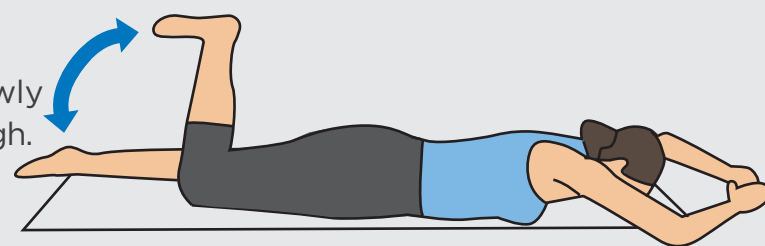


Early Home Exercise Program

The following exercises are to help you during the early recovery phase after a hip scope. These movements do not have you put weight on your leg, so they are safe for all surgeries. They may be hard at first, but that is normal. Listen to your body. Do not try to push through the pain or tightness. Perform as best you can.

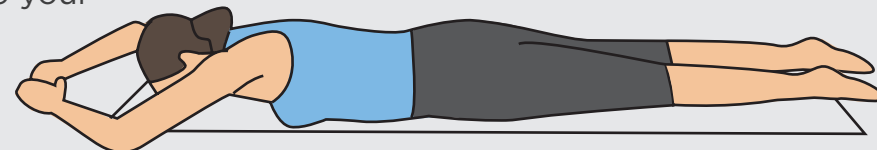
Prone Hamstring Curls

- 1 Lie on your stomach.
- 2 Bend the knee of your operative leg up slowly until you feel tightness in the front of your thigh.
- 3 Hold for **3-5 seconds** then lower your leg.
- 4 Repeat **10 times, 2-3 times per day.**



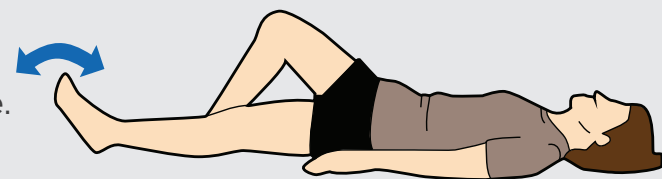
Prone Lying

- 1 Preferably on a firm mattress, roll on to your stomach and lay there.
- 2 Hold for **5-10 minutes.**
- 3 Repeat **1-2 times per day.**



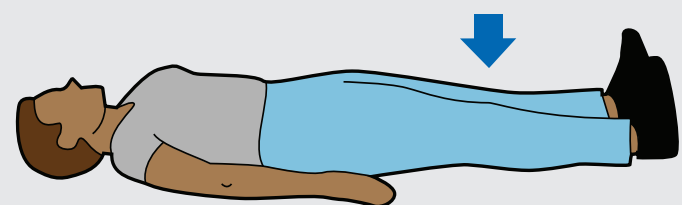
Ankle Pumps

- 1 Lie on your back or sit up in a chair.
- 2 Point your toes up then down as far as possible.
- 3 Repeat **20 times, 2-3 times per day.**



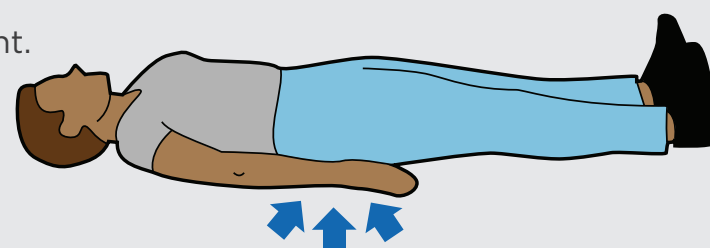
Quad sets

- 1 Lie on your back with your legs straight.
- 2 Tighten the muscle on the front of your thigh and push the back of your knee downward.
- 3 Hold for **5-10 seconds.**
- 4 Repeat **10 times, 2-3 times per day.**



Gluteal Seats

- 1 Lie on your back with both your knees straight.
- 2 Tighten your buttocks muscles firmly together.
- 3 Hold for **5-10 seconds.**
- 4 Repeat **10 times, 2-3 times per day.**



Hip Arthroscopy (Hip Scope)

We are available to answer any questions that may come up. Please feel free to call Dr. Burt's nurse at (402) 609-3000.



Videos, a digital version of this information, and other resources for patients undergoing Hip Arthroscopy are by scanning the code or at:
OrthoNebraska.com/hip-arthroscopy

Thank you for trusting us with your care. We want you to have a successful recovery. Recovering from a hip scope can be gradual, but we are seeing incredible results. We want to share some information on what to expect during your recovery.

Sincerely,

Charles F. Burt, MD

OrthoNebraska Hospital meets the definition of a "physician-owned hospital" under 42 CFR 489.3. Nebraska Orthopaedic Hospital, LLC and OrthoWest, PC are each operating under the name OrthoNebraska. For more information, visit OrthoNebraska.com/legal.

Help at Home

You must have a responsible adult with you on the day of surgery. Someone will also need to be with you overnight. Having someone at home with you after this time is optional.

Getting your home ready before surgery is helpful, especially if you have a family, pets or other duties at home to take care of. Have easily prepared meals and snacks on hand. Arrange your home for easy walking paths. You will be using crutches after surgery. You will have physical limits as well. They include no deep squats for three months and no driving for up to two weeks or more. The amount of weight you can put on your hip will be limited.

Pain Management

You are going to feel discomfort after your hip scope. We want to ensure it will be manageable.

Ice is helpful in managing local discomfort. Ice your hip and thigh for 30 minutes every few hours. Do this while you are awake. Make sure to put a towel or clothing between your skin and the ice.

The plan to manage your pain includes an opioid pain pill, a non-steroidal anti-inflammatory, and a muscle relaxant. The pain pill Dr. Burt prefers does not have Tylenol. Please have extra strength Tylenol (500mg) available at home. A suggested schedule is: Tylenol 1000mg (2 tablets) every six hours and the pain pill every four hours if needed. Take with a small snack to help avoid an upset stomach.

Based on past encounters, some people feel Tylenol does not work well for them. Tylenol has been shown to be helpful when taken with this pain pill. Before asking for other options, please try this suggested schedule along with ice.

We want to make sure you know your discharge medications. A nurse will review them with you and those who may help care for you.

Positioning

To make lying flat easier, plan on using a couple pillows to prop up your upper body. You may also put a pillow under your leg a few times a day, but not continuously.

Change positions frequently. It is good to get up and move every couple of hours during the day. It prevents stiffness and helps with circulation.

We recommend sleeping on your back with your head elevated a little or on your side with your operative hip facing up. You will want a pillow between your legs when you are on your side. You will not be sleeping on your stomach for a while.

If you were placed in a foam wedge abduction pillow at the time of surgery you should wear that while sleeping or napping until it is discussed at your follow up appointment. If you sleep on your side, you will need to place pillow(s) between your knees/thighs.

Preventing Blood Clots

You must wear knee high ted hose for two weeks. You may remove them for 30 minutes each day or for showering. The hospital will give you a pair before leaving.

You will be directed to take baby Aspirin for two weeks unless otherwise instructed. If you are considered high risk for blood clots, you will be placed on a full-strength blood thinner for up to a month.

We ask that you discuss any clotting history you or your family may have with Dr. Burt. Examples are Deep Vein Thrombosis, Pulmonary Embolism, Stroke, Factor 5, Protein C deficiency or MTHFR mutation. These may require a more specific plan to prevent blood clots.

Follow-up Appointment

Your first follow up with Dr. Burt will be 2-3 weeks after surgery. It's a good time to ask questions that may have come up during your early recovery.

Physical Therapy

Please call before surgery to book your appointment. Your first Physical Therapy (PT) appointment should be two weeks after surgery. You may choose your own location. The location may be key for you, as you will be having therapy three times a week for 3-4 months. Before then, please do the **Early Home Exercise Program** in this hand out.

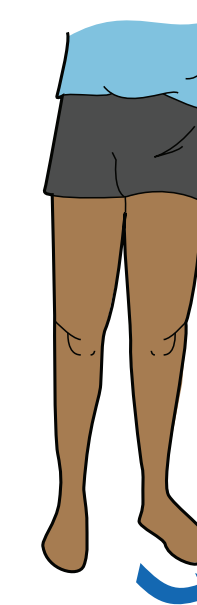
You will receive a PT prescription on the day of surgery. Please save this and take it to your first PT appointment.

At the hospital, a physical therapist will teach you on how to use crutches. They will also explain your partial weight bearing status. The amount of weight you can put on your hip will be limited. Crutches will assist you with walking. You will be on crutches for 2-6 weeks depending on your treatment plan. Expect a minimum of two weeks for all surgeries.

Dr. Burt wants you to move to one crutch before you stop using them completely. Your physical therapist will help you to transition to one crutch. We want you to walk with no limp or hip pain.

External Rotation Hip Precautions

As a part of your recovery, we ask that you avoid the below movements and any others causes your hip to rotate toward the outside of your body for the first four weeks. This helps prevent dislocation and promote healing.



DO NOT
Stand or lie down and allow your foot to turn to the outside



DO NOT
Sit crossed legged or cross one leg while sitting

