

Physiotherapy Department

Exercises for Patients Undergoing Total Hip Replacement

Following your surgery

Hip Precautions

Movements to avoid for **12 weeks** following your Hip Replacement Surgery. These may vary depending on the type of operation and therefore you should seek advice from the Ward staff on your return from Theatre.

- **Do not** cross your operated leg beyond your midline.
- **Do not** bend your hip beyond 90 degrees in a sitting position.
- **Avoid** twisting and turning on your operated leg.

Swelling

The early exercises and mobilisation of the hip will cause some discomfort and swelling. This is normal as the healing process is occurring.

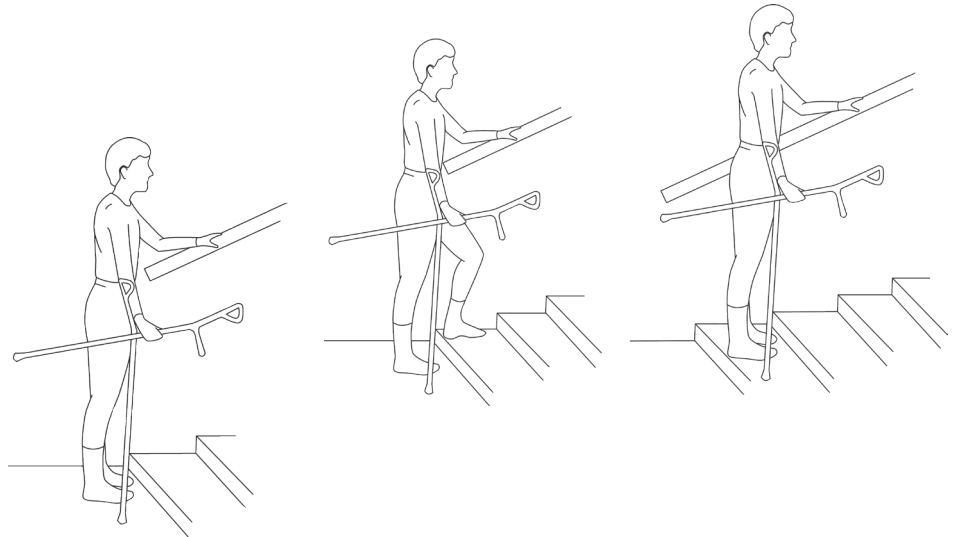
You can reduce swelling by elevating the leg above the level of the heart and gravity will assist with draining excess fluid. This position also encourages efficient blood flow in and out of the leg.

It is strongly recommended that leg elevation is performed between **40 and 60 minutes at least 3 times per day**. This can be performed more frequently if necessary. Be mindful of your **hip precautions**.

Going up stairs

GOOD LEG UP FIRST

Followed by stick or elbow crutch.
If handrail present use one rail and one stick/crutch

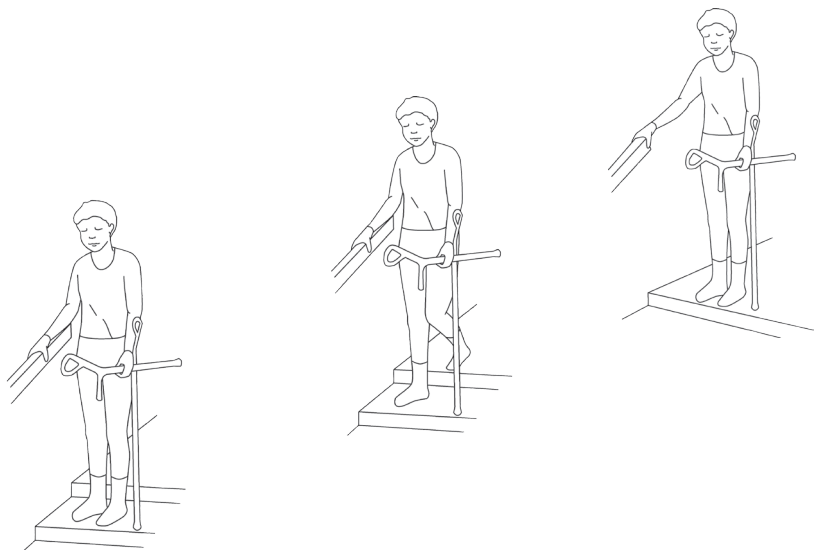


Going down stairs

Stick or crutch **DOWN FIRST**

BAD LEG DOWN

If hand rail present use one rail and one stick/crutch



Car Transfers

- You must be in the front passenger seat at all times. **Avoid** sitting in the rear of the car.
- Push the seat back to optimise leg room.
- Recline the seat and apply a cushion if necessary to avoid breaking your hip precautions.
- A plastic bag on the seat may also help when sliding into a comfortable position.
- Place your operated leg forwards and sit on the seat with your back facing the inside of the car.
- Lean back a little to avoid breaking your hip precautions.
- Lift both legs into the car together and safely slide around into a comfortable position.
- For longer journeys we advise regular rest stops outside of the car to prevent stiffening of the hip joint.

Driving

We recommend seeking further advice from your consultant at your 6 weeks post-surgery review to discuss a return to driving. **Avoid** driving until you have discussed this at the review.

Exercise

The Physiotherapy Team will show you how to perform the exercises in this booklet.

Groups A to C will be performed during admission and Groups D and E will be performed in the community on discharge.

It is in your best interests to continue with these exercises even when the Physiotherapy team are not present. This will maximise the outcome of your recovery. As you have chosen to have your hip replaced we expect that you cooperate fully with the exercises in this booklet.

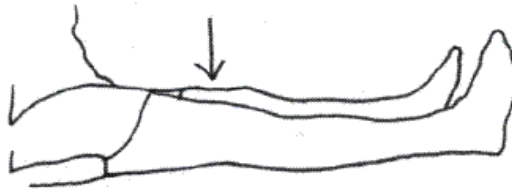
You should perform these exercises 3 times a day – hold for 3 seconds – 5 repetitions.

If you are unable to perform these exercises due to pain please inform a member of staff.

Group A - Bed Exercises

1. Static Quads

Tighten thigh muscles to
flatten knee

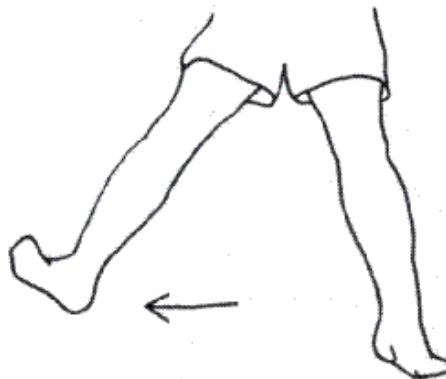


2. Supine Heel Slide

Slide heel back and forward.
Do not flex hip more
than 90 degrees



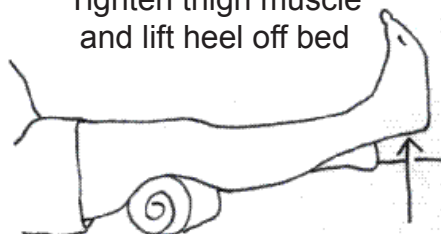
3. Supine Abduction



Slide heel to side and back

4. Inner Range Quads

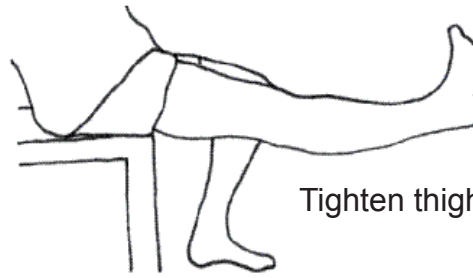
Tighten thigh muscle
and lift heel off bed



Progression: Keep thigh muscle tight and lift whole leg off roll.

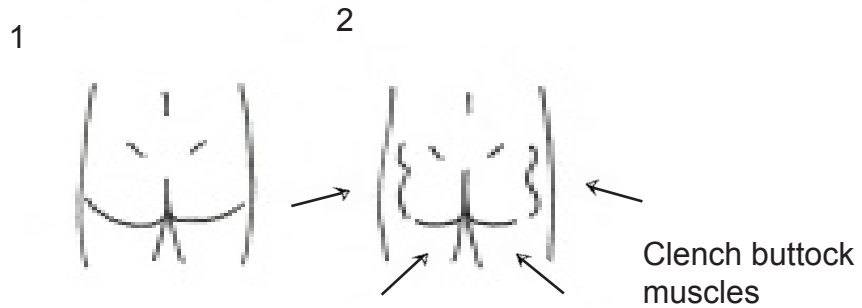
Group B - Chair Exercises

1. Through Range Quads



Tighten thigh muscle and straighten

2. Static Gluts



Clench buttock muscles

Group C - Standing Exercises

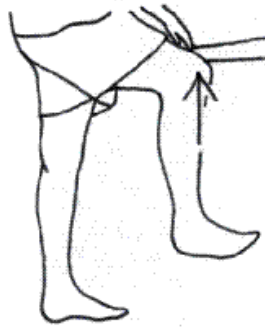
1. Standing Hip Abduction



Clench buttock muscle and take leg sideways

Progression: Do on both legs, increase time held

2. Standing Hip Flexion



Lift knee up making sure you adhere to your hip precautions

Progression: Do on both legs, increase time held

3. Standing Hip Extension



Clench buttock muscle and take leg backwards

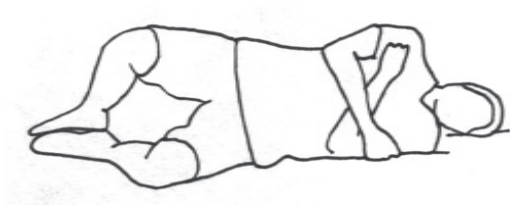
4. Standing Side Bend



Lean over sideways keeping your back straight until you feel a stretch in your back.
Do both sides.

Group D – Advanced Bed Exercises

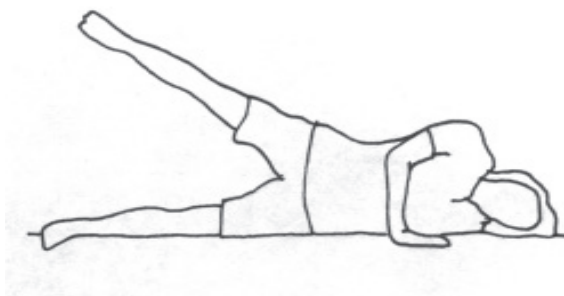
1. Clam - Lie on unoperated side



Clench buttocks.
Keep heels together.
Lift operated knee.

2. Hip Abduction in Side Lying

Lie on **unoperated** side **do not** let operated leg fall past mid line of body.



Clench buttocks.
Lift Operated leg.

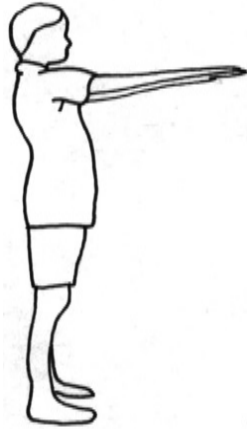
3. Bridging



Clench buttocks.
Dig feet into bed.
Lift hips up off bed.

Group E – Advanced Standing Exercises

1. Supported Squats



Squeeze buttocks



Sit down **slowly** into a perched position. Leave a chair behind for support.

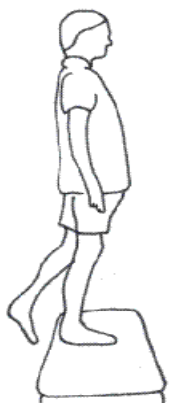
Stand **slowly**

Progression: Do squats onto lower surface e.g. bed, chair.

2. Slow Step Up onto small step e.g. book



Lead with operated leg



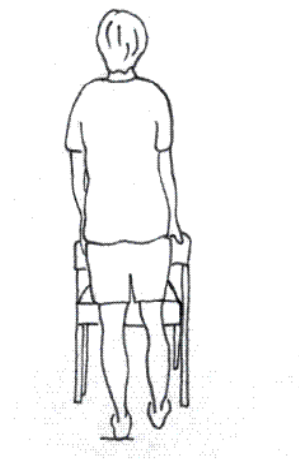
Step up **slowly**



Step down **slowly**

Progression: Raise height of step e.g. stair step/door step.

3. Single Leg Stand



Stand on operated leg.
Lift good leg off the floor.
Squeeze buttocks.
Keep hips level.



If you have any comments about this leaflet or the service you have received you can contact :

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Calderdale Royal Hospital
Tel: 01422 224198

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Calderdale Royal Hospital
Tel: 01422 357171 ext 3554
www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"