose rugs, uneven surfaces, wires and cords.
<input type="checkbox"/> Make sure all areas you walk in are well lit. Change burnt-out light bulbs and, if needed, add extra light to see.
<input type="checkbox"/> Have a chair with armrests to easily get up from a sitting position. Make sure the chair is sturdy and not too low.
<input type="checkbox"/> If you climb stairs to get to your bedroom, if possible, consider other options in your home.
<input type="checkbox"/> Plan to be independent by borrowing or purchasing items to help you while home. To review equipment go to page 7.





## DAY BEFORE SURGERY

To be at your best health for surgery, please take some time to review the following.

- Take medications that were given to you by your surgeon's office (Naproxen and nausea patch).**

- Pack your bags.** Complete the "What to Bring" checklist on page 13.

- Please follow any special instructions you received from your care team or during your Center for Preoperative Assessment and Planning visit.**

If you are not sure if you were given any special instructions, please call us. We want to make sure you have everything you need to prepare for surgery.

- If you did not already, please complete the "Set Up Your Home" checklist on page 11.**

For a successful rapid recovery, your home will need to be in order and ready for you to return.

- If you have a walker or crutches, pack them in your car for when you go home.**

If you do not own this equipment, please wait before making this purchase. While you are staying with us, your care team will help you get equipment specially fit for you. You will need to buy the appropriate equipment to help you be independent at home.

- Eat a filling dinner.** You cannot eat or drink anything after midnight, including chewing gum and lozenges. Your nurse coordinator will let you know if you can have clear liquids the morning of surgery.

- Remove all nail polish from your fingernails.**

- Remove all ear and body piercings.**

- Don't shave.** Especially do not shave near the area where you will be having surgery (your hip or knee).

- Continue following your clean-skin therapy using the special soap and nasal ointment.**

- Continue to wear freshly-washed clothes and sleep in clean sheets.** This will help prevent infection.

**Your care team is here to help. Please call your surgeon's office if you have any questions.**



## WHAT TO BRING TO THE HOSPITAL

<input type="checkbox"/> An attitude of success!
<input type="checkbox"/> This journey guide.
<input type="checkbox"/> List of your current medications and health history.
<input type="checkbox"/> Your insurance card.
<input type="checkbox"/> Your photo ID.
<input type="checkbox"/> A prescription card (if you have one).
<input type="checkbox"/> Loose-fitting clothes for discharge, such as t-shirts and drawstring or elastic-band pants.
<input type="checkbox"/> Clothing to layer — you may want options for warmth and comfort.
<input type="checkbox"/> Comfortable non-skid shoes and socks (No flip-flops, sandals or Crocs).
<input type="checkbox"/> Personal toiletry items.
<input type="checkbox"/> If you sleep with a breathing machine for obstructive sleep apnea, you must bring it with you.
<input type="checkbox"/> Phone numbers of people you may want to call during your stay.
<input type="checkbox"/> Cell phone charger.
<input type="checkbox"/> A walker or crutches (if you have them) for when you go home.

## WHAT NOT TO BRING TO THE HOSPITAL

<ul style="list-style-type: none"><li>• Jewelry.</li><li>• Valuables such as a purse, wallet and large amounts of money.</li><li>• Cell phone — It is best that you leave your cell phone with your coach.</li><li>• Medicines from home — your care team will give you all medicines you will need during your stay.</li></ul>
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## DAY OF SURGERY

Please follow and check off each box when complete.

### BEFORE YOU ARRIVE

- Do not use any nail polish, lotions, deodorant, makeup, perfume or body sprays on the day of surgery.**
- Take medications that you were instructed to take the morning of your surgery, with a sip of water.**
- Follow any special instructions given to you for the morning of surgery.**

### PARKING INFORMATION

#### Parking at Barnes-Jewish Hospital

- **Valet parking** – Located at the lobby entrance on the street level of Barnes-Jewish Hospital Plaza Tower. As you travel from Kingshighway, take Entrance A on Barnes-Jewish Hospital Plaza, and continue past the stop light at the entrance to the Plaza Garage. The valet parking and patient drop-off area will be on your left. Make a U-turn to your left and pull forward past the entrance to the hospital for valet service. Valet parking is available Monday through Friday from 6 a.m.-5:30 p.m.
- **Plaza Garage** – A subsurface parking garage located at entrance A, near the corner of Kingshighway and Barnes-Jewish Hospital Plaza, across the street from Barnes-Jewish Hospital Plaza Tower.

#### Parking at Barnes-Jewish West County Hospital

- **Valet parking** – Available at the front entrance.
- **Self parking** – Sufficient free parking is available on surface lots.

#### Parking at St. Louis Children's Hospital

- **Children's Patient and Family Garage** – Located at the intersection of Kingshighway Boulevard and Children's Place. As you travel from Kingshighway, take Entrance C onto Children's Place from Kingshighway Boulevard. Make an immediate right into the garage.

### CHECK-IN

We are here to help. If you need directions at any location, visit the information desk located on the main level of the hospital.

- Barnes-Jewish Hospital: Check in at the surgery waiting area on the main floor of the hospital.**

- Barnes-Jewish West County Hospital: Check in at the surgery waiting area on the lower level procedural floor of the hospital.**

- St. Louis Children's Hospital: Check in at the Same Day Surgery waiting area, located on the 6th floor of the hospital.**

- After you check in, you will go through hospital registration. Upon completion, your care team will take you to the pre-surgery area.

### BEFORE GOING INTO SURGERY

- We will review your medications and health history.
- We will start an IV in your arm.
- Your anesthesiologist will talk about the general anesthetic.
- Your orthopedic surgeon will meet with you to review the surgical plan and mark where the surgery will occur.
- Before going to the operating room, you will be given medication for comfort.

### DURING YOUR SURGERY

- Throughout your surgery your surgical team will take excellent care of you. They will monitor your breathing, heart rate and blood pressure.
- A catheter, used to drain urine from your bladder, will be placed during your surgery. The catheter will stay in place until the day after surgery.
- Updates about your progress will be given to your coach, family member or friend in surgical waiting.

### RIGHT AFTER SURGERY

- You will wake up in the recovery room when your surgery is complete.
- Specially trained nurses and an anesthesiologist will monitor you. They will keep you safe and comfortable while you recover.
- Your care team of specialists will be with you during your recovery journey.



## YOUR HOSPITAL STAY

Have your coach, friends or family at your side to learn how to help you when you get home.

### What to expect

- A member from your care team will meet you and answer any of your questions.
- We value your specific needs, and we do our best to meet them. If you have a question and we are not by your side, you will be shown how to quickly contact us with a handheld call light.
- Your blood pressure, heart rate, body temperature, IV fluids and healing progress will be checked frequently.
- You will have a large dressing or bandage covering the incision where you had surgery. You may have a drain coming out of your incision and connected to a container, which will help reduce swelling.
- Swelling is possible and common. Using ice therapy will help keep the swelling under control.
- Your orthopedic nurse or therapist will help you get out of bed.
- Your safety is our biggest priority. If you are alone and want to get up, please contact us with the call light. **Do not attempt to get up alone.**


### Call light

You will have access to your care team at all times with your personal handheld call light. By simply pushing one button, you will be connected to a team member.

### Pain management

We will work with you to help manage your pain. We will ask you to rate the pain you feel after surgery on a scale of 0 to 10 (see chart below). Your care team will assess how to best help you feel comfortable. They will tailor your medicines to meet your needs to give you a safe, rapid recovery. It is important to let us know when you first start feeling uncomfortable. Telling us right away will help us keep the uncomfortable feeling from getting worse. Please contact us with the call light any time you need help.

### PAIN SCALE

	<b>0</b> No Pain	<i>Does not interfere with ADLs*</i>
	<b>1</b>	
	<b>2</b> Mild Pain	<i>Mildly interferes with ADLs*</i>
	<b>3</b>	
	<b>4</b> Moderate Pain	<i>Somewhat interferes with ADLs*</i>
	<b>5</b>	
	<b>6</b> Moderate Pain	<i>Partially interferes with ADLs*</i>
	<b>7</b>	
	<b>8</b> Severe Pain	<i>Greatly interferes with ADLs*</i>
	<b>9</b>	
	<b>10</b> Worst Pain Possible	<i>Completely interferes with ADLs*</i>

\* Activities of Daily Living (ADL) such as: sleeping, eating, mood, walking, enjoyment of life relationships



### Healing by movement

- Your care team will help you start moving after surgery, which helps your breathing (air flow), circulation (blood flow) and digestion (nutrient flow). Movement over time will help lessen pain and help you heal faster.
- Your care team will help you get out of bed the day of surgery. This will occur shortly after arrival to the orthopedic unit. Your safety is the team's biggest priority, so someone will be by your side every step of the way.
- It is proven that the sooner you move after surgery, the more successful your recovery will be.

### Preventing problems after surgery

Movement will also help prevent a blood clot and pneumonia. Your nurse or therapist will help you sit on the side of your bed to help you move. Every day, you will get out of bed and be active. This movement will help you learn how to move your hip to lessen pain, move blood to prevent a blood clot, and breathe to move air flow to prevent pneumonia.

### Preventing blood clots

- Your surgeon-led care team will determine what treatments to use to help prevent blood clots.
- After surgery, you will take blood-thinning medications as directed by your surgeon.
- Additional preventive measures may include a compression sleeve that helps squeeze your leg muscle to keep the blood moving.
- The nursing staff will encourage you to move your legs, feet and ankles to keep the blood flowing.

### Preventing fever

- You will receive a medical device called an incentive spirometer. This device will help prevent a fever and encourage deep breathing to exercise your lungs. You will continue to use this device when you go home.
- It is important to be out of bed and moving because movement helps you take deep breaths and creates better air flow to your lungs.

### Your nutritional needs

- Your nurse will help you decide how quickly you can start eating. It may take a few days before you have a bowel movement. Anesthesia, pain medication and not moving around can cause constipation.
- Be sure to drink plenty of fluids (water is always best) and eat whole grains, fruits and vegetables.
- Activity will help with your digestion. To prevent constipation, your surgeon will prescribe a stool softener or laxative.



### Physical and occupational therapy

After surgery, you will meet with your orthopedic therapists. Your physical therapist will teach you how to get in and out of bed, how to walk, how to climb stairs and how to do certain exercises safely. With the guidance of your physical therapist you will walk short distances.

- Protecting your hip is very important. We will teach you how to modify or limit your activity in order to reduce soreness and strengthen your muscles around the joint.
- When you leave, you should be able to SAFELY do the following on your own:
  - Get dressed
  - Get in and out of bed
  - Get in and out of a chair
  - Get in and out of a car
  - Understand how to successfully move
  - Perform exercises to increase strength
  - Have balance and be mobile
  - Climb up and down stairs

### Surgeon and nurse practitioner responsibilities

Your surgeon and the nurse practitioner will visit you regularly during your hospital stay. At discharge, you will receive your medication prescriptions plus any equipment you need. Please refer to page 7 regarding the checklist of safety items and equipment you need to be independent at home.

### Planning your discharge

It is important to us that your journey is successful. Our goal is to get you back to your active lifestyle safely. As you recover, your entire care team will discuss when it is safe for you to leave the hospital.

Together the team will discuss:

- Your progress
- Your strength and endurance abilities
- Your support resources
- Your needs after discharge

Your care team will work with you to determine your needs at home for a safe recovery.

### At discharge

- Your nurse will bring your discharge instructions from your doctor. Your nurse will review all instructions with you.  
**If you do not understand any discharge information, please ask as many questions as you like, so you are confident about what to do when you get home.**
- Physical or occupational therapy will give you copies of your home exercise program (HEP). You will continue with this HEP until your first postoperative visit with your surgeon. At this visit, your surgeon will tell you how/if you may increase activity.
- Your nurse will also give you discharge prescriptions. You can get these filled at your regular pharmacy.

## BARNES-JEWISH HOSPITAL PATIENTS

### Mobile Pharmacy:

Your discharge prescriptions can be filled at the Barnes-Jewish Hospital mobile pharmacy. The mobile pharmacy can bring the prescription medicines to your hospital room before you leave.

## CARE AT HOME CHECKLIST

<input type="checkbox"/> <b>Wear shoes that have enough support to prevent slips and falls. Do not wear backless or toe-less shoes.</b>
<input type="checkbox"/> <b>Stand up slowly to prevent feeling faint.</b>
<input type="checkbox"/> <b>Prevent being stiff by changing positions as much as possible or taking short walks.</b>
<input type="checkbox"/> <b>Do not lift heavy objects.</b>
<input type="checkbox"/> <b>Do not sit in low places that are hard to get up from.</b>
<input type="checkbox"/> <b>Go to all of your healthcare wellness checks. It is important to stay healthy.</b>

## STAYING HEALTHY CHECKLIST

<input type="checkbox"/> <b>Exercise to keep your hip strong.</b> When your surgeon and family doctors say it is okay, try to exercise regularly: 3-4 times per week, 20-30 minutes at a time.
<input type="checkbox"/> <b>Eat healthy.</b> Eat a balanced and healthy diet and manage your weight to have the best experience with your hip for years to come.
<input type="checkbox"/> <b>Stay nicotine-free.</b> Being nicotine-free means you care about practicing preventive medicine. Also, try to avoid smoky environments. Secondhand smoke is also harmful.
<input type="checkbox"/> <b>Live a healthy lifestyle.</b> Good health is a commitment to knowing your body's blood pressure, blood glucose, blood cholesterol and weight. Improve your overall health by getting checkups regularly to be healthy at any age.

## YOUR JOURNEY HOME

*Our goal is for you to successfully return to an active lifestyle. In order to be successful, you will have to keep strengthening your hip at home.*

### Home-based therapy

You may have an orthopedic nurse and therapist visit you at your home to understand your healing needs. Your nurse will check your incision, remove your staples or sutures if you have them, and monitor your medications. Your therapist will help you follow your customized home exercise program safely. Your home-based therapy team will work with both you and your surgeon to plan a safe and successful recovery at home.

### Outpatient therapy center

To have even greater success with your hip surgery, your surgeon will recommend continuing your therapy at an outpatient therapy center. An outpatient therapy center is a fitness-type center that focuses on healing your hip with guidance from a physical therapist. You will begin outpatient therapy 4-6 weeks after surgery. Please plan ahead and schedule your visits early.

At the therapy center, you and your physical therapist will follow your surgeon's strength-training plan. This plan will help reduce soreness, stiffness and improve balance, movement and control with your hip.

### Caring for your surgical incision

- Always handle or touch your dressings with freshly washed hands and be sure to wash your hands after changing the dressing. Hand washing is key to staying healthy and preventing infections.
- Change your dressing as instructed by your care team.
- Keep a close watch on your incision for redness, hotness, odor, increased drainage or opening of the incision. If you notice this call the surgeon's office.
- It is common to have some swelling after exercise and activity.
- Follow your orthopedic surgeon's instructions on caring for your incision. **DO NOT** submerge your incision (in a tub, hot tub, pool, lake, river, etc.) until it is healed and your surgeon gives approval. Follow the instructions for how to shower with your incision.

### Postoperative comfort plan

Your care team will give you a plan on how to manage your pain when you go home.

- Start by taking your pain medication as prescribed. As your pain lessens, take less pain medication.
- Remember to practice other ways to manage pain:
  - **Activity:** movement and activity helps lessen pain.
  - **Ice therapy:** control pain and reduce swelling with an ice machine or pack.
  - **Elevation:** improve blood flow by raising your incision higher than your heart, this will help reduce the swelling.
  - **Distraction:** focus on something other than your pain.
  - **Relaxation:** find a quiet space, close your eyes and concentrate on your breathing.

### Constipation (trouble with bowel movements)

Pain medication and a decrease in mobility caused by your surgery can cause digestion difficulty and slow down normal bowel movements. Constipation is common, and your physician will prescribe a stool softener for you.

Some patients may also lose their desire for food after surgery.

- Try to eat smaller nutrient-packed meals more often.
- Keep fluids in your body. Water is the best choice.

**CALL YOUR SURGEON'S OFFICE IMMEDIATELY IF:**

- Temperature above 101° F or 38.5°C
- New or increased swelling of legs or feet
- Increasing pain that is not well controlled by current pain medication
- The incision becomes red or warm
- Opening up of an incision or wound that has been closed with stitches or staples
- There is new or increased drainage from the incision
- You are unable to walk or put weight on your leg
- You have increased numbness or tingling of the leg
- Either calf becomes painful, swollen or tender
- If you are overly worried, anxious or very concerned about any issue
- Increasing pain that is not responsive to pain medication and elevation of an extremity
- Pale or blue discoloration of an extremity that does not respond to elevation and release of bandages

**CONTACT YOUR SURGEON:****Business Hours:**

314-514-3500

**After-hours Exchange:**

314-388-5550 or toll-free 866-582-8055

**CALL 911 IMMEDIATELY IF:**

- Worsening of any medical condition
- Chest pain/pressure or sharp pain with deep breath
- Shortness of breath
- Rapid heart rate greater than 150 beats/minute
- Blood that appears when vomiting, coughing or with a bowel movement
- A sudden severe headache
- Fainting spells
- Loss of sensations/movement in an extremity or loss of bowel or bladder control
- Shaking chills or high fever that is unresponsive to Acetaminophen/Tylenol®
- Bleeding through your bandages that does not stop
- Any condition that you feel uncomfortable managing with a phone call.

**Do not drive yourself to the emergency room.**





### **Preventing blood clots at home**

Before you are discharged, your orthopedic nurse will review your physician-developed plan customized for you to prevent blood clots while home.

### **Driving**

Have your coach, family member or friend drive you until you feel comfortable to drive on your own. Before you can drive you must be able to:

- Be full weight-bearing on both extremities.
- Walk comfortably without support.
- No longer be taking prescribed pain medication.
- Feel ready to safely drive.

This will be discussed at your first postoperative visit, but is typically at least 6-8 weeks after surgery.

### **Sleeping**

You may have difficulty sleeping for a few months after surgery. Your sleep will improve over time. Sleeping pills are not recommended because they can have considerable side effects. Contact your surgeon's office if you have trouble sleeping.

### **Home exercise plan**

Do your exercises regularly to keep your body moving and get your muscles stronger. The more you stick to the plan, the quicker you will feel better. Also, keep walking, because it will help your body stay healthy. Use your walker or crutches until your surgeon or therapist tells you that you no longer need it.

### **Ice therapy**

- Continue using ice therapy for several weeks after surgery.
- Do not apply ice therapy directly on your skin. Use items such as a towel, wash cloth or pillow case as a barrier in between.
- Apply ice therapy up to 20 minutes at a time every hour to lower pain and decrease swelling.

### **Your follow-up appointment**

You will have a follow-up appointment with your surgeon about 4-6 weeks after surgery to talk about your progress and the next steps of your treatment plan.

During this appointment your surgeon will:

- Take an X-ray of your hip and discuss your progress.
- Ask you questions about how well you are following your discharge instructions and recovery plan.
- Review your medications, pain management and exercise program.
- Talk about your daily activities, which include returning to work.
- Discuss any additional treatment plans.





NOTES AND QUESTIONS

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