

For instructional videos, please visit [sportsrehab.ucsf.edu](https://sportsrehab.ucsf.edu)

**Prior to surgery:**

**Medications:** Please fill your medication prescriptions prior to your surgery. Both narcotic and non-narcotic medications will be e-prescribed to your pharmacy. Check your After Visit Summary (AVS) for the location of your e-prescribed prescriptions.

**Temporary Handicap placard:** If you received a DMV form at your pre-operative visit, take this form to the DMV to receive your temporary placard. Do not mail it in as it takes a few weeks to process.

**Physical Therapy:** Contact a physical therapist as soon as possible to get an appointment scheduled. **You want to begin physical therapy approximately 7-10 days following your surgery.** You will receive a physical therapy prescription at your pre-operative visit or at your first post-operative visit.

**Anti-bacterial body wash:** Please use an anti-bacterial soap in place of your normal body wash during your last shower- either the night before or the morning of your surgery. We recommend Hibiclens or anti-bacterial Dial soap. Wash your **ENTIRE** body with the soap and rinse off. Do not use on your face, hair, or genital area as it may cause dry skin.

**Food/Water:** Do not eat any food or drink any fluids, including water, after 12am the night prior to your surgery. Patients who do not follow this may experience a delayed or even cancelled surgery.

**Attire:** Wear loose comfortable clothing to the surgery center. We recommend loose sweats, athletic pants, or shorts that can easily slide over your leg.

**Bathing Chair:** When you are cleared to shower, we recommend you shower while seated on a stool or lawn chair. This helps decrease the risk of falling when in the bathtub/shower. Insurance will not cover the purchase of a shower chair.

**MyChart:** If you have not already signed up for your UCSF MyChart, please refer to the back of your After Visit Summary (AVS) to register. This is an online portal that will enable you to access some of your medical records, request prescription refills, check appointment times and most importantly it allows you to send and receive messages from your treating physician or surgeon.

**On day of surgery:**

**Ice:** Use bag of ice, ice pack, or frozen peas. Place over bandaged hip for 20 minutes every 1-2 hours to decrease pain and inflammation.

**Pain Medication:** Upon discharge from the surgery center, return home, eat a light meal and begin taking your pain medicine. Start by taking the Naproxen (or Ibuprofen). If this is not effective in controlling your pain, then take the narcotic pain medicine (Hydrocodone) as prescribed. Wean off the narcotic medication as tolerated (most patients take narcotic pain medicine for 1-2 days after surgery or none at all). Continue the naproxen for 2 weeks unless you have been advised to not take this by your surgeon. Avoid taking Tylenol while you are taking the narcotic medication as they both contain acetaminophen, which can be dangerous in high amounts.



**Eating:** Eat bland or liquid foods following surgery. The narcotic medication and/or the anesthesia medications may cause nausea or vomiting. Progress to your normal diet slowly over the 24 hours following surgery. Take narcotic and anti-inflammatory medications with food whenever possible.

**Leg elevation:** It is normal to experience some swelling in your hip/leg. To decrease this, you can elevate your leg with a pillow.

**Post-op Day 1 and until 1<sup>st</sup> Post-op visit:**

**Surgical Dressing:** Keep the dressing on the surgical site until your first post-operative visit – usually about 5-9 days after your surgery. Do not remove the dressing or put ointment on your incision as this may increase the risk of post-operative infection.

**Bathing:** You may sponge bath following surgery but do not shower or get the surgical site wet until your bandages are removed at your first post-operative appointment. This will help decrease the risk of post-operative infection. Once your dressings are removed you will be able to shower and get the incision wet. Do not use a hot tub, swim in a pool or the ocean until instructed by your surgeon.

**Crutches:** Continue to use the crutches until instructed by your doctor (typically 6 weeks). You will be **FLAT-FOOT PARTIAL WEIGHT BEARING** following your surgery with the crutches. If you are uncomfortable ambulating up or down stairs, go up or down on your rear end.

**Brace:** Continue to wear the leg brace until instructed by your doctor (typically 6 weeks). When **standing and moving with crutches**, the brace should be locked straight. When **sitting down**, you can unlock the brace to bend the knee up to 90 degrees.

**Driving:** Do not drive until instructed to do so by your surgeon and you have discontinued the narcotic pain medication.

**Post-Operative Exercises:** Begin the post-operative exercises the day after surgery. Perform them at least 3 times per day and continue until you start physical therapy. Visit [sportsrehab.ucsf.edu](http://sportsrehab.ucsf.edu) to review videos of these exercises.

**Please call the office if you have any of the following:**

Fever greater than 101°F or 38°C  
Continuing drainage from the wound/dressing  
Unrelenting pain  
Excessive nausea/vomiting due to pain medication  
Any other worrisome conditions

If you have questions, feel free to call (415) 353-2808 or your Surgeon's Practice Assistant Mon- Fri 8:30-4:30pm.

*For assistance after business hours or on weekends call the office at (415) 353-7566 and the answering service will assist you.*



**Post-Operative Exercises: Start the day after surgery**

Perform these exercises 3 times per day:

1. **Quad Sets.** Tighten your quad muscles and hold for 5 seconds. Perform 3 sets of 10 repetitions. When you tighten your quad muscles, it will feel like your knee is being pushed into the ground and straightening.



2. **Calf Pumps.** Move both ankles up and down, Perform 10 repetitions every 1-2 hour until you are up and around regularly. This encourages blood flow in the lower legs and helps reduce the risk of blood clots (DVT).

