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POST-OPERATIVE EDUCATION: HIP FRACTURE REPAIR

WEIGHT BEARING & BRACE: This is dependent on the procedure performed:

Femur Intramedullary Nail: Advance weight bearing as tolerated. You will use crutches or a walker as you regain your strength. We DO want you to be up and around at home as much as possible after surgery.

Hemiarthroplasty: A special pillow should be worn between your legs for the first 2 days while in bed. Remove this pillow to get out of bed. You will use crutches or a walker as you regain your strength. Advance weight bearing as tolerated. We DO want you to be up and around at home as much as possible after surgery.

Percutaneous Pinning: You will use crutches or a walker following surgery. Your weight bearing is dependent on the nature of the fracture (displaced versus stress). Please refer to instructions given in the hospital or call your surgeon for clarification.

MOVING YOUR HIP:

It is OK for you to start moving your hip right away. You should start in formal physical therapy within a few days of your surgery.

LEG EXERCISES:

You will learn exercises in Physical Therapy, which should start within 3-5 days of surgery. If you do not have an appointment, please call your therapist or our office at (480) 964-2908. Your surgeon may choose to have you hold therapy depending on the procedure performed.

ICE:

Please note that with the dressings placed during surgery, you may notice decreased benefit from the ice. Use as needed and if you notice benefit. Ice is most helpful in the first 3 days after surgery, but can help up to 2 weeks after surgery. We do not recommend that you use heat, as this can increase swelling.

If you chose to purchase a commercial ice machine, please use it according to manufacturer's recommendations.

If you chose not to purchase an ice machine, you may use a commercially available ice bag or fill a large plastic bag with ice and water. (Do not place a plastic bag directly on your skin, rather place a towel on your hip in between your skin and the ice bag.) You can ice your hip 20 minutes on and 20 minutes off throughout the day. Do not ice an area longer than 30 minutes at a time, as this can cause frost bite.

BANDAGES:

If an *Aquacel* bandage was placed on your hip is intended to remain in place up to 7-14 days. If the dressing becomes compromised, it is OK to remove it as early as 3 days following the surgery. If a *Prineo* mesh dressing was placed, it will be removed in clinic at your post-operative visit. It is OK to get both dressings (or the incision) wet in the shower, but it is very important not to soak underwater (no bath, pool, hot tub etc...) for 3 weeks. Simply let the soapy water run over the dressing and gently pat dry with a towel. Do not place any lotion or other ointment around your incisions.

MEDICATIONS:

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Required Medications:

Blood Thinner: You will be prescribed a blood thinner (Ecotrin – stomach-protective aspirin, Lovenox – by injection, or Eliquis) to be taken for prevention of blood clots. These will be used for 2-6 weeks.

Additional medications:

Narcotic pain medicine (such as Percocet – oxycodone or Norco – hydrocodone): Take this AS NEEDED only. Start with Percocet (stronger) if given a prescription for multiple narcotics. Transition to Norco (less potent) as your pain improves. You may stop narcotics whenever you can tolerate the pain. Do not take additional Tylenol (also called acetaminophen) with these medicines, as they already have Tylenol in them. You may SUBSTITUTE Tylenol for a narcotic pill if you choose to. Be certain that you do not exceed the maximum Tylenol dose on the Tylenol bottle.

Stool softener: Pain medicines often cause constipation. It is best to take this medicine when you start taking narcotics and before you have a problem.

Zofran (ondansetron): You may take this medication if you are having nausea or vomiting.

Robaxin (methocarbamol): This muscle relaxer may help with spasms experienced commonly after hip surgery.

You may also use **SCDs** (sequential compression devices) following surgery. These squeeze your legs, and are further protection against blood clots. Compression stockings should be worn for 3 days, with short breaks.

FOLLOW-UP APPOINTMENTS:

You should have a **follow-up appointment** with your surgeon in about 2 weeks. Call (480) 964-2908 right away if you do not have an appointment already scheduled. We will check your incisions and remove any sutures at the 2-week visit. We will also answer any specific questions you may have about your surgery. You should start Physical Therapy as directed (commonly approximately 2 weeks following surgery), unless other instructions were given.

CALL OUR OFFICE at (480) 964-2908 with any urgent or emergent questions or concerns that you may have, or if you develop swelling in your leg with calf pain, swelling that will not go away when you elevate your leg, a temperature above 101.4, or drainage from your incisions.

If you experience high fever (above 102.5), chest pain, difficulty breathing, fainting: go to an **Emergency Department** close to your house.