



Total Hip Replacement Guidelines and Home Exercise Program Sumon Nandi, MD

While in the Hospital

Begin the following exercises the night of surgery. Do all exercises 5 - 10 times, every hour while you are awake

1. Deep breathing using the incentive spirometer
2. Move ankles up and down.
3. Tighten knee muscles by pushing your knees down into the bed HOLD 1-2-3-4-5 and RELAX.
4. Tighten buttocks muscles. HOLD 1-2-3-4-5 and RELAX.

The day after surgery and until your discharge, try to sit up in the bed side chair for meals with the assistance of the unit staff.

SPECIAL CONSIDERATIONS:

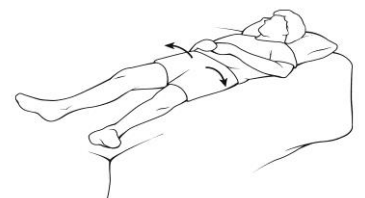
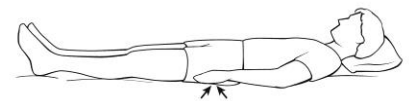
- Do not lift your leg straight off the bed.
- Lie flat on your back for 30 minutes 3x/day.
- To minimize swelling, stiffness and decrease pain:
 - Use ***cold*** as needed but ***not heat***. Ice 20 minutes at a time. Change the ice location frequently. Ice after walking, when pain is present, or after you have completed your exercises.
 - Elevate your operated leg throughout the day.
 - Limit sitting to 60 minutes at one time. Keep your hip moving regularly while sitting. Sit with knees bent and pointing straight ahead with feet flat on floor.

At Home

Complete the following exercises 10 repetitions, 3 times a day

Bed Exercises-Lying on Back

1. **Ankle Pumps** - Pump ankles back and forth.
2. **Quad Set** -Tighten muscle on the front of your thigh by pushing your knee down into the bed, hold for 5 seconds.
3. **Glut Set** - Squeeze your buttocks together, hold for 5 seconds.
4. **Heel Slides** - Bend your knee by sliding your heel on the bed towards your buttocks. *Keep knees apart.*
5. **Hip Abduction and Adduction** - Slide your affected leg out to the side and back to the center, keeping your knee straight.
6. **Bridging** - Bend your un-operated leg so that your foot is flat on the bed, push your foot into the mattress and lift your buttocks off the bed, *keeping knees apart.*
7. **Hip Rotation** – *With legs apart*, roll both of your legs out to the side and then back to neutral, keeping your knees straight.



Sitting Exercises

8. **Hip Flexion** – *With knees apart*, place your hands under your thigh and gently lift your leg up and down. As your strength improves, do this exercise without using your hands. (Figure 8)
9. **Knee Extension** - Lift your lower leg off the floor by straightening your knee, hold for 5 seconds.(Figure 9)
10. **Hip Rotation** - With both feet flat on the floor, roll your knees out to the side and then back to the center *keeping knees apart at all times*. (Figure 10)
11. **Abduction Isometrics** - Place your hands on the outer aspects of your thighs, push thighs into hands creating muscle tension without motion, hold for 5 seconds. Keep your knees pointing straight ahead with feet flat on floor. (Figure 11)
12. **Adduction Isometrics** – *With knees apart*, place your hands on the inner aspects of your thighs, push thighs into hands creating muscle tension without motion, hold for 5 seconds. Keep your feet flat on floor. (Figure 12)

Figure 8



Figure 9



Figure 10



Figure 11



Figure 12



Standing Exercises - Use solid surface for support with all standing exercises.

13. **Toe Raises** - Lift heels up and down slowly. (Figure 13)
14. **Hip Flexion** – *With knees apart*, lift operative leg off floor, bringing the knee as high as you can, and hold for 5 seconds. (Figure 14)
15. **Hip Extension** - Keep your knee and trunk straight; bring your leg behind you. (Figure 15)
16. **Hip Abduction** - Keep your knee straight and bring your leg straight out to the side, hold for 5 seconds. (Figure 16)

Figure 13



Figure 14



Figure 15



Figure 16



ACCEPTABLE HIP MOVEMENTS:

- 1. Keep knees apart when bending over or lifting knee up.**
- 2. When bending over to pick something up off the floor, stand on the nonoperative leg and bring the operative leg back.**
- 3. Do not twist or pivot on operative leg.**
- 4. No extreme yoga positions.**

Walking: Use two crutches/walker for ***EVERY*** step. No single leg stance. Gradually increase your walking daily. Start by walking daily 5 - 10 minutes 3 or 4 times a day. Avoid hills, steep ramps, and uneven surfaces until evaluated by your home P.T. Your goal by 6 weeks is to be walking each day 20 – 30 minutes 1 or 2 times a day. Maintain weight bearing as tolerated on your operated leg. Use 2 crutches/walker for 4 weeks, then you may wean to single crutch/cane during the 5th week and ultimately no assistive aids by the 6th week as deemed safe by your PT. Do not perform a one-legged stance on your operative leg (do not stand like a flamingo on the leg that was operated on).

Stairs: Crutches follow you up and lead you down. Be sure crutches are under your arms and firmly placed on stairs. **UP:** Good leg, Operated leg, crutches.
DOWN: Crutches, Operated leg, Un-operated leg.

Sleeping Positions: Sleep on back, stomach, or on un-operated side with pillow between knees to roll to your side or stomach.

Bathing: No tub baths. May sit on shower chair or stand and shower briefly. Use crutches/walker to get in and out of shower. You may shower as directed on your nursing discharge instructions.

Sexual Relations: Resume according to your comfort. Avoid extremes of motion.

Swimming: No pool swimming until your incision is inspected and cleared by MD.

Driving: You may ride as a passenger now. Do not drive until cleared by MD at 6 week follow-up visit. To get into the car: use front passenger seat with seat pushed back as far as possible, scoot yourself back in the seat, use your hands to assist your legs into the car, *keeping knees apart*.

Stationary Bike: No stationary bike until 6 week follow-up visit with M.D.