# Hip Preservation Program

Hip Arthroscopy



www.orthopedicONE.com



# **Hip Preservation Program**

# **Table of Contents**

Welcome to Hip Preservation	
Surgical and Post Operative Appointment Schedule	
About the Hip Joint	5
Hip Problems	
Hip Arthroscopy	7
Frequently Asked Questions about Hip Surgery	8
Hip Surgery Checklist	
Tobacco and Wound Healing	10
Getting Your Skin Ready for Surgery	<b>1</b> 1
Preparing for Hip Surgery	12
What to Expect in the Hospital	13
When You Leave the Hospital	14
Wound Care at Home	
Hip Safety at Home	18
Follow up Visits and Plan of Care	19
Visit Record and Notes	20
When to Call the Doctor	22
Driving Directions to Orthopedic One Dublin Office	23
Driving Directions to Dublin Methodist Hospital	24
Driving Directions to Ohio Orthopedic Surgical Institute	26

# O' orthopedic ONE

# **Welcome to Hip Preservation**

At Orthopedic One, we work hard to preserve your hip joint. Hip preservation means more than just hip surgery, it is total care of your hip joint. Our goal is to help you be free of pain, return to physical strength and good range of motion.

We take a team approach to care for your needs. Your treatment team may include physicians, physician assistants, physical therapists, athletic trainers, radiology and sports medicine. Together, we manage your care to reduce downtime from surgery and get you back to the activities you enjoy.

At Orthopedic One, you are an important member of your care team. Please share your needs and concerns with us. We are here to best serve your needs. We want to help you learn more about your hip and the care needed for your health and recovery.

- Please read this booklet as well as share it with friends and caregivers who will help you while a part of our hip preservation program
- Share the therapy booklet with your care team, including your physical therapist, so we can work together to best guide your needs

Sincerely,

Thomas J. Ellis, MD

### **Our Offices**

### **Dublin**

6840 Perimeter Drive Dublin, OH 43016

### Sawmill

4605 Sawmill Road Upper Arlington, OH 43220

### **Surgery Locations**

**Dublin Methodist Hospital** 7500 Hospital Drive Dublin, OH 43016

Ohio Orthopedic Surgical Institute 4605 Sawmill Road Upper Arlington, OH 43220

### **Contact Us**

### Scheduling

614-827-8700

### Fax

614-827-8701

### **Email**

columbushiparthroscopy@gmail.com

### Website

Columbushiparthroscopy.com

# Surgical and Post Operative Appointment Schedule

Surgery Annointments

ourgery Appointments	
Surgery Procedure:	
Surgery Date:	
Surgery Location:	
Post Operative Appointments	
2 Week Post Op Visit with Tiffany:	
2 Week Post Op Visit with PT:	
6 Week Post Op Visit with Dr. Ellis:	
6 Week Post Op Visit with PT:	

Please contact our office if you are unable to make these appointments or need to reschedule.

Additional visits will be scheduled after your 6 week follow up appointment based on your individual progress after surgery



# **About the Hip Joint**

The hip is a weight bearing joint that is made up of the pelvis and femur. Together, the round end of the femur fits into the socket, or acetabulum. The socket is covered by a soft tissue or cartilage called the labrum.

# Why Treatment?

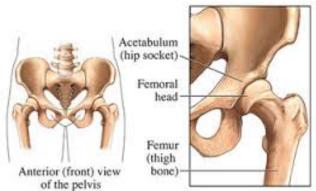
Hip preservation means repairing the hip joint to improve structure or function and is done for many reasons:

- Femoroacetabular impingement (FAI)
- Labral tears
- Hip dysplasia
- Snapping Hip Syndrome
- Trochanteric Bursitis

# **Beginning the Process**

Testing for hip problems starts with your medical history, physical exam and imaging. X-rays are taken to check the structure of the hip joint and the amount of space left between the bones. MRI may be used to check for labral tears in the joint. 3D CT may be used prior to surgery to assess boney deformity.

The goal of any treatment is to protect the hip from degeneration and further damage. Hip problems can start at any age but athletes may be at higher risk due to repetitive motion.



Source: NHS UK

# **Hip Problems**

NORMAL

# Femoroacetabular Impingement (FAI)

In FAI there is abnormal contact between the ball of the hip and the socket. Too much contact between these structures can result in damage to the soft tissue or labrum.

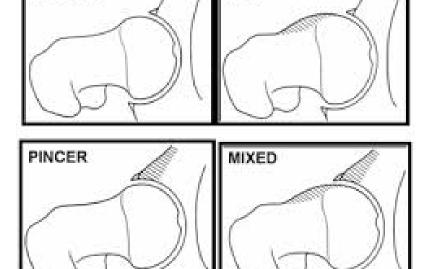
# **Types of FAI**

- CAM Impingement
- Pincer Impingement
- Mixed Impingement

# **CAM Impingement**

The femoral head does not fit in the socket properly. The head and the neck of the femur are not perfectly round. This results in contact in the hip socket.

## **Pincer Impingement**



CAM

Source: NHS UK

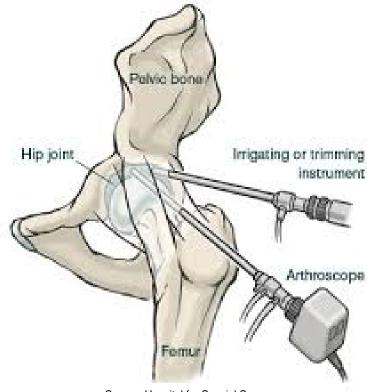
The socket overlays or pinches the femoral head. Too much coverage causes the labrum to be pinched.

### **Mixed Impingement**

There is both CAM and Pincer impingement present. When this happens together, this can increase the risk for joint damage and degeneration.

# **Hip Arthroscopy**

Hip Arthroscopy is a minimally invasive surgery used to treat FAI. A special tool that uses a camera to look inside the joint is called an arthroscope. Small cuts are made which the doctor uses to pass the arthroscope through to look at the joint. Special tools are then used to help remove and repair the damaged areas.



Source: Hospital for Special Surgery

# **Arthroscopy treats several problems**

This surgery is most often for patients less than 55 years of age. It may help to improve your function if you have one of the following:

- FAI
  - Surgery can repair the torn labrum using special anchors that hold the labrum to the socket of the hip. It can also address any bone deformities.
- Loose pieces of cartilage that are floating in the joint

### Arthroscopy does not treat arthritis or inflammatory hip problems

# Frequently Asked Questions about Hip Surgery

You may have questions about hip surgery and hip arthroscopy. Here are some of the common questions our patients ask to help you feel more confident in your treatment plan.

### What are the risks?

Most patients have a low risk for problems from surgery. You may have pain and numbness in the surgery area or groin after surgery. You may have bleeding from your surgical wound. You will learn the major risks of surgery when talking to the doctor and reading the surgery consent form. Major risks of any surgery include but are not limited to infection, pneumonia, heart problems, or blood clots. There is little risk of death with this surgery.

Your doctor will always discuss the risks of surgery specific to your health.

# How long will it take to recover?

Your hip will continue to heal and gain strength for up to 1 year after surgery. Common problems include loss of strength and limited range of motion as the hip heals. Most patients feel better about 3 months after surgery. By 6 months, most patients are happy they had surgery.

### When can I return to work?

Talk to your employer about medical leave. You will be excused by our office for 3 months after surgery. You may be able to return sooner based on your job. Please contact the office when you are ready to return to work so we can provide you with a letter for your employer.

# When can I restart a sport or other activity?

It depends on the activity or sport. It also depends on how your body is healing and improving after the surgery. Always talk with your doctor and physical therapist before restarting sport or active hobbies.

# **Hip Surgery Checklist**

All checklist items must be completed before surgery is scheduled:

# **Surgery Checklist**

See a cardiologist or heart doctor, if you have a known heart problem
or have seen a cardiologist in the past. The cardiologist needs to
document that you are well enough (cleared) for surgery.

If you have diabetes,	your hemoglobin	A1C (HgB	A1C) level	must be
less than 7.0.				

$\square$ Yo	our b	oody	mass	index	or	BMI	must	be	less	than	32.
--------------	-------	------	------	-------	----	-----	------	----	------	------	-----

□ You must quit using all tobacco products, including nicotine patch and/or gum, smokeless tobacco, e-cigarettes that contain nicotine, cigarettes, cigars. A blood test is given prior to surgery (within a few days of surgery) to check for nicotine in your blood. You need to quit all tobacco products at least 2 weeks prior to this test. If nicotine is present, your surgery will be cancelled.

If you need help quitting tobacco to have this surgery, please tell our office or call the Ohio Tobacco Quit Line at 1-800-Quit Now or 800-784-8669. You can also visit their website at http://ohio.Quitlogix.org

# **Surgery Scheduling**

Call our office to schedule surgery when you have completed the checklist. These health checks are done for your safety. We want to make sure you have the best possible outcomes after your surgery.

If you have concerns about any of the items on our checklist, please contact our office.

When the checklist is complete and you have your surgery date, **YOU MUST CALL to schedule your first physical therapy appointment.** Please see page 15 in this book for more information.

# **Tobacco and Wound Healing**

To heal well after surgery, you must stop using all products that contain nicotine. Quitting tobacco at least 4 weeks and up to 8 weeks before surgery helps surgery wounds to heal.

You must quit nicotine prior to scheduling surgery

### **Tobacco and surgery**

Tobacco hurts the function of cells in the body that help wounds to heal and fight infection.

- Smoking for even 10 minutes lowers the amount of oxygen in the body for up to one hour. The more tobacco is used, the less oxygen in the body for health and healing
- Wound dressing absorb cigarette smoke. This makes it harder for wounds to heal after surgery.

### **Quitting Tobacco**

If you need help quitting tobacco, use these tips as part of your quit plan:

- Set a quit date This is the day you officially stop using tobacco
- Get rid of tobacco products lighters, ash trays and spit cups in your home and vehicle
- **Tell others you are quitting** so they can support your new behaviors. Consider a "no smoking" or "no tobacco" rule where you live.
- Write down your tobacco triggers and create a list of new behaviors to replace time spent using tobacco such as exercise, chewing gum, going for a walk or calling a friend.
- Use the "4D's" when you have cravings: Delay the behavior, even a few minutes may be enough for the craving to pass. Take a Deep breath. Drink fluids to clear nicotine from the body. Do something else.

### For more support or information:

- Talk to your Primary care provider, dentist or other health care provider about quitting.
- Call the Ohio Tobacco Quit Line at 1-800-QUIT NOW or 1-800-784-8669.
- Visit their website at <a href="http://ohio.quitlogix.org">http://ohio.quitlogix.org</a>



# **Getting Your Skin Ready for Surgery**

CHG is a special soap called Chlorhexidine Gluconate. It is used to get your skin prepared for surgery. By washing with this soap, you reduce the bacteria and germs on the skin. It lowers your risk for infection after surgery.

### Please shower with this soap the night before and the morning of surgery

### **Getting CHG Soap**

If you are not given this soap by your physician, it can be purchased at a grocery or drug store.

- A common brand name is Hibiclens. It may be in a 4 oz bottle or as wipes. You can also buy the store brand for less.
- You may need more than 4 oz of soap to clean your skin
- Ask a pharmacist to help you find it or look in the first aid section of the store

### For your Safety

- Avoid contact with your eyes, nose, ears, mouth and face
- Do not shave for 48 hours prior to surgery when using this soap
- Do not scrub your body too hard, CHG does not lather well
- Talk with the Doctor if you have open sores before using CHG
- Use only as directed

### Washing with CHG Soap

- Wash your hair and body as normal with your normal products
- **2.** Wet a clean washcloth, turn off the shower
- **3.** Put CHG soap on the washcloth
- 4. Wash your entire body from your neck down gently for 5 minutes paying extra attention to your surgical area.
- 5. Turn the shower back on and rinse your body well with water
- **6.** Pat yourself dry with a clean towel
- 7. Do not apply lotion, moisturizer, makeup, deodorant or other products to your skin
- 8. Put on clean clothes
- 9. Repeat these steps again the morning of surgery

# **Preparing Your Hip Surgery**

### **Your Surgery Time**

Dublin Methodist Hospital/Ohio Orthopedic Surgical Institute will provide you with your arrival time for surgery and all final instructions the day before surgery.

If you are sick and unable to keep your surgery time, please call our office ASAP

### **Getting Ready for Surgery**

- Do not shave 48 hours prior to surgery
- Shower with the CHG soap as instructed on previous page
- Do not eat or drink anything after midnight the night before surgery. This includes but is not limited to: water, coffee, candy, gum and mints.
- If you take medication, only take the medications that your doctor has said are okay to take the morning of surgery. Please take only small sips of water with these medications
- If you have diabetes, please make our office aware so we can try to schedule your surgery appropriately
- You may brush your teeth the morning of surgery, but do not swallow the water

### What to Bring to the Hospital

You will be able to go home the same day of surgery.

You will need to bring these items when you come to the hospital:

- Photo ID or Drivers license
- Medical Insurance card
- Copy of your Living Will or Durable Power of Attorney, if you have these items
- Copy of your medication lists with drug names, doses and how you take them
- Compression shorts (bike shorts) for going home and casual loose fitting clothing
- Storage case for glasses, contacts, hearing aids and or dentures/partials/bridgework
- Crutches labeled with your name. If you do not have crutches a pair will be provided to you at the hospital.
- Brace

Leave make-up, jewelry, money, credit cards and other valuables. We are not responsible for the loss of any personal items.



# What to Expect in the Hospital

This is a general plan of care while you are in the hospital. This plan may be changed to meet your specific needs. You will be taught about wound care and recovery before you leave the hospital.

### **Medicines:**

- Medicines will be given to control your pain and reduce swelling
- Medicines may be given to thin the blood and lower your risk of blood clots
- Medications will be given to help with constipation and for nausea
- Other medicines that you take may be restarted. Talk with the hospital staff about your needs
- You will be given prescriptions for medications for when you go home

### **Diet/Nutrition:**

If you have nausea or upset stomach after surgery, please tell staff.
 Clear liquids and solid food are started as your diet progresses in recovery

### **Bathroom:**

 Please ask staff for assistance before getting out of bed, including going to the restroom. We want to help protect you from a fall or injury after surgery

### **Wound Care:**

 You will be taught how to take care of the surgery incision and wound as it heals

### **Activity:**

• You will start physical therapy 2-3 days after surgery. You will be given a prescription for physical therapy at your consent appointment.

It is your responsibility to schedule your physical therapy appointments prior to surgery at a location convenient to you.

# When You Leave the Hospital

### The First 24 Hours

Do not drive, drink alcohol or make any important decisions after having surgery. You must have a responsible adult with you for your safety for the first 24 hours after going home.

### **Discharge Information**

This is a general guide of care. Your care will be specific to your needs when you go home.

### **Diet and Activity**

You will slowly return to a normal diet. Please start with clear liquids and slowly advance your diet as tolerated.

Use crutches to walk as needed on your surgical leg. You can put full weight on the leg as you feel able and as pain reduces. Let pain be your guide for use. You may stop using the crutches when you are able to walk without a limp and are pain free, about 1-3 weeks after surgery.

### Wound Care:

Keep the incisions clean and dry. You may change your dressing the day after surgery. If your wound is still draining, please reapply a dressing to the area. You may shower without covering the incision when your wounds have stopped draining. Please do not use any lotions, creams or powders, including neoposin, on the incision. Please do not submerge the incisions in water until your wound is healed and sutures have been removed.

### Medicines:

When leaving the hospital, you will be given a prescription for some or all of the following medications

Medicine	Reason	How to take
Diladuid	Severe pain	1 tablet every 4 hours as needed
Tramadol	Moderate pain	1 tablet every 6 hours as needed
Mobic	Anti-infammatory	1 tablet daily with food
Vimovo	Anti-inflammatory	1 tablet twice daily with food
Lovenox	Blood thinner	40mg injection daily
Aspirin	Blood thinner	1 tablet 2 times daily
Senokot	Reduces Constipation	2 tablets 2 times daily

### **Pain Control:**

Expect pain even when taking medications. Do not take more medicine than is prescribed for your safety. To reduce discomfort use:

- Ice or cold compress: Apply directly to the site for 20 minutes at a time then remove the ice for 20 minutes before reapplying
- Game Ready: Can be used in place of ice. Follow directions on packaging
- ACE Bandage: Apply the bandage around the hip to reduce pain from swelling. You will be taught this before leaving the hospital. You may use compression shorts in place of the ACE Bandage.

### **Constipation and Nausea:**

- <u>Senokot</u> is stool softener with a stimulant. This will help make more regular bowel habits. We will provide you a prescription for this at the time of surgery. Please take 2 tablets twice daily until initial bowel movement then as needed.
- <u>Magnesium Citrate</u> is an over the counter medication used for emergency rescue for constipation. Follow the instructions on the bottle and call our office.
- <u>Zofran</u> is an anti-nausea medication that will be provided to you upon discharge. Please take 1 tablet every 8 hours as needed.

### **Blood Thinner:**

These medications are used to lower your risk for a blood clot. You will be prescribed either Aspirin or Lovenox depending on your medical history. An injection of medicine called Lovenox may be used if you have a personal or family history of blood clots.

When taking a blood thinner, you are at a higher risk of bleeding. Protect yourself from small cuts, bumps and bruises.

For your safety while on Lovenox:

- Tell other Doctors, Pharmacists and health care providers you are taking this medication
- Avoid additional aspirin or NSAIDs while you are taking this medication
- You will be given a prescription for a blood test at your 2 week post operative visit if you are on Lovenox. This can be completed at the lab of your choice
- Prevent injury at home: use an electric razor for shaving, wear gloves when using knives or scissors, use a soft toothbrush and brush gently, wear shoes to protect your feet and avoid tight fitting clothing or elastic that pulls on the body.

### **Medication Refills:**

You need to plan for your refills as these medications need to be picked up in person or mailed to your home address. They are unable to be called into a pharmacy. <u>Please provide at least 48 hours notice before running out when you need refills. Please call before noon on Fridays.</u>

### **Physical Therapy:**

Physical therapy should be started 2-3 days after surgery. It is your responsibility to set up these appointments prior to surgery at a physical therapy site that is convenient for you. We will provide you with a copy of a hip preservation physical therapy protocol to give to your physical therapist.

Until physical therapy begins please complete the following:

- Pendulum exercises and other exercises demonstrated by the Orthopedic One Physical Therapist prior to surgery.
- If you rent a Game Ready (not covered by insurances at this time) please use setting 2.

### **Wound Care at Home**

### **Supplies for Dressing Changes**

Absorbent dressing
Non-stick gauze pad
Medical Tape (choose paper tape if you have an adhesive allergy)
Water proof bandage
Band aids

### **How to Change the Dressing**

- 1. Gently remove the clear tape, white dressing and yellow absorbent squares that cover the incisions
- 2. If the incisions are continuing to drain, put on a new absorbent dressing. Place non-stick gauze pads over the top of the dressing and hold in place using medical tape or water proof bandage
- 3. If the incisions are no longer draining, you may remove the dressing. Band aids may be used as needed to help keep the sutures from rubbing on your clothes.

### **About Wound Care**

To protect your healing wound you need to:

- Change your dressing for the first time 24 hours after surgery
- Change your dressing every day until it stops draining. If the incision is draining through the bandage, you may need to change it more frequently. Our goal is to keep the healing skin clean and dry
- Do not put anything on the healing incisions including lotions, moisturizer, vitamin oils, powder or Neosporin, unless directed by your Doctor.

# **Hip Safety at Home**

### How to protect your hip and prevent injury after surgery

### **Activity**

- Your hip may have a limited range of motion. Do not turn your leg or foot on the surgical side beyond what you have been instructed by your Doctor of Physical Therapist.
- No pushing, pulling, lifting greater than 10lb for the first 6 weeks.
- Avoid sitting for longer than 20 minutes at a time for the first 6 weeks. Change position or move around for a few minutes before sitting again.
- Do your initial physical therapy exercises as instructed by the Orthopedic One Physical Therapist.
- Go to all of your physical therapy appointments as scheduled.
- If you are using a Game Ready machine, please use setting 2 on the unit.

### **Driving**

- You may drive an automatic vehicle when you are off all pain medications and off your crutches. If you had surgery on your right leg or are driving a standard vehicle, you will need to wait until you strength equals the non-operative leg.
- If you sit for driving or traveling for greater than 1 hour, take a break.
   Get out of the car and move around for a few minutes before resuming travel.

# Follow Up Visits and Plan of Care

To check on your progress and healing after surgery, plan on the following post operative appointments:

### 2 Week post operative visit

- Tiffany Greene, Physician Assistant, to remove sutures and do a wound check
- Physical Therapist at Orthopedic One, this will be scheduled for you

### 6 Week post operative visit

- X-ray appointment to check bone healing after surgery
- Dr. Ellis for progress and healing check
- Physical Therapist at Orthopedic One, this will be scheduled for you

### 3-4 Months post operative visit

- As needed with Tiffany Greene or Dr. Ellis
- As needed with Physical Therapist at Orthopedic One

### 6 Months post operative visit

- As needed with Tiffany Greene or Dr. Ellis
- As needed with Physical Therapist at Orthopedic One

### 1 year post operative visit

- As needed with Tiffany Greene or Dr. Ellis
- As needed with Physical Therapist at Orthopedic One

<u>Please call our office if you are unable to make your scheduled</u> <u>appointments or if you have questions or concerns between visits</u>

# **Visit Record and Notes**

Use this page as needed to help keep track of appointments

Visit Type (Dr. or PT)	Date	Time	Location	Notes

# **Visit Record and Notes**

# Use this page as needed to help keep track of appointments

Visit Type (Dr. or PT)	Date	Time	Location	Notes

### When to Call the Doctor

# If you have any of these signs please call our office at 614-827-8700 If it is after normal business hours you will be transferred to a call center

- Fever and/or chills
- Severe headache or migraine
- Upset stomach or nausea
- Loss of function of your leg
- Signs of infection
  - o Green or yellow drainage from the wound
  - o Redness or streaking away from the wound
  - Increase in swelling
  - o Increase in pain
  - o Odor from the wound
- Signs of blood clots
  - Tender, swollen or red areas that are warm to the touch in the calf or leg
  - o Skin that looks pale, blue or cold to the touch
  - o Pain in the calf that does not resolve with rest
  - o Shortness of breath or chest pain
  - Note: if you have signs of a blood clot do not massage or exercise the leg
- Bleeding Problems
- Any other sign that causes concern or if you have questions

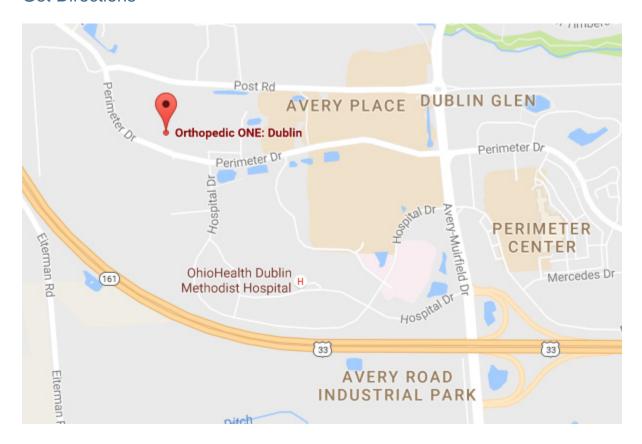
# **Driving Directions to:**

# Orthopedic One, Dublin Office

### **Orthopedic One**

6840 Perimeter Dr. Dublin, OH 43016

### **Get Directions**



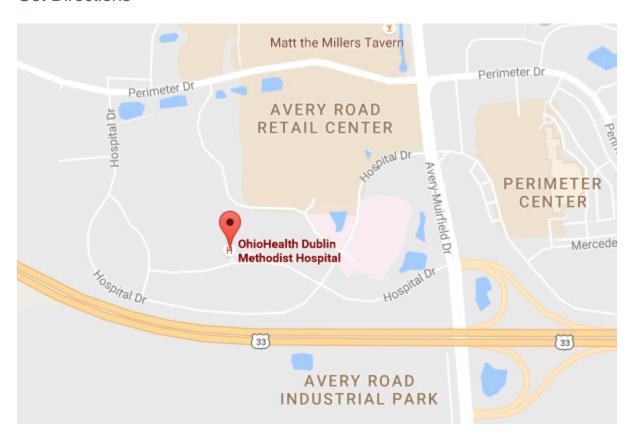
# **Driving Directions to:**

# Dublin Methodist Hospital

### **OhioHealth Dublin Methodist Hospital**

7500 Hospital Drive (formerly part of Perimeter Loop Road) Dublin, Ohio 43016 Phone: (614) 544-8000

### **Get Directions**



## **Parking**

Dublin Methodist offers surface parking adjacent to the main and emergency entrances of the hospital for patients, family and visitors.

There are no fees for parking at Dublin Methodist. Security officers are on duty at all times to assist you with safety and security concerns.

These officers can also help if you have been locked out of your car, need a jump-start or need an escort to your car.

Handicapped parking is available in all parking areas. If no handicap spaces are available, ask for assistance from security officers or hospital staff.

When you arrive at Dublin Methodist, you will be welcomed in the main lobby by a staff member who will help you register, provide directions or escort you to your destination. To expedite registration, convenient kiosks are located in the lobby and are available.

# **Driving Directions to:**

# Ohio Orthopedic Surgical Institute

### **Orthopedic One/Ohio Orthopedic Surgical Institute**

4605 Sawmill Road Upper Arlington, OH 43220

### **Get Directions**

