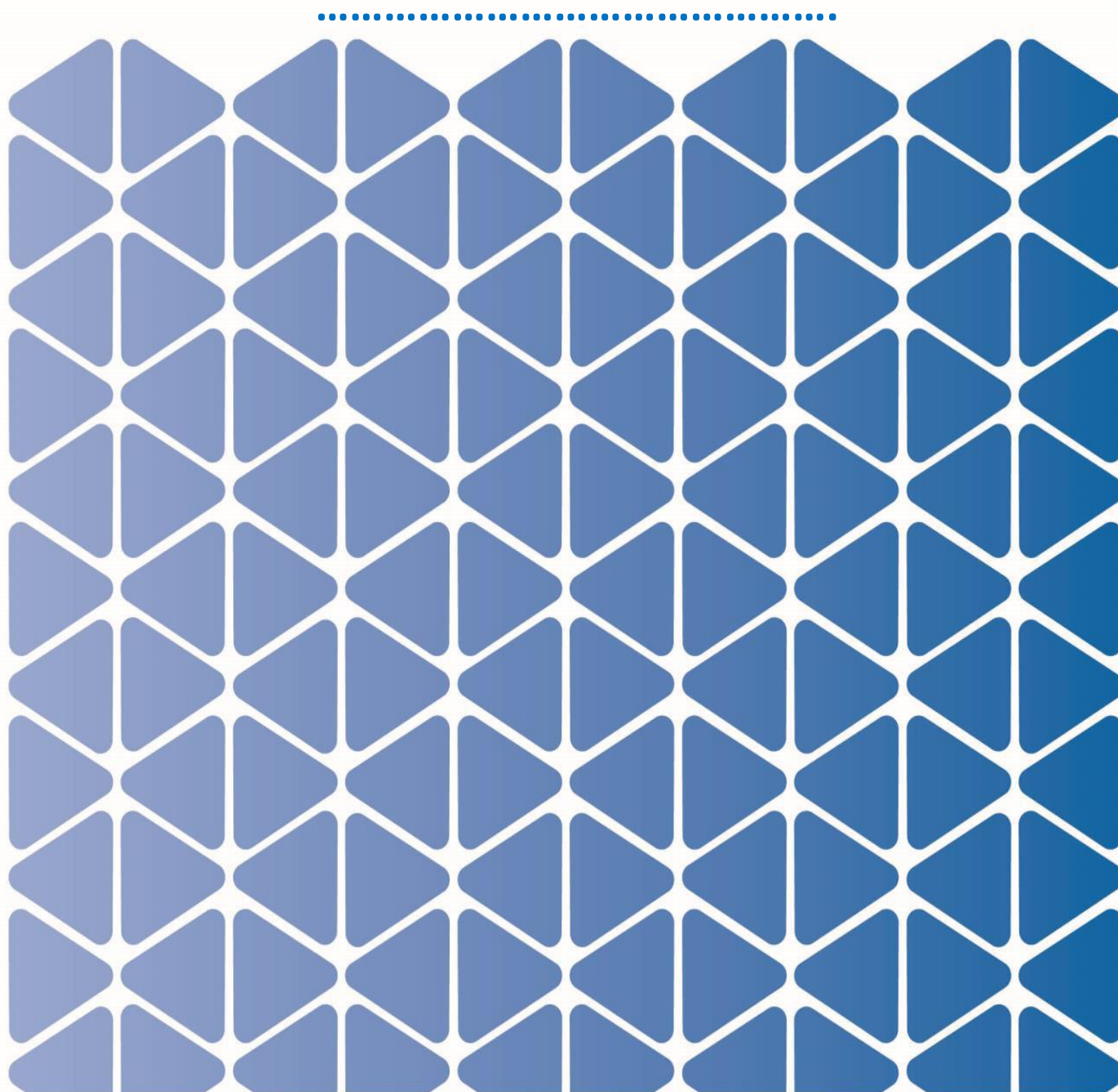


PATIENT INFORMATION

**HIP PRECAUTIONS FOLLOWING YOUR**



## **For further information and advice, please speak to a member of the Occupational Therapy team or the Physiotherapy team.**

It is still essential to follow the hip precautions to help reduce the risk of dislocation of the new joint. Remember the importance of these hip precautions as you get back to your normal routine at home.

We **STRONGLY** advise you to ask questions at your follow up appointment with your consultant in clinic regarding a return to more active hobbies and if your hip precautions can be relaxed.

Avoid putting undue strain on the hip joint whilst it is healing and follow hip precautions. These must be followed for \_\_\_\_\_ weeks following your operation. This will allow the muscles and tissues to heal properly and regain the strength to support the new joint.

Hip precautions are movements that you must avoid, as doing so will strain the hip causing it to dislocate.

### **General Guidelines**

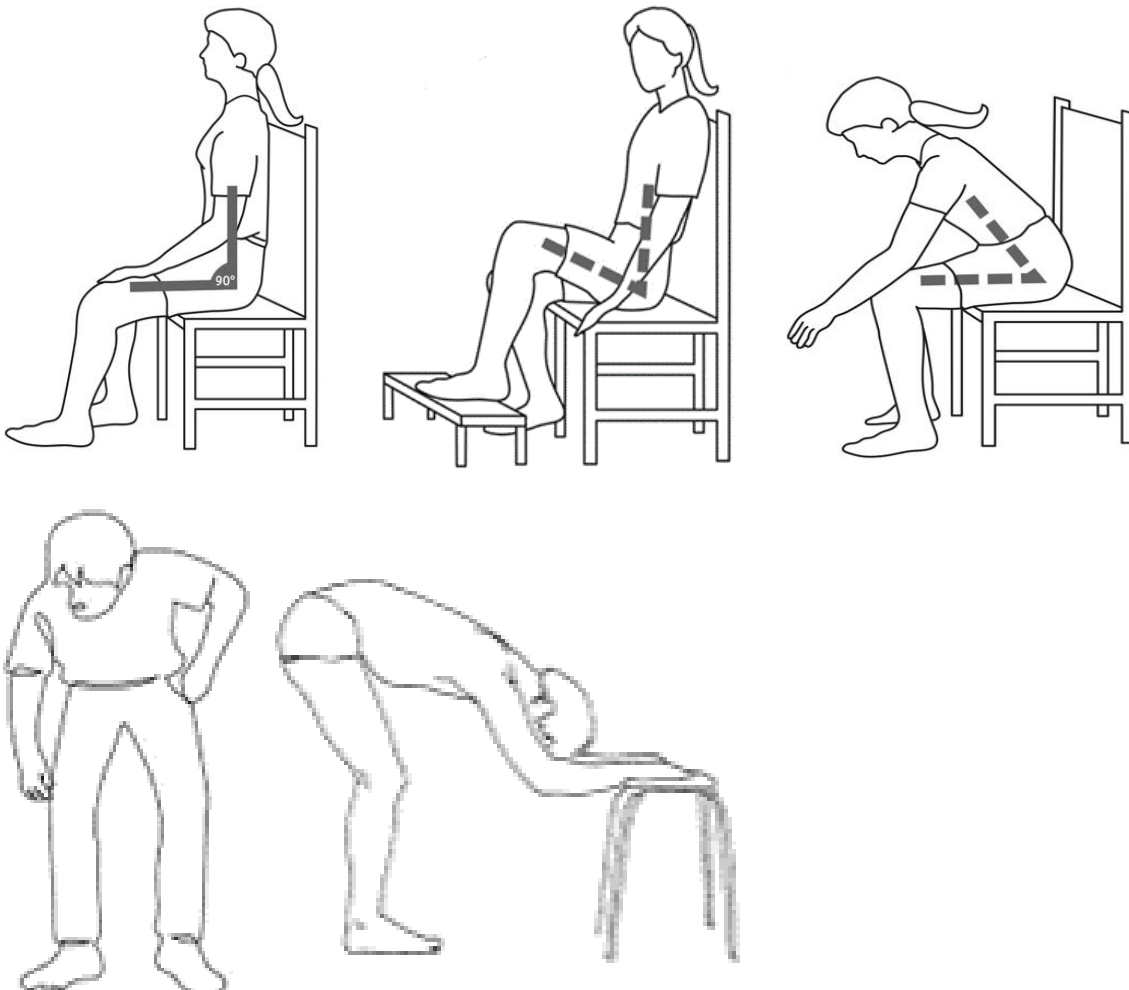
- Sit for short periods
- Walk for short periods
- Use the walking aids provided by the therapist
- Follow your exercise programme. This will strengthen your muscles around your hip and improve your range of movement.
- Avoid extremes of movement.
- Avoid heavy tasks such as vacuuming, cleaning, changing beds, laundry, and gardening while you are using walking aids.

## HIP PRECAUTIONS

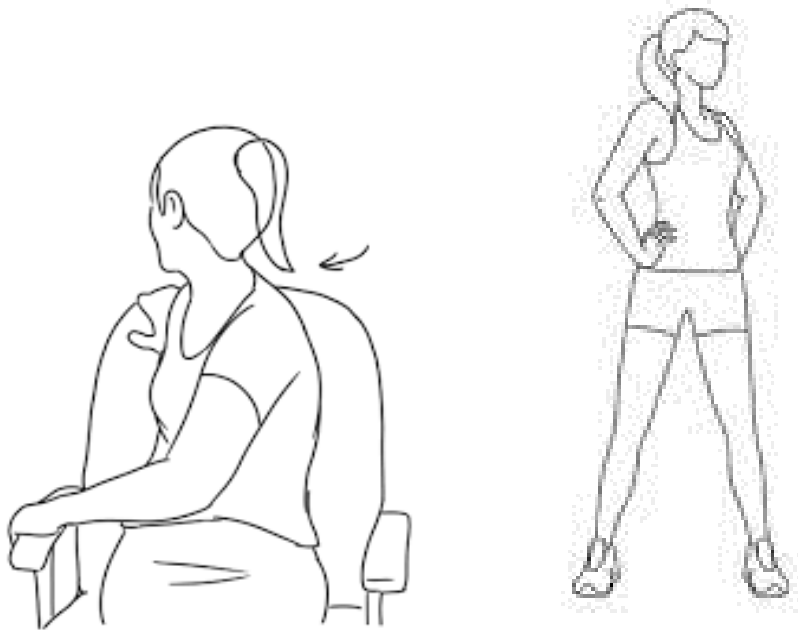
**DO NOT - Cross your legs**, even at the ankles, whether standing, sitting or lying down.



**DO NOT - Bend your hip more than a 90° angle**, avoid bending down to your feet or bringing your leg up towards you.



**DO NOT - Twist at the hip or overreach.** Always ensure you face what you are doing



## **PERSONAL HYGIENE**

- You will not be able to use the bath or shower until your wound is dry and completely healed. The time for this may vary.
- Once your wound has healed, when stepping into a shower cubicle use your unoperated leg first (the same technique as when managing stairs).
- We advise you not to step over or use the bath following your surgery initially, therefore you may prefer to strip wash until you feel you can safely manage a shower cubicle.
- Only use a shower cubicle when you feel safe and confident to stand unaided for long enough to have a shower.
- Wash your hair in the shower if possible.
- Use a long-handled sponge or brush to reach your feet, if this is more comfortable.



## Dressing

- Sit down on a firm chair or bed while getting dressed. Remember to dress your operated leg first and undress it last
- Use long handled dressing aids such as a helping hand (grabber), shoe horn or sock aid to dress your lower half to avoid over reaching or bending when getting dressed.



## TRANSFERS

**When Sitting or Standing** (from a chair/bed/toilet etc the advice is the same)

- It is more comfortable to put the operated leg out in front of you when you stand up or sit down.
- Place your hands on the arms of the chair or on the bed either side of your bottom. Use your un-operated leg and your hands to push yourself up to standing or to lower yourself back down slowly.
- Do not pull up on a walking frame or have your arms through the supports of your elbow crutches to move.
- Sit on a chair that is a comfortable height for you. You may find it easier to have a chair with arms to push up on.



## Bed Transfers/ Sleeping Positions

- Get into bed leading with your un-operated leg first, followed by your operated leg.
- Bend your un-operated knee and take weight through the heel and both arms to lift your bottom across the bed.
- Reverse the sequence when getting out of bed.
- Sleep on your back for \_\_\_\_\_ weeks (propped up on pillows if you wish). Then after \_\_\_\_\_ weeks you can sleep on your operated side for a further \_\_\_\_\_ weeks with a pillow between your legs.



## Getting in and out of a car

- You can be a passenger in a car as soon as you leave hospital.
- Sit in the front passenger seat.
- Get in from the road or driveway, not the pavement so that you are not stepping up or down into/out of the car.
- Before getting into a car ask the driver to push the seat as far back on the runners as it will go to allow for maximum leg room.
- Recline the backrest to enable you to lift your legs in easily. It can be returned to a comfortable position for travelling.
- Turn your back to the car and put your bottom down first.
- Slide backwards as far as possible then gently swing your legs in – you may need help lifting your operated leg in.
- Reverse procedure to get out.
- Avoid leaning on the car door for support.
- Take regular short breaks when on long journeys.



## Driving

- Check with your insurance company that you will be covered by the terms of your policy.
- Avoid driving for 6 to 8 weeks and **ALWAYS** liaise with your GP or Consultant before returning to driving.

## Sexual Relations

In the absence of pain or contrary advice from your surgeon, sexual intercourse may be resumed 12 weeks after your operation. We recommend that extremes of movement are avoided, but otherwise use any position you find comfortable.

### Contacts for Occupational Therapy

#### Alexandra Hospital

Tel: 01527 512146

#### Worcestershire Royal Hospital

Level 2: 01905 760170

## Feedback for Inpatient Therapies

### Please scan the QR code or follow the link below:

If you have been seen by a Physiotherapist or Occupational Therapist during your admission, please leave us some feedback by scanning the QR code or following the link and filling in the short survey.



<https://apps.worcsacute.nhs.uk/PublicSurvey/AHPFeedback>

Ward admitted to: \_\_\_\_\_

Therapy team who treated you: \_\_\_\_\_

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

### **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

### **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

### **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

### **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PALS@nhs.net](mailto:wah-tr.PALS@nhs.net)**

### **Opening times:**

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.