

Total Hip Arthroplasty Rehabilitation Protocol

Total hip arthroplasty (THA) is an elective operative procedure to treat an arthritic hip. This procedure replaces your damaged hip joint with an artificial hip implant. Hip implants consist of a smooth ball on a stem that fits into your thigh bone (the femoral stem), and a metal socket with a smooth liner that is attached to your pelvis. Once in place, the artificial ball and socket function like your natural hip. There are several surgical approaches to hip replacement surgery, and each is effective. Your surgeon will determine which surgical approach is best for you. The goals of this surgery are to decrease pain, maximize function of ADLs, reduce functional impairments and maximize quality of life. This protocol applies to the routine primary total hip arthroplasty procedure. For a revision total hip arthroplasty additional limitations and/or precautions may apply.

Precautions

DO NOT (For the first 6 weeks):

- Sit in low soft furniture; your hip will flex too much
- Do not drive until cleared by physician. Must be walking with cane and off narcotics
- Pivot on your operated leg
- Do not sit over ½ hour. You will become too fatigued
- Do not take chances on uneven or wet ground
- Do not squat
- Do not cross legs or ankles
- Be careful when picking up objects and bending at the waist
- Do not go on prolonged car rides. If you must, stop frequently and stretch

DO (For the first 6 weeks):

- Sleep on your back for 6 weeks with a pillow between your legs
- Use a walker or cane bearing the amount of weight as instructed
- Use a raised toilet seat, shower seat and grabber
- Sit on stool to garden and use a long handled tool
- Keep housework light. No heavy lifting over 50 pounds.
- Take frequent short walks
- Get adequate rest
- Continue your home exercise program as directed by your physical therapist
- Maintain a balanced diet to avoid weight gain
- May use stool softener as directed if constipated from narcotics
- If you travel by air, you will need to tell airport security that you have had a hip replacement and may set off metal detectors. Please call our office to pick up a card to carry in your wallet stating you have had a hip replacement.

Permanent Precautions

- Avoid deep squatting
- If carrying a purse or briefcase, carry on the side of the replacement
- If lifting groceries, etc., carry on the side of the replacement
- Use caution when bending at the waist to pick up objects
- Do not play sports that involve repetitive jumping and acceleration/deceleration. Walking, swimming, and bicycle riding are better.
- Extended running is not advised because of the stress on the implant-bone interface

Return to Activities:

Return to full activities six months on average per Dr. Collard, with physical therapist's approval. May return to leisure activities such as swimming, bowling, golf, tennis, horseback riding, and bicycling at 3-6 months. Do not recommend high agility sports – jogging, running, jumping, aggressive snow skiing, water skiing, basketball, baseball, soccer or football.