

Direct Anterior Total Hip Replacement Post-Op Information

Activity:

- You may put as much weight on your operative leg as you can tolerate while walking with your walker. You will progress to using a cane as you become stronger and more stable on your feet.
- Ice and elevate the operative leg whenever you are resting the initial week or so. Continue with icing and elevating if swelling persists.
- Move your foot up and down and in circular motions to help prevent blood clots and improve circulation.
- Begin your home exercises provided in the clinic the day after surgery 2x/day until you follow up with Dr. Tauchen in the clinic. At this time he will evaluate the need for outpatient physical therapy. Occasionally different instructions are given based on your individual needs.
- Compression stockings provided at the time of surgery should be worn for 10-14 days post op during the day. You can take them off at night and for bathing. If they are too challenging to get on and off, it is OK to discontinue using them earlier than planned.
- You can drive once you are off narcotic pain medications (norco/tramadol) and feel safe to do so - usually around 2-3 weeks post-op.

Wound Care:

- The waterproof rectangle dressing should remain in place for 7 days after surgery. You can remove it 1 week after surgery. Leave the white strip of tape (Sylke) in place until your follow up in the clinic.
- Please reach out to Dr. Tauchen's office if you notice any drainage on the dressing.
- OrthoLazer treatments should begin 7 days after surgery if you will be going there. Please call the office if they have not reached out to coordinate appointments. These should be set up 3x/week for 2 weeks.

Bathing:

- It is OK to shower once you feel comfortable to do so.
- Do not submerge the wound in a bathtub or pool or use lotions/oils/creams over the incision until the incision is completely healed (no scabs present). This is typically around 4-5 weeks post-op.

Medications:

- Blood thinner: You should be on a blood thinner for 30 days after surgery. If you are low risk for clotting and were not on a blood thinner prior to surgery you should complete the full 30 days of aspirin 81 mg twice a day. If you are at a higher risk or were on blood thinners (Eliquis/Xarelto) prior to surgery instructions were provided in the office on how to take. Please call our office if you have any questions.
- Pain medications:

- Norco is for post-op **severe** pain. You may take 1 tablet every 4 hours, but you will want to gradually decrease the amount of pain medication as your pain improves.
- Tylenol (acetaminophen) should be taken after surgery to help with your baseline pain. We encourage you to take 3,000mg daily. If you are taking Norco, it does have 325mg per tab, so you will need to adjust the OTC dosage accordingly.
- An anti-inflammatory (Celebrex or Meloxicam) was provided to take once a day with food for 30 days. This is to help with post op swelling / inflammation. No additional over the counter anti-inflammatories (aleve, ibuprofen) should be taken while on this medication.
- Journavx: take as instructed during your pre-op visit with Alicia. This is taken twice daily for a period of 2 weeks in most cases.
- Stomach Protectant (PPI): Pantoprazole 40mg was provided to take once a day in the morning for 30 days. It is **ONLY** for patients taking aspirin and celebrex/meloxicam in combination to help protect your stomach.
- Stool Softener: Colace or preferred stool softener should be used while taking narcotic pain medications as they will cause constipation. Please call the office or your PCP if you have not had a bowel movement 3-4 days after surgery.

STREAMD messaging

This has been set up by Dr. Tauchen to deliver helpful information to you during your recovery period. You were registered by our staff at the time your surgery was scheduled. Please reach out if you are not receiving these daily messages. Your first message should be 2 weeks prior to surgery and continue through 6 weeks after surgery.

Common and *NOT* concerning reactions to surgery:

- Low grade fever (<100.5) for up to a week, please still call if fevers persist.
- Bruising, swelling, and discoloration of the involved limb is normal. Icing and elevating will help reduce swelling.

Concerning reactions:

- If you develop shortness of breath or chest pain, please go to the emergency room promptly.
- If you develop calf pain or swelling, please call us or your primary care physician urgently.
- Drainage

Your initial post-op follow-up appointment has been previously scheduled for around 3 weeks after surgery. Please call our office if you are unaware of your post-op appointment time.

If you need a refill on pain medications, please give the office 48 hours to send a new prescription to the pharmacy

Please reach out to the office for any questions or concerns:



ALEX TAUCHEN, MD

Hip & Knee Replacement Specialist

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- Dr. Tauchen's Office Phone: 630-288-7370
- Evenings or weekends, please call the main IBIJ number at (630) 323-6116 to speak with the on-call surgeon or PA.