

Dr. Allen Posterior Total Hip Arthroplasty Post-Op Protocol

Phase I: Inpatient (1-2 days)

- Typical post-op stay in the hospital is 1-2 days
- Depending on your progress you may discharge to home or a TCU
- You can bear full weight on your leg and walk immediately after surgery
- Physical therapy &/or nursing will have you walking the day of surgery
- A waterproof dressing is placed on the hip at the end of surgery
 - You can shower post-op day 2-3 (occasionally before your discharge)
 - No soaking the wound for 4-6 weeks
- Aggressive cryotherapy (ice or cooling packs)
 - Several times a day for the first few months
 - This will help with pain control and swelling
- A multi-modal pain regimen will be used to control your pain
 - Scheduled NSAIDs & Tylenol
 - Muscle relaxers
 - Opioids for break through pain
- Hip replacement and the subsequent therapy can be painful
- Posterior approach requires lifetime motion restrictions
 - No hip flexion past 90°
 - No internal rotation
 - No crossing leg over midline
 - Avoid deep seating positions (low toilet) x3 months



- Adequate pain control in order to complete the exercises is crucial
- Aspirin 81mg twice daily for DVT prophylaxis (30 days total)
- Inpatient PT prior to discharge
 - Safely transfer in and out of bed/chair
 - Ambulate 50-100 feet
- Safely ascend and descend stairs
- Independently complete a SLR

Phase II: Immediate Post-Op (Discharge-2 weeks)

- First post-op visit at 2 weeks
 - Sutures will be removed at this visit if applicable
- Strengthening
 - Quad sets, 4-way SLRs, heel slides, clamshells, hamstring sets
 - Closed chain exercises: mini-squats, leg press
- Gait training
 - Treadmill, walking, stationary bike, step ups, retro-treadmill
- Aggressive cryotherapy modalities for pain and swelling
- Typically, 1 refill of post-op narcotic pain medicine is given if needed
 - Additional refills and may be a different, less sedating narcotic

Phase III: Early Post-Op (2-6 weeks)

- Second post-op visit at 6 weeks
- Gait training
 - Wean from assistive devices if able

-Strengthening

-Advance with repetitions and weight

-Proprioception

-Achieve independence with all self cares and ADLs

-Aspirin 81mg twice daily for DVT prophylaxis (30 days total)

Phase IV: Late Post-Op (6-12 weeks)

-Third post-op visit at 12 weeks

-Normal gait

-Cardio

-Swimming, biking, stair climber

-Continue strengthening, balance, and function activities

Phase V: Return to Function (12+ weeks)

-Return to normal function is between 2-4 months

-Returning to work

-Desk work can often be resumed around week 6

-Physically demanding work may take 10-12 weeks before you are ready

-Annual check-ups on anniversary of your surgery

-Lifetime dental antibiotic prophylaxis recommended