



Information for  
patients and  
carers

## Physiotherapy advice and exercises following Total Hip Replacement

## When will I be discharged?

There are several targets you must achieve before the therapy team will consider you safe for discharge:

- You must be independently mobile using elbow crutches or other walking aid, such as a wheeled Zimmer frame
- You must be able to complete transfers independently, such as getting on and off the bed and in and out of a chair
- If required, you must be safe ascending and descending stairs
- Your pain should be well controlled so that you are able to complete day to day functional tasks safely
- You must have had a post-operative wound check and x-ray completed and reviewed by the medical team
- You must be medically fit for discharge
- If required, you must have all relevant occupational therapy equipment in place or on delivery ready for you returning home safely

## Initially post surgery

You will have a waterproof dressing that will remain on until you have your staples removed at 2 weeks. This appointment will be organised through your GP practice.

You may have pain in the operated leg after your surgery. You will have regular pain relief prescribed. If you feel your pain relief is inadequate, then you must make the ward nurses aware. This is important to not only make you more comfortable, but it will also help with your ward Physiotherapy sessions that may include mobility, transfers, exercises and stairs practice.

## Hip precautions

There are no restrictions when it comes to movement of your hip and general leg after your operation. However, we advise that you do not force any movements into extreme positions or if they are causing severe pain. For example, we would advise that you take care when putting your shoes and socks on or tying your laces.

In occasional circumstances, your surgeon may decide to limit some movement in your hip, due to individual factors relating to your surgery, This does not mean there is anything wrong, it may just be the surgeon's clinical preference if they feel your new joint needs some added protection over the first few weeks. This will be clearly explained, should this apply to you.

There are some additional precautions we advise:

Please **AVOID** lifting your leg up with your arms when getting in and out of bed.

Please **AVOID** twisting and pivoting on your operated leg.

We **DO NOT** recommend you get into the bath until you have been reviewed at your 4 week clinic appointment.

## Deep Vein Thrombosis (DVT)

If you are experiencing chest pain or increased breathlessness alongside excessive throbbing or cramping in the affected leg, extreme swelling, redness, warmth and it is painful to touch, then please contact emergency services or present to A&E or Urgent Care department in your local area.

### Follow up

Upon discharge from the ward, please make sure you have your follow up appointment. This should be scheduled for approximately 4 weeks after your surgery date. It is a face-to-face appointment where you will be reviewed by an Enhanced Recovery Nurse and a Specialist Physiotherapist. If clinically indicated, further therapy appointments can be allocated to guide your recovery and rehabilitation.

### Walking

Once home, we expect you to continue walking daily and complete the daily exercises provided to you on the ward and in this booklet. Your goal should be to increase your walking distance each day as tolerated.

You may discard your crutches when you feel safe and confident to do so. If you are not ready, then this can be reviewed with your Physiotherapist at your 4 week follow up appointment. It is acceptable to walk outside immediately following discharge using your elbow crutches.

### Sleeping

Sleep however you feel comfortable, this maybe on your front, side or back. You are allowed to sleep on the side of your operated hip, as long as this is comfortable and not causing excessive pain.

### Driving/sitting in the car

Following your discharge from hospital you may travel as a passenger in a car. Most return to driving at 6 weeks after surgery, but this timescale varies between patients and is dependent on you being able to function the car and perform an emergency stop safely. It is your responsibility to check your insurance company will cover you before driving.

### Exercises

The Physiotherapists recommend carrying out your exercises regularly throughout the day. Each exercise should be repeated little and often initially and increased as your muscles strengthen up to 10 times. We recommend you complete these daily exercises until your 4 week follow up appointment.

As previously mentioned, it is imperative that you keep up with your regular prescribed pain relief medication, so you can carry out your exercises effectively. If you are experiencing severe pain whilst doing the exercises, we advise that you speak to your GP regarding a review of your medications. Also, it would be advised that you express your exercise concerns to your Physiotherapist, either at your follow up appointment or over the phone using our contact details found at the end of this booklet.

### **Hip Flexion.**

Stand straight whilst holding onto a solid support (such as a chair or a wall). Bend and lift your knee on the operated leg – do not force the movement. Then slowly lower the leg until both feet are firmly on the floor.

Aim to complete up to 10 times, every hour.



### **Hip Abduction.**

Stand straight whilst holding onto a solid support (such as a chair or a wall). With a straight operated leg, take it out to the side away from your body, and then slowly bring it back to your un-operated leg until both feet are firmly on the floor.

Aim to complete up to 10 times, every hour.



### **Hip Extension.**

Stand straight whilst holding onto a solid support (such as a chair or a wall). Keep your operated leg straight and take it out behind you away from your body, then slowly bring it back to your un-operated leg until both feet are firmly on the floor.

Aim to complete up to 10 times, every hour.



## Stairs With Crutches

### Walking Up



1. Stand close to the stairs.
  2. Hold onto the handrail with one hand and the crutches with the other hand.
  3. First take a step up with your un-operated leg.
  4. Then take a step up with your operated leg.
  5. Then bring up the crutch
- Always go one step at a time.**

### Walking Down



1. Stand close to the stairs.
  2. Hold onto the handrail with one hand and the crutch with the other hand.
  3. First put your crutch one step down.
  4. Then take a step with your operated leg.
  5. Then step your un-operated leg next to your operated leg.
- Always go one step at a time.**

## Contact details

Should you require further advice or information please contact: Orthopaedic Physiotherapy Dept. (Chorley Hospital): 01257 245754 Leyland Ward (Chorley Hospital): 01257 245746

## Sources of further information

[www.lancsteachinghospitals.nhs.uk](http://www.lancsteachinghospitals.nhs.uk)

[www.nhs.uk](http://www.nhs.uk)

[www.accessable.co.uk](http://www.accessable.co.uk)

[www.patient.co.uk](http://www.patient.co.uk)

All our patient information leaflets are available on our website for patients to access and download:

[www.lancsteachinghospitals.nhs.uk/patient-information-leaflets](http://www.lancsteachinghospitals.nhs.uk/patient-information-leaflets)

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Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

### Gujarati:

આ માહિતીને સમજવામાં સહાયતા જોઈતી હોય તો કૃપા કરીને પૂછો. આ માહિતી મોટા છપાણામાં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે.

### Romanian:

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi.”

### Polish:

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

### Punjabi:

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੱਲੋਂ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਿੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੱਲੋਂ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

### Urdu:

دو سر ی زبانوں او ریڑی اگر آپ کو ہی معلومات سمجھنے کے لئے مدد کی ضرورت ہے تو ییچھیا یں ییہ ابی دست ہو یسکت ہے برا ے مہر ییان پو ے یچھہی۔ معلومات

### Arabic:

مطبوعه بأحرف كبيرة و بلغات إذا كنت تريد مساعدة في فهم هذه لمعلومات يُرجى أن تطلب أخرى يمكن تو فسير هذه المعلومات

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**Division:** Diagnostic & Clinical Services (DCS)

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