

### **Hip Arthroscopy Post-Op Instructions**

#### **Wound Care:**

- Maintain your operative dressing. It is normal for the hip to bleed and swell following surgery – if blood soaks onto the bandage, do not become alarmed – reinforce with additional dressing.
- Please maintain steri-strips in place.
- Remove surgical dressing on the second post-operative day and apply waterproof Band-Aids over incisions and change daily. Physical therapy may change your dressing prior to the second post-operative day.
- Keep surgical incisions clean and dry.
- You may shower after removing the first dressing by placing waterproof Band-Aids over incision areas.
- Do NOT immerse the operative leg until 14 days after surgery

#### **Icing:**

- Icing is very important for the first 5-7 days after surgery.
- Use an ice machine continuously or ice packs every 2 hours for 20 minutes daily until your first postoperative visit.
- Do not place the ice bag or cooling device directly on the skin. Care must be taken to avoid frostbite to the skin.

#### **Activity:**

- Walk with crutches at all times. You can only put 20 pounds of weight on your operative leg until instructed otherwise by your physical therapist.
- Do not flex your hip past 90 degrees. Avoid sitting with your hip at 90 degrees for 3 weeks.
- Start physical therapy within 1-3 days. Please take the attached physical therapy protocol with you to your first physical therapy appointment. If one is not attached, please contact Dr. Glomset at [ortho@jtglomsetmd.com](mailto:ortho@jtglomsetmd.com)
- Driving is not encouraged until you're off of crutches and only if you have stopped taking pain medication and feel safe to drive.

#### **Medications:**

- Do not drive a car or operate heavy machinery while taking narcotics
- You have been prescribed a narcotic (either Norco or Percocet) for pain control. This is to be used for a short time period.
  - o Take 1-2 tablets every 4-6 hours as needed
  - o Max of 12 pills per day
  - o Plan on using 2-5 days, depending on the level of pain
  - o Do not take additional Tylenol (acetaminophen) while taking Percocet.
- Common side effects include nausea, drowsiness and constipation. Take medication with food to decrease side effects.
- Naproxen (500mg) should be taken twice daily for 3 weeks to decrease the incidence of heterotopic ossification.

- You should take an aspirin (81mg) twice daily for 2 weeks. This may lower the risk of a blood clot developing after surgery. Should severe calf pain occur or significant swelling of the calf or ankle, please contact us.
- You may not drive or operate heavy equipment while on narcotics. It is important not to drink while taking narcotic medication.

**Diet:**

- If you have a history of gastric ulcers or reflux or if you start having an upset stomach with medications, please add an over the counter antacid such as nexium or zantac.
- Resume normal diet as tolerated this evening. We have no specific diet restrictions after surgery, but extensive use of narcotics can lead to constipation. High fiber diets, lots of fluids and muscle activity can prevent this occurrence.
- The anesthetic drugs used during surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids. The only solids should be dry crackers or toast. If the nausea and vomiting become severe or you show signs of being dehydrated (lack of urination), please call.

**Emergencies:**

- Contact Dr. Glomset or his nurse at 405-885-8195 or by email [ortho@jtglomsetmd.com](mailto:ortho@jtglomsetmd.com) if any of the following are present:
  - o Difficulty breathing
  - o Painful swelling or numbness
  - o Unrelenting pain
  - o Fever (over 101° – it is normal to have a low grade fever for the first day or two following surgery) or chills
  - o Redness around incisions
  - o Color of lower extremity
  - o Continuous drainage or bleeding from incision (a small amount of drainage is expected)
  - o Excessive nausea/vomiting

\*\*If you have an emergency after office hours or on weekends, call 405-272-8400 and you will be connected to our page service – they will contact Dr. Glomset or one of his partners if he is unavailable. Do NOT call the hospital or surgery center.

\*\*If you have an emergency that requires immediate attention, proceed to the nearest emergency room or call 911.