

# Dr. Volk's Post-Operative Instructions

## Arthroscopic Hip Surgery

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**CALL 911 AND/OR GO TO NEAREST HOSPITAL IF YOU ARE HAVING CHEST PAIN OR TROUBLE BREATHING**

**Your procedure was R/L Hip Arthroscopic:**

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### **WOUND CARE:**

- To prevent infection, please leave your surgical dressing in place for 2-3 days. If you must shower beforehand, you may remove the bandage and cover your wounds with a waterproof band-aid or cover the surgical bandage with a plastic bag and tape to make a seal. Make every attempt to keep your wounds clean and dry.
  - After bathing, remove the waterproof bandage, dab the wounds with clean/dry gauze if needed, and apply a regular band-aid or fresh gauze/tape. Do not apply any ointment/creams/salves to surgical site.
- You may shower without covering the wounds after one week, provided your wound has crusted/sealed.
  - Do not scrub or soak the wounds. Simply allow the soapy water to run over them.
- Do not swim or soak wounds until fully healed (usually 2-3 weeks after surgery).

### **ICE:**

- Use crushed ice (or frozen peas/corn) on your surgical site on a consistent basis for 1-2 weeks. This will help with swelling and pain. Attempt to ice your knee at least 3-4 times/day for at the first 3-5 days after surgery.
  - Wrap the ice pack to your knee with an elastic bandage to provide compression. Always have a thin layer (thin towel, washcloth, etc.) between your skin and the ice pack. Avoid icing for more than 20-30 min at a time to prevent skin damage.
- You may also try a homemade ice pack (<https://www.wikihow.com/Make-a-Homemade-Ice-Pack>)

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### **CRUTCHES/BRACE:**

- Unless Dr. Volk has told you otherwise, you may bear full weight on your operative leg with use of crutches for assistance.
- When you feel comfortable and steady walking on both feet, you may gradually discontinue your crutches. Dr. Volk recommends you begin by using 1 crutch in the hand opposite your surgical side. For example: Use the crutch in your right arm if you had surgery on your left knee.
- Whenever you are not walking or sleeping, you should work on range of motion (ROM) and your home exercise program (below).
- If you were given a hip brace (not all patients), please wear it whenever you are not sedentary to help stabilize your hip while you are healing.

### **MEDICATIONS:**

- Pain medications:
  - You have been prescribed \_\_\_\_\_ which is a narcotic pain medication.
  - Use the medication only as prescribed. Take it with food.
  - Do not drive or operate heavy machinery. Do not drink alcohol. Do not make any life-changing or legal decisions (e.g. sign a contract or will), or participate in activities that require a lot of physical skill/coordination.
  - Purchase and take a daily stool softener such as Colace, Senakot or Miralax, and remain hydrated while taking narcotics as these medicines are constipating.
- Antiemetic medication:
  - You have been prescribed \_\_\_\_\_ to assist with postoperative nausea and/or vomiting. Please only take this medication as directed and as needed.
- Non-Steroidal Anti-Inflammatory Medications (NSAIDs):
  - Please take Aspirin 325 mg (one adult aspirin) daily for 6 weeks, starting on the morning after surgery. This will help with pain as well as prevention of blood clots (deep vein thrombosis aka DVT). This medication also assists with pain.
  - You have also been prescribed Celebrex 200mg. Take this once per day beginning the day after surgery to prevent heterotopic bone formation.

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You will take this medicine for 6 weeks. This medication also assists with pain and inflammation.

### **DRIVING:**

- In general, you may resume driving after your first post-op visit assuming you meet the following criteria:
  - You are no longer taking narcotic medication.
  - You have regained range of motion.
  - You are no longer using crutches.
  - You feel comfortable and confident that you may safely operate the vehicle.
    - This includes quickly braking and/or performing evasive maneuvers as needed and safely exiting the vehicle in the event of an emergency.

### **RETURN TO WORK:**

- You may return to work as soon as you are comfortable and able to perform light duty. This typically occurs around 10-14 days after surgery. Return-to-work notes can be generated as needed.

### **FOLLOW-UP APPOINTMENT:**

- Please call our office the day after your surgery to schedule your post-operative appointment. At this appointment, your sutures will likely be removed. If you have questions or problems before then, please call the office at 301-774-0500 to speak with one of our staff or the on-call physician.

Please call the office at 301-774-0500 to report any of the following:

- Persistent fever over 101.5° F
- Sudden increase in pain or swelling or deep calf pain.
- Streaking redness from the wound(s) or pus-like discharge from the wound.

### **PHYSICAL THERAPY/ TIMELINE:**

- Formal Physical Therapy will generally begin after your first post-operative visit.

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- You should begin your home exercise program as soon as possible after surgery (including the day of surgery, if possible).
  - The typical timeline for recovery is as follows: You will work on ROM, early quadriceps and hamstrings strengthening as well as light plyometric exercises for the first 6 wks. You will not perform cutting/pivoting, deep knee squats or sports until ~6 weeks after surgery. In general, full return to activity is between 2-3 months after surgery. *This rough timeline is dependent the procedure performed, and on your effort with physical therapy and at home. **The more you do, the faster things will go!***
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### **INITIAL (POST-SURGICAL) HOME EXERCISES:**

#### **CIRCULATION EXERCISE: ANKLE PUMPS**

Lie on your back (or seated with your leg straight). Gently point your foot up/down of performing a pumping motion. Each direction should last 3 seconds ("up-1,2,3... down-1,2,3").

- Repeat 10 times (1 set).
- Do 1 set every hour that you are awake and continue until you have returned to your normal level of activity.

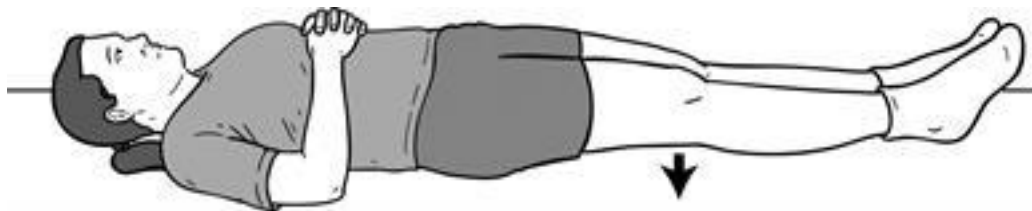


#### **MUSCLE REACTIVATION EXERCISE: QUADRICEPS SETS**

Lie on your back with your legs straight. Tighten your thigh muscle by pushing your knee down into the bed. Hold contraction for 10 seconds, and release/rest for 10 seconds.

*Do NOT hold your breath.*

- Repeat 10 times (1 set).
- Do 5 sets a day.

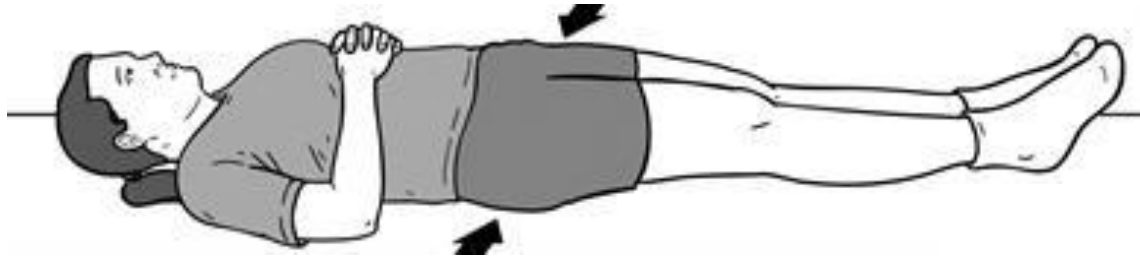


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### MUSCLE REACTIVATION EXERCISE: GLUTEAL SETS (BUTTOCK)

Lie on your back with your legs straight. Squeeze buttock together and tighten buttocks muscles. Hold contraction for 10 seconds, rest 10 seconds. Do NOT hold your breath.

- Repeat 10 times (1 set).
- Do 5 sets a day.



### EARLY STRENGTHENING EXERCISE: STRAIGHT LEG RAISE

**\*Only perform this exercise while wearing your brace and locked straight\***

Lie on your back with your non-surgical leg bent. Tighten your knee on surgical leg and slowly lift your leg to the level of the bent knee. Keep your back flat on the surface.

- Repeat 10 times (1 set).
- Do 2-3 sets a day.



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### EARLY STRENGTHENING EXERCISE : SHORT ARC QUADS

***\*\*\*Please DO NOT perform if you had an ACL reconstruction\*\*\****

Lie on your back with a towel rolled under your surgical knee. Slowly straighten your surgical knee by lifting your foot up while keeping your thigh on the towel roll.

- Repeat 10 times (1 set).
- Do 2-3 sets a day.

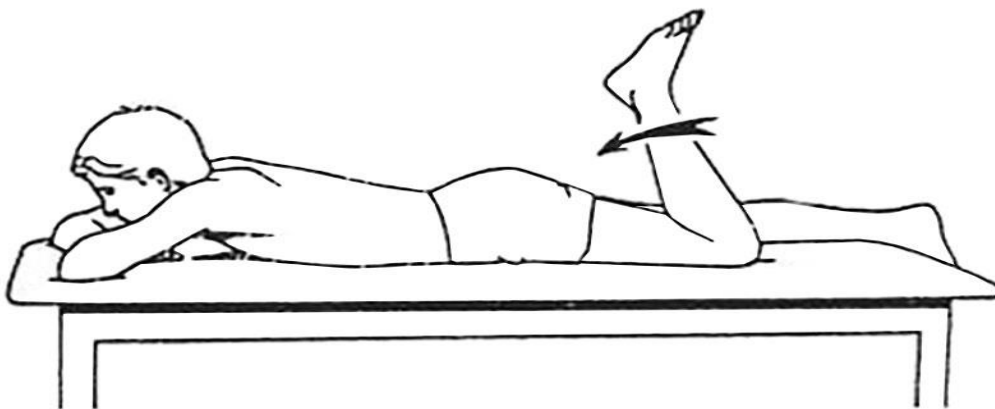


### EARLY STRENGTHENING EXERCISE: PRONE HAMSTRING CURL

***\*This exercise may be difficult to perform until swelling has improved\****

Lie on your stomach with your legs straight. Actively bend your surgical knee, bringing your heel toward your buttock as far as possible. You may use a belt, towel, or sheet to assist you if needed. After bending, slowly return your foot to the floor. Keep your hips flat on the surface. Try to bring your heel closer to your buttock with each repetition.

- Repeat 10 times (1 set).
- Do 3-4 sets a day.

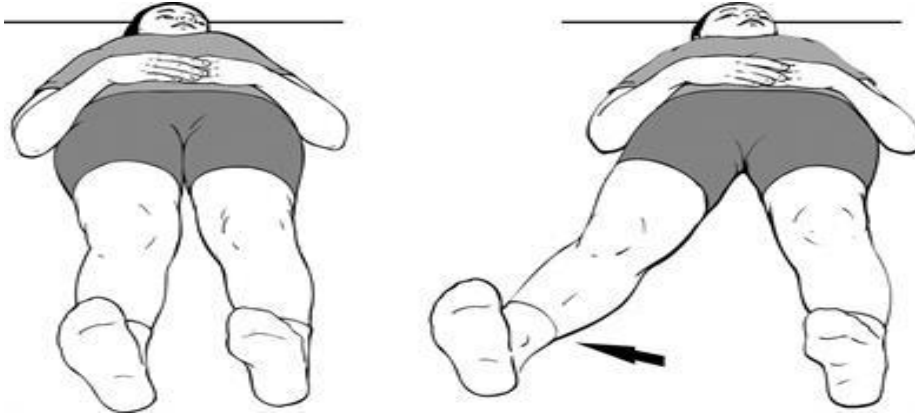


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### RANGE OF MOTION EXERCISE: HIP ABD/ADDUCTION

Lie on your back. Keep your knee straight and toes pointing toward the ceiling. Slide your surgical leg out to the side as far as you can, and then back to the center.

- Repeat 10 times (1 set).
- Do 3-4 sets a day.



### RANGE OF MOTION EXERCISE: HEEL SLIDES

Lie on your back. Bend your surgical knee by sliding your heel toward your buttocks.

**\*\*\*If you had a meniscus repair, stop bending when your knee reaches 90 degrees.\*\*\***

- Repeat 10 times (1 set).
- Do 3-4 sets a day.

You may be use a bed sheet, belt, or dog leash hooked around your foot to help you slide your heel.





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### RANGE OF MOTION EXERCISE: PRONE HANG

Lie on your stomach with your legs hanging off of the end of a bed, sofa, or even the kitchen table. Keep your knee supported with a small pillow or folded towel. Allow the weight of your foot to stretch your knee straight into extension. Hold for at least 30-60 seconds. [Advanced: hang a grocery bag or similar bag with a light weight (such as a can of soup) off your ankle].

- Repeat 10 times (1 set)
- Perform 3-4 (or more) sets per day.

