

# Precautions for Total Hip Replacement Patients Only

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The following is a list of precautions to keep you from dislocating your hip. Dislocating means to move a body part out of its usual position. During your stay at the hospital, your therapists and nurses will help remind you of your specific hip precautions. You will follow these precautions until your doctor tells you otherwise. Your therapist or surgeon will check the hip precautions that are right for you.

## Posterior Hip Precautions

### Do not bend your hip past 90 degrees

- Your knees must be lower than your hips while sitting.
- When going to stand up or sit down, do not lean forward.
- Do not reach toward the floor to pick up objects or to put on socks/shoes.
- While sitting, do not reach forward if you have to bend at your waist. Keep objects you may need close by.
- While sitting in bed, do not lean forward to pull up covers.
- Do not sit on a low toilet seat, couch or chair. Instead, use a raised toilet seat or place pillows or blankets on the chair/couch to raise your hips above your knees. This is also important while riding in a car.

Your new hip



Flexion precaution



# Precautions for Total Hip Replacement Patients Only

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## Posterior Hip Precautions continued

### Do not turn your knee or foot inward

- Do not reach across your body when reaching for items such as the phone or to fasten your seat belt.
- Do not pivot on your operated leg. Make sure you are picking your feet up and taking small steps to turn.
- Be careful not to let your leg turn inward while getting into or out of a bed or car.



### Do not cross your leg past the middle of your body

- Do not cross your knees or ankles. You may put a pillow between your knees as a reminder.
- Do not bring your knees together at any time.
- While sleeping or turning on your side, keep pillows between your knees to keep them from touching each other.
- Do not lie on your operated hip without talking to your doctor first.



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## Anterior Hip Precautions

### **Do not turn your knee or foot outward**

- Do not twist and reach across your body toward your non-operated side (especially while standing).
- Do not walk with your foot/toes turned outward.
- Do not pivot on your operated leg. Make sure you are picking your feet up and taking small steps to turn.

### **Do not extend your hip backward beyond the neutral position**

- When backing up, step back with your non-operated leg first.
- Do not take large steps forward with your non-operated leg.

## Additional Hip Precautions (Trochanteric)

Following some surgeries, the addition of extra precautions may be necessary. The following precautions may be added to your anterior or posterior precautions. Your physician and therapists will instruct you in which precautions to follow.

### **No active abduction**

- You should NOT use your own muscle power to move your operated leg out to the side (especially while getting out of bed).
- You may need to use a leg lifter or have someone assist you.

### **Do not turn your knee or foot outward**

- Do not reach or twist across your body toward your non-operated side (especially while standing).
- Do not walk with your foot turned outward.
- Do not pivot on your operated leg. Make sure you are picking your feet up and taking small steps to turn.

# Mobility After a Total Joint Replacement

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It's a good idea to practice these activities before your surgery. Practicing them before surgery will help you do them by yourself after surgery.

## Bed Mobility

After hip replacement, you will probably be most comfortable lying on the non-operated side. While lying on your side, you should have a pillow between your legs in order to maintain your hip precautions. You should place the pillow between your legs before rolling onto your side.

After a knee replacement, **DO NOT** place a pillow under your knee. You can place the pillow under your calf.

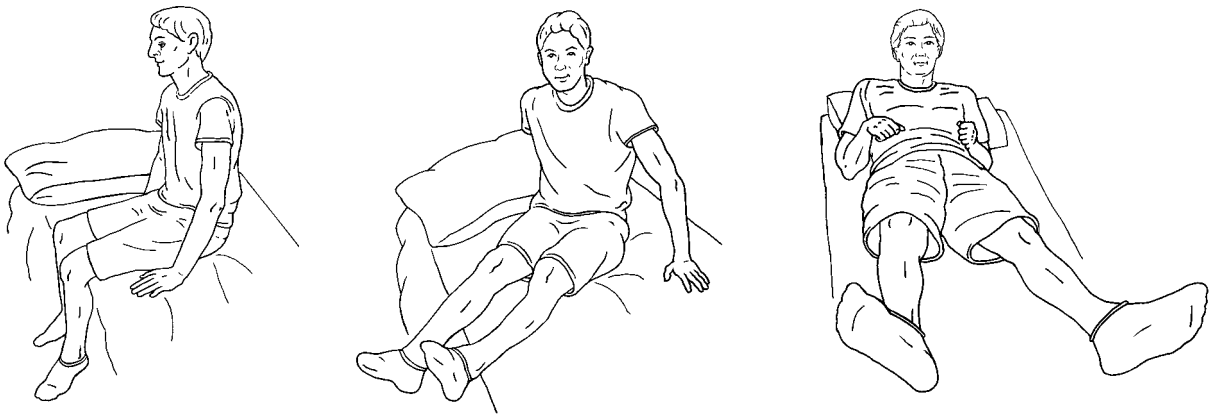
Getting in and out of bed: *If you have had a total hip replacement, you must keep your knees shoulder-width apart until your hip precautions have been lifted.*

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## Getting into bed

*Follow these instructions to get into bed:*

1. Sit down on the side of the bed. If possible, get into bed on the side of the bed that will allow you to put your non-operated leg in bed first.
2. Scoot your hips back on the bed.
3. Bring your non-operated leg up onto the bed first. As you continue to scoot in the bed, bring your operated leg up onto the bed. You may need someone to help you with this immediately following surgery.
4. Once both legs are in the bed, scoot toward the head of the bed until you are comfortable.



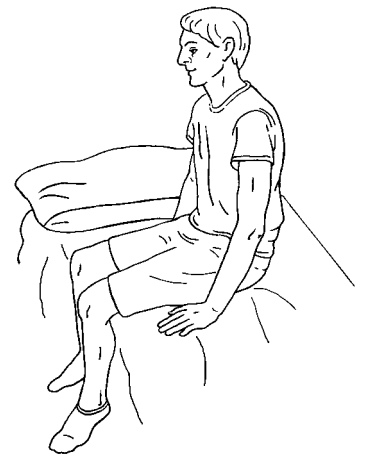
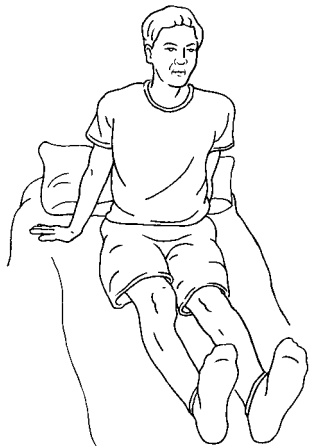
# Mobility After a Total Joint Replacement

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## Getting out of bed

*Follow these instructions to get out of bed:*

1. When getting out of bed, push yourself into a sitting position with your elbows first. Support yourself on your hands.
2. If possible, get out of your bed on the side of your operated leg. Move your operated leg toward the edge of the bed. You may use your non-operated leg to push on the bed if needed.
3. Pivot your buttocks on the bed, sliding your non-operated leg toward the side of the bed. Lower the foot of your operated leg to the floor.
4. Slide your non-operated leg over the side of the bed. Use your arms to steady yourself as you come to a sitting position.



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## Using a Walker

### Walking with a walker

1. Move walker forward about a step so the back legs of the walker line up with your toes.
2. Take a step forward into the walker with your operated leg. Do not step past the front of the walker.
3. Then take a step forward with your other leg.
4. Repeat steps.

Using stairs, your therapist will go over this after surgery and focus on your particular needs.

### Going up stairs

1. Have someone help by standing beside you or one step behind you until you are comfortable doing them on your own. Rest one hand on the handrail and the other hand on the hand of your helper while you take your steps.
2. Always take the first step up with the non-operated leg.
3. Follow with the operated leg.
4. Do one step at a time.

### Going down stairs

1. Have someone help by standing beside you or one step in front of your side opposite the rail until you are comfortable doing them on your own. Rest one hand on the handrail and the other hand on the hand of your helper while you take your steps.
2. Always take the first step down with the operated leg.
3. Follow with the non-operated leg.
4. Do one step at a time.

# Mobility After a Total Joint Replacement

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## Using a Walker

### Sitting and standing after a total hip replacement

*If you have had a total hip replacement, you must keep your knees shoulder-width apart until your hip precautions have been lifted. You should always check two things prior to sitting down:*

1. The height of the chair seat.
2. Does the chair have armrests?

It will be more difficult for you to get out of a low chair and/or a chair without armrests, so avoid these when possible. Often, you can raise a chair to an easier height by placing a firm pillow or seat cushion on the seat.

Avoid chairs with wheels unless the wheels can be firmly locked. Do not pull on the walker for leverage when standing. The walker may tip backward causing you to fall.

To sit down, you should back up with the walker until you feel the chair behind your legs.



1. As you reach back for the armrest with one hand, slide your operated leg forward.



2. Reach back with your second hand and slowly lower yourself into the chair. Continue to keep your operated leg out in front of you.



3. Use your arms to scoot yourself further back in the chair.



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*To stand up from the chair:*

1. Scoot your body to the edge of the seat.
2. Keep your leg out in front of you.
3. Use your arms to push yourself up from the chair.
4. Do not lean forward as you stand. This can cause you to be off balance.
5. Reach for your walker one hand at a time.

### **Sitting and standing after a total knee replacement**

You will follow the same instructions for sitting and standing with your walker as listed previously. You will be encouraged to bend your knee when sitting and standing instead of keeping it straight.

Follow the same instructions for sitting and standing from a toilet seat.

### **Reminders**

- If you have had a total hip replacement, be sure that you do not rotate your leg inward when you are completing hygiene after toileting.
- Use an elevated toilet seat.
- If there is a grab bar present, make sure you have one hand on the grab bar and one hand on your walker during your toilet transfers.



# Bathing

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## Getting Into and Out of a Tub Shower With a Bench/Chair

Make sure the bench is set in the tub. It should not move when you sit down and get up. Have all of your supplies close. Do not put anything where you need to lean forward so you can maintain your hip precautions.

## Using a Tub Bench in a Tub Shower Following a Total Hip Replacement

1. Stand with your back toward the bathtub. Be sure to have your operated leg out in front and have someone with you to hold the bench steady.
2. Lower yourself slowly onto the tub bench, sliding your operated foot forward as you sit. Avoid plopping down.
3. Lean your trunk back as someone helps you lift your operated leg over the edge of the tub. If you have posterior hip precautions, keep your leg straight and do not bring your knee up toward your face.
4. Slide back and make sure you are in a safe sitting position. Have someone lower your foot to the floor of the tub.
5. To get out of the tub, have someone lift your operated leg out of the tub. Lift your non-operated leg out of the tub and place your feet flat on the floor before you stand. If you have posterior hip precautions, keep your operated leg straight and do not bring your knee toward your face.



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## Getting Into and Out of a Shower With a Shower Chair

1. Stand with your back to the entrance of your shower with your walker in front of you.
2. Take a step backward into your shower with your non-operated leg first, while taking pressure off of your operated leg by pushing down through your walker with both hands.
3. Bring your operated leg into the shower and turn with your back to the shower chair. Do not twist. Lower yourself slowly onto the chair, sliding your operated foot forward as you sit. Avoid plopping down.
4. When exiting the shower, slowly stand from the shower chair using a grab bar (NOT towel rack), if accessible. Turn toward exit of shower.
5. Have someone place your walker at the shower entrance for you. Holding onto the walker with both hands, step out of the shower with your operated leg first, while pushing down through the walker with your hands.
6. Bring your non-operated leg out and regain balance before walking in the bathroom.

If you have had a total knee replacement, you can follow the same guidelines as listed above, but you do not have to worry about maintaining hip precautions. You will be encouraged to bend your knee instead of keeping your leg straight.



# Getting Into the Car

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## Getting Into and Out of a Car After a Total Joint Replacement

It is easiest to ride in a mid-size to large-size car or van. You can ride in the front or back seat. You may have to try both to see what works best for you. When riding in the front seat, it helps to move the seat all the way back and recline the back of the seat.

*For a total hip replacement:*

- Place a firm pillow or cushion on the seat to raise the height.
- Maintain your hip precautions.

*For a total knee replacement:*

- You may bend your knee to get in the car.

The following pictures show a person getting in the back seat of a car. Follow the same directions to enter the front seat of a car or van.

### 1. Before getting into a car

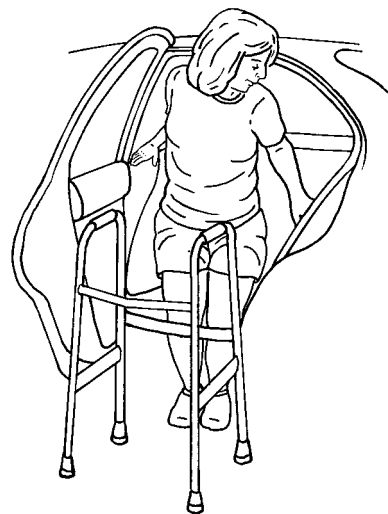
- In the front seat, move the seat back as far as it will go.
- In the back seat, move the front seat as far forward as it will go.
- Recline the seat back if possible.
- Place a firm pillow or cushion on the seat.



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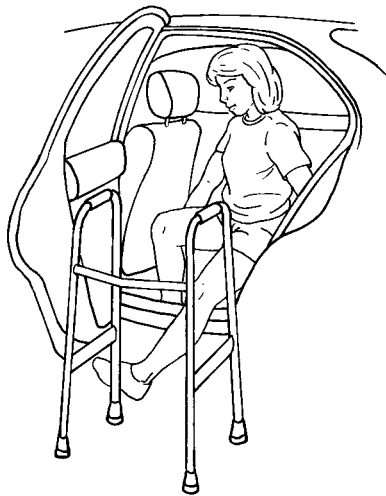
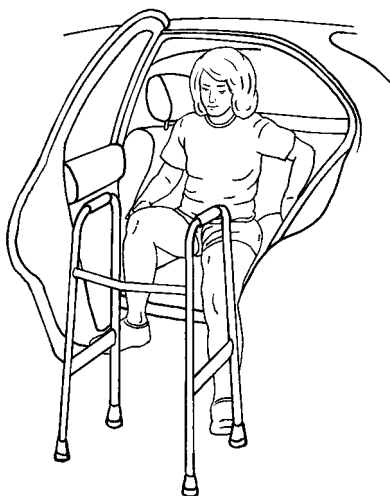
## 2. Sit down on the seat

- Stand with your back to the car.
- Keep your operated leg straight and the foot slightly forward for a total hip replacement.
- Feel the car touch the back of your other leg.
- Hold on to the side of the car with one hand and your walker with the other hand.
- Slowly lower yourself onto the car seat.



## 3. Bring your legs into the car

- Slide your bottom back into the seat.
- Lift your legs, one at a time, into the car.
- As you lift your legs, move your body into the car; do not twist.
- Someone may have to help lift your operated leg the first few times.



# Using a Cane

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When you are putting very little weight through your hands while walking with your walker, you are ready to start using a cane and should consult with your physical therapist. This typically takes about two to three weeks. **DO NOT** progress to the cane until you feel safe. Try it the first time with someone around, preferably your physical therapist.

## Cane height

Adjust cane so that the **top of cane** hits your wrist when you are standing with your arms down at your sides.

## Cane use

Cane should be placed in the hand **opposite** your operated leg.



## Walking With the Cane

Opposite hand and operated leg should work together.

- Move cane forward about a step.
- Take a step forward with your operated leg.
- Then step forward with your other leg.
- Repeat these steps.

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## Using a Cane on Stairs

### Going up stairs

- Have someone help by standing at your side or right behind you until you are comfortable doing them on your own.
- Rest cane on the floor while stepping onto the step with your non-operated leg.
- Lift your cane onto the step.
- Step up with your operated leg.
- Do one step at a time.



### Going down stairs

- Have someone help by standing at your side or directly in front of you until you are comfortable doing them on your own.
- Put your cane on the step below.
- Step down with your operated leg.
- Step down onto the same step with your non-operated leg.
- Do one step at a time until you reach the bottom of the stairs.



# Equipment

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There is helpful equipment available during your recovery. You will most likely require the use of at least some of them. The therapists at the hospital will help you decide which will be helpful for you. Not all of these devices are covered by insurance. You can borrow some of these items from a relative or friend who no longer use them.

## Walking Aids

You will need to use walking aids for a while after surgery. The length of time required to use a walking aid varies from person to person. A physical therapist can help you determine which aid is best for your situation and when to progress to a different one. These aids:

- Provide support for the leg that had the joint replaced
- Help provide balance
- Steady your gait



Walker



Crutches



Cane

## Elevated Toilet Seat

Having an elevated toilet seat makes it easier for you to get on and off the toilet. It allows you to maintain your hip precautions if you had a total hip replacement. Your therapist can help determine if one would be beneficial for you and which type would work best with your home situation.



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## **Tub Bench or Shower Chair**

Follow your surgeon's directions about showering and bathing. Permission to shower does not include taking a bath. Submerging your incision in a bathtub, hot tub, pool, lake or ocean is generally not allowed for a minimum of four weeks after surgery and until your incision is completely healed. A bench or chair may be helpful, once you are allowed to begin showering after surgery. It can help if you tire easily or are unable to stand safely in the shower. Make sure the chair or bench is positioned properly and is stable before using. Your therapist will show you how and will recommend the correct type of seat for your situation.

## **Reacher**

The reacher can be used to pick things up you have dropped. It can assist you with putting on underwear and pants. Pull the trigger back to close the "tooth" and grab the article.



## **Dressing Stick**

The dressing stick can help you dress yourself. The hook end can be used to reach articles of clothing. The combination end can be used to get pants on and off, as well as help you remove socks or stockings.



# Equipment

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## **Sock Aid**

Using the sock aid may be helpful until you are able to reach your feet. Pull the sock around the outside of the plastic end. Lower it to your foot while holding onto the strap. Place your foot into the opening of the sock and pull the strap until the sock slides all the way on. Once the sock is around your foot, pull the sock aid out the top of the sock.



## **Long-Handled Shoehorn**

Use this just like you would any shoehorn. The only difference is the extended handle to decrease the need to reach completely to your foot. Place it inside the back of your shoe and slide your heel into the shoe.



## **Long-Handled Sponge**

This helps you to bathe yourself by allowing you to reach your legs and back.



# Returning to Activities

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The goal of total joint replacement surgery is to reduce pain and return you to a more active lifestyle. You must now select activities, remembering a balance between enjoying your new joint and wearing it out. We want you to have an active lifestyle, and we want this joint replacement to last a long time.

We encourage low-impact sports such as walking, bicycling and doubles tennis. Anything that includes running, jumping, cutting and/or pivoting are high-impact activities. For example, singles tennis, basketball and football are high-impact activities. There are concerns that high-impact activities could be detrimental to your new joint and lead to premature failure. Discuss with your surgeon which activities are appropriate for you, and when is the right time to return to these activities.

## Returning to a Normal Walking Pattern

Getting back to walking normally after surgery will take some time and concentration on your part. Most people with hip and knee arthritis have often changed the way they walk or avoid putting all of their weight on that leg in order to minimize their pain. This occurs slowly over time, and you may not even realize that you are favoring that leg. Your therapist will help you focus on heel-to-toe walking as you progress through using a walker, then a cane and then off all assist devices.

## Returning to Work

This varies with each person based on what type of work you do. People who have active, physically demanding jobs will be off work longer than those with less active jobs. It is best to discuss this with your surgeon before your surgery so you can plan your time off with your workplace.

### Please Note

The next page discusses resuming intimacy following total joint replacement surgery. The information includes drawings to illustrate the safest ways for you to be intimate with your partner.

If you prefer not to review this information, please skip to the next section.

# Resuming Intimacy

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Being intimate with your partner following joint replacement surgery is a question nearly everyone has, but few ask. Within one to two months after surgery, most people are able to resume sexual activity. As time passes and your recovery continues, sexual activity should become more comfortable.



Face to face works after hip or knee replacement.



Sitting in a chair position is safe for man or woman after hip or knee replacement.



Woman lying and man kneeling/standing works for a woman after hip or knee replacement.



Side-lying position works for man after knee replacement or woman with either knee or hip replacement.

## REMEMBER

- Do not cross your legs.
- Do not twist your operated leg.
- Do not bend your hip more than 90 degrees for total hip replacement.