NEW ENGLAND BAPTIST HOSPITAL TOTAL HIP REPLACEMENT EXERCISE PROGRAM

Tissue Preserving Technique No Precautions for Hip movement or weight bearing

DO 10 REPETITIONS OF EACH EXERCISE 3 TIMES A DAY All exercises are to be done within limits of comfort.

BED EXERCISES

LYING ON BACK

- -Ankle pumps move feet up and down.
- -Quad set tighten thigh muscle by pushing knee into bed, hold for count of five and relax.
- -Gluteal set squeeze buttocks together, hold for count of five and relax.
- -Hip rotation/windshield wipers roll both knees out and back to neutral keeping knees straight.
- -Thomas stretch bring unoperated leg toward chest, hug knee to chest using arms, stretch operated leg long, hold this position for count of five. You should feel a stretch across the front of your operated leg as it stays flat on the bed.
- -<u>Hula</u> keeping knees straight, push one leg long while drawing the other leg back. Repeat for other leg. Concentrate especially on pushing the non-operative leg long.
- -<u>Heel slides</u> bend knee up by letting the heel of your foot slide along the bed. Bring knee up to the maximum bend and then slowly lower leg to bed.
- -Bridging bend unoperated leg so that foot is flat on bed, push foot into mattress and lift buttocks off bed. Hold for a count of five and lower slowly. You should feel a stretch across operated leg.
- -Short arc quad place folded pillow or a rolled towel under knee so that knee is bent and heel is resting on bed. Point toes up and lift foot off bed, hold for count of five and lower slowly.
- -<u>Hip abduction and adduction</u> with leg straight and resting on bed, tighten the knee, then slowly slide leg out to the side and return to midline.

LYING ON STOMACH Roll over either hip. No pillow is necessary.

- -Knee flexion bend knees one at a time and then lower slowly.
- -Knee extension/knee push up bend your ankles up and press toes into bed. Tighten thigh muscles and lift knees off of bed keeping your hips on the bed. Hold for a count of five and relax.
- -Gluteal set squeeze buttocks together, hold for count of five and relax.
- -<u>Hip extension</u> keep leg straight and lift leg off bed toward the ceiling, hold for count of five and lower slowly. Remember to keep your hips flat on the bed.

SITTING EXERCISES

- -Toe tapping keep heels on floor and raise toes up and down as fast as possible.
- -Trunk rocking rock body from side to side then forwards and backs.
- -Trunk flexion grab your knees with your hands and bend forward as far as possible. Hold for the count of five.
- -<u>Hip flexion</u> place hands under back of thigh and gently lift leg up and down keeping back straight and knee bent. As your strength improves, do this exercise without using your hands.
- -<u>Hip rotation/Charleston</u> with feet flat on floor, roll knees in and out. Start with feet together and then repeat with feet apart.
- -Knee extension with your knee supported by the chair or your hand, straighten your knee as much as possible, lifting your lower leg off floor. Hold for count of five and lower slowly.
- -Abduction isometrics with your feet flat on the floor and your hands on outer aspect of thighs near your knees, push thighs out into hands creating muscle tension without motion, hold for count of five and relax.
- -<u>Adduction isometrics</u> with your feet flat on the floor and your hands on inner aspect of thighs near your knees, push thighs into hands creating muscle tension without motion, hold for count of five and relax.
- -<u>Sitting Hula</u> with feet flat on floor, push one knee forward while pulling the other knee back. Concentrate especially on pushing the knee on your non-operative side forward.

STANDING EXERCISES

USE SOLID SINK OR COUNTERTOP FOR SUPPORT

- -Toe raises raise up on toes and lower slowly.
- -Marching in place lift legs up and down one at a time to practice weight shifting and cadence of normal gait.
- -Hip and knee flexion lift operated leg off floor bringing the knee high, hold for count of five and lower slowly.
- -<u>Hip flexion and extension with straight knee</u> keep knee straight bring your leg forward and back, which flexes and extends your hip.
- -Hip abduction keep knee straight and move leg out to side, hold for count of five and return.
- -Knee flexion bend knee back behind you, hold for count of five and lower foot slowly to floor.

DISCHARGE GUIDELINES

WALKINB AND WEIGHT BEARING PROGRESSION: Use two crutches for as long as you feel that you need them. You may progress the amount of weight that you bear on your operated leg as much as you want over several weeks provided that you are not limping and provided that your pain does not increase. As you feel stronger, you may starting walking with a single crutch (used on the nonoperative side), and then to a single cane (also used on the nonoperative side). Finally, you may progress to full weight bearing, again provided that you don't limp or have increased pain. Start by trying this a little bit at home and see how you feel. Then progress if you are walking well. Walk each day 4-6 times (10-20 minutes). Walk outside if possible. Examine your gait in front of a full-length mirror, if possible.

STAIRS: Crutches lead you down and follow you up. Be sure crutches are under arms and firmly placed on stairs.

DOWN: Crutches, Operated leg, unoperated leg.

UP: Unoperated leg, Operated leg, crutches.

SLEEPING POSITIONS: Sleep on back, stomach, or either hip. No pillow is necessary.

ELASTIC STOCKINGS: Wear elastic stockings during the day for four weeks. You can stop using them as long as your lower legs aren't swollen. Keep using them until you see Doctor Murphy if you have any questions.

ELEVATED TOILET SEAT: You can use an elevated toilet seat if it's easier for you, but don't use it if you don't feel that you need it.

SHOWERING AND BATHING: You may shower as soon as your incision is dry for two days. You may bathe in a tub or get in a pool as soon as your incision is completely dry for a week. You can sit on a chair in the shower if it's easier for you. Use crutches to get in and out of shower until you can walk well without support.

SEXUAL RELATIONS: Resume according to your comfort. Avoid extremes of motion.

SWIMMING: You may swim as soon as your incision is dry for a week. You need to use crutches, one crutch or a cane to get in and out of the pool, the same as you would otherwise.

<u>DRIVING:</u> May ride as a passenger on discharge from the hospital. To get into the car: use front passenger seat with seat pushed back as far as possible. Scoot yourself back in the seat. Use your hands to assist your legs into the car. You may drive when you feel that you have good control of your operated leg.

STATIONARY BIKE: Start with 5 minutes, 3 times a day. Work up to 15 minutes, 3 times a day. Do this by adding 1-2 minutes each week. Use minimal tension and do not exceed 10 mph, trying to keep the needle steady. Lower the seat ½" each week.

IMPORTANT: ALL EXERCISES ARE TO BE DONE WITHIN LIMITS OF COMFORT.

- You may use *cold* to control swelling and pain as needed but *not heat*. A frozen bag of peas in a thin towel works pretty well.
- If you require dental work or any other procedures that can possibly cause bacteria to circulate into your bloodsteam, please call Dr. Murphy since prophylactic antibiotics are required.
- Call Dr. Murphy if your incision drains persistently after a week or it becomes progressively painful, progressively swollen, or red.
- No weights with exercises for 1 month.
- No straight leg raising for 1 month.
- Lie flat on your back or on your stomach for 30 minutes 3x/day.
- Discontinue exercises and notify doctor if your hip becomes progressively painful with exercise.

up straight.	
PATIENT SIGNATURE:	DATE:
THERAPIST:	(617) 754-5800, PAGE #

You may sit for as long as tolerated. Keep your hip moving regularly while sitting. Sit with knees bent and pointing straight ahead with feet flat on floor. Arch your back and stretch your operated hip back when you get up so that you can stand