



Hip Arthroscopy Post-Operative Instructions

PRESCRIPTION MEDICATIONS

Aspirin:

- This medication is to help prevent blood clots after surgery.
- Take one 325 mg tablet twice per day with food for 30 days.

Colace (Docusate Sodium):

- This medication is to help with constipation, a common side effect after taking narcotic pain medications (like Norco) and general anesthesia.
- Take 1 pill in the morning and 1 in the evening to prevent constipation
- It is normal to take several days to make a bowel movement after surgery
- Drink plenty of clear liquids as the anesthesia can cause dehydration/constipation as well.

Hydrocodone/Acetaminophen (Norco) or Percocet:

- This is a narcotic medication for pain.
- This medication is to be taken **AS NEEDED**.
- Plan to stay on a scheduled dose of 1-2 tablets every 4-6 hrs for the first 2-3 days.
 - After 2-3 days you should be able to space out or discontinue the medication and transition to Acetaminophen (Tylenol).
 - DO NOT exceed 4,000 mg of Acetaminophen in a 24 hour period.
- Do not drive, drink alcohol, or take Acetaminophen (Tylenol) WHILE taking this medication.

Indomethacin (Indocin):

- This is an important medication to help prevent bony overgrowth (called heterotopic ossification) that can be a potential side effect after surgery and to help with inflammation.
- Take 75 mg tablet once per day in the evening with food as prescribed.
 - If you are unable to tolerate this medication, please let the office know so we can put you on an alternative medication.
- DO NOT take ibuprofen, Motrin, Advil, Aleve, Naproxen, Naprosyn, Celebrex, Meloxicam or other anti-inflammatories while taking this medication.
 - Once you have completed the course of this medication, you can take other anti-inflammatories as needed for pain.

WOUND CARE

- Leave the bulky surgical bandage on and DO NOT shower for 72 hours.
- After 72 hours, remove bandages and gauze,
 - You may shower at this point.

- Cover incision sites with waterproof bandage prior to getting into the shower.
 - Should the incisions accidentally get wet, pat them dry with a clean towel.
DO NOT SCRUB.
- It is normal to see a lot of blood-tinged soaked fluid on the bandages.
 - This may appear to be a pinkish-yellow fluid and is normal.
- In between showers, you can leave the incisions open to air
 - DO NOT APPLY LOTIONS OR OINTMENTS TO THE INCISION SITES
- Your stitches will be removed at your first post op visit.
 - You may shower the day after suture removal without waterproof bandages over the incision sites.
 - DO NOT scrub the incision sites- you may let soap and water run down the incisions and pat dry with a towel once you're done.
- DO NOT soak in any pool/bath water until 4 weeks after surgery.

PHYSICAL THERAPY

- Physical therapy at TOS
 - Will start 7 days post-op unless otherwise instructed by Dr. Gupta. Occasionally he has you wait until after your first post-op appointment.
 - On the first visit to your therapist you should expect to:
 - Be taught proper weight bearing technique
 - Proper utilization of your crutches
 - Passive range of motion exercises
 - Isometric exercises to be done at home
 - Stationary bike (upright ONLY- NOT recumbent)
- Please bring your prescription for therapy and physical therapy protocol (provided on surgery day and also on the website) to your first appointment.

WEIGHT BEARING

- If you received REGIONAL anesthesia (a "block" to the leg), DO NOT attempt to weight bear for the first 24-36 hours.
 - After the feeling has returned to my leg, you may be flat-foot weight bearing.
- Walk with your foot flat to the ground with crutches, and "mimic" a normal gait (walking pattern) and apply only 20 lbs of weight-bearing on the leg with the brace in place.
- Once you are 3-4 weeks out from surgery, you may begin to progress your weight bearing slowly as directed by Dr. Gupta to full weight bearing around 4 weeks, as long as your pain is not increasing while walking.
 - Getting off of the crutches takes all patients a different amount of time (General time period is 4-6 weeks)
 - Take your time and don't try to rush yourself to get off of the crutches.

BRACE

- You will get a brace on surgery day.
- Over the first few days, concentrate on icing the hip and wear the brace when you are up and about.
- The brace should be worn until you are off the crutches (Generally at about 4 weeks)
- You do NOT need to wear the brace:
 - While sleeping
 - On the CPM machine (if applicable)
 - Laying on your stomach

- Using the upright bike
- Showering and using the bathroom
- It is mainly to be worn when you are walking
- The lateral (outside) post on the brace should be positioned over the lateral aspect (outside) of the leg and the top should sit above your pelvis
- The Velcro on the distal (lowest) strap can wear out quickly
 - You can call TOS and ask for Chandler if this occurs.
- The point of the brace is to prevent hyperflexion and abduction (bringing the leg too close to the chest or bringing the leg too far away from the body).

NIGHT TIME PADDING:

- Wear the padding at night time each night until first post-op appointment.
 - The point is to make your toes point straight up (no rotation).
- If you cannot sleep, alternatives are :
 - Take your nonoperative leg out of the boot/padding .
 - Sleep in the brace.
 - Take the post out of the middle and sleep with just the feet strapped together.

ICING

- Ice the area of surgery as much as you can for the first 72 hours. After that, ice the area five times/day for at least 30 min at a time until your first post-op appointment. Make sure you keep a barrier between the ice and the skin. Do not apply directly on skin.

CONTINUOUS PASSIVE MOTION MACHINE

- Occasionally Dr. Gupta orders this post-op. If so:
 - Use the machine for a total of 4 hours per day for the first two weeks after surgery.
 - You can split up the time into increments if you get sore or tired.
 - The initial settings of the machine should be at 30 degrees extension and 70 degrees of flexion.
 - You may increase by 7-8 degrees per day as tolerated.
 - Example:
 - Day 1: 30 degrees of extension and 70 degrees of flexion.
 - Day 2: 22 degrees of extension and 78 degrees of flexion.
 - Day 3: 14 degrees of extension and 86 degrees of flexion.

These machines are indicated for use by Dr. Gupta. Dr. Gupta's office does not assume responsibility if the equipment is not covered by your insurance. Questions about equipment use and insurance coverage should be directed to the company that provides the equipment. These companies should outline a payment plan for you in the event that your insurance does not cover the equipment. Medicare and Medicaid DO NOT cover the vascutherm (ice) machine. If you carry this insurance the ice machine will NOT be ordered for you

GENERAL ACTIVITY LEVELS

- It is beneficial to change positions often after hip arthroscopy.
- Alternate sitting, reclining, and lying down as you can tolerate
 - We recommend you get moving once every 1-2 hours to prevent stiffness.
 - Do not stay in a seated position for longer than 30 -45 minutes

- If you need a work note to get up from your desk, please let us know and we can send it in to your employer.
- Spend 30min-1hr hour per day on your stomach (you can take the brace off for this) after your first post-op appointment

FOLLOW UP

- You will need to follow up in clinic with Dr. Gupta in 10 days.
- A new physical therapy prescription will be given to you at that time.
- Please call scheduling to make an appointment (contact information below).

WHEN SHOULD YOU CONTACT THE OFFICE?

- If you have a fever >101.0 degrees F.
 - A low grade temperature (even up to 100 degrees) is expected after surgery, but let us know if it gets this high
- If you develop chills or sweats.
- If you have pus, significant pain, or redness surrounding the incision sites.
- If you are unable to urinate >1-2 days after surgery.

IMPORTANT CONTACT INFORMATION

Dr. Gupta's Office: (419) 578-7200

Dr. Gupta's Nurse: Lisa Downing