

Mr David Mitchell Mobile: 0438 322 969

TOTAL HIP REPLACEMENT PATIENT INFORMATION

DISCHARGE INSTRUCTIONS

If you have any problems phone the consulting rooms in hours on 5332 2969, or out of hours phone David Mitchell on 0438 322 969. If you are to see a nurse or another doctor prior to the appointment - show them this information sheet.

You will have a dressing on your wound. Leave this on until your review appointment. You will be provided with a spare dressing if the original dressing falls off, becomes waterlogged, or is leaking blood. The best way to change it is to remove it in the shower, wash the area in the shower, pat it dry with a clean, fresh towel and apply the new dressing. It is hard to see the wound properly-you will need help from a spouse or carer! A separate bandaid may be required for the local anaesthetic tube site.

You may have a pain patch on your shoulder. You will have been sent home with a spare patch, change the patch the Wednesday following surgery and leave this on until your review appointment. Try to keep the patch fairly dry in the shower. If it becomes hot, it releases more drugs, and you may become lightheaded & drowsy. If you are a bit sore, rubbing the patch may provide enough extra drug to avoid taking tablets.

If you are recovering well, you may find you can walk using a single crutch in the opposite hand. A walking stick may be used instead of a crutch, i.e. for a left hip replacement the stick goes in the right hand, for a right hip replacement the stick goes in the left hand.

Your leg will be swollen. It is rare for this to be caused by a Deep venous thrombosis. Walking is encouraged but prolonged standing will result in increased swelling. To reduce the swelling, the leg needs to be higher than your heart. This cannot be achieved sitting.

TED or Venosan stockings will help to reduce the swelling. These are easier to put on before you get out of bed in the morning. A light dusting of talcum powder over the

legs helps make application easier. Removing the stockings and showering in the evening then going to bed makes better sense in the first two weeks after surgery.

Bruising is normal and is the result of bleeding which has occurred from around the operative site during surgery. The bruising will subside over the following weeks.

Bruising will become evident in the days following surgery. Some people experience extensive bruising around the operative site, into the groin, tracking down the leg to the ankle and foot.

You <u>can</u> sleep on your operated side. Avoid sleeping on the side that has not been operated on, it can strain the stitches at the back of the hip joint.

If you are troubled by **nausea and vomiting-** phone the consulting rooms in hours on **5332 2969**, St John of God ward on **5320 2140**, Ballarat Health Services on **5320 4640**, or out of hours phone David Mitchell on **0438 322 969**. Sometimes patients need to be readmitted if this occurs, but usually you will be instructed to stop one medication, and take an extra tablet to settle your stomach.

Constipation is a problem best avoided by eating plenty of fruit and walking frequently. Avoid Panadeine Forte, a common pain killer, although all pain killers can cause constipation. Prune or cloudy pear juice is a classic remedy and probably should be taken on day two (i.e. Saturday after a Thursday operation).

If your bowels haven't worked within three days of surgery please seek advice from your local Pharmacy. If they still haven't worked the next day - contact your surgeon.

Checklist

Please check when you leave hospital you have: Painkillers- Mobic Panadol Tramal Norspan Patch To minimise blood clots- Cartia (Aspirin 100mg) A spare waterproof dressing (Opsite visible) Alcoholic chlorhexidine antiseptic if using tank water Access to ice packs (or frozen peas) when you get home

Medication Instructions

Take 1 cartia every day for six weeks.Cease Mobic 3 weeks after surgery.Take two panadol four times a day in the first four days, then only as requiredTake Tramal if you are sore- try one the first time you use it. Up to two six times a day is possible, but rarely required.Change Norspan patch Wednesday after surgery