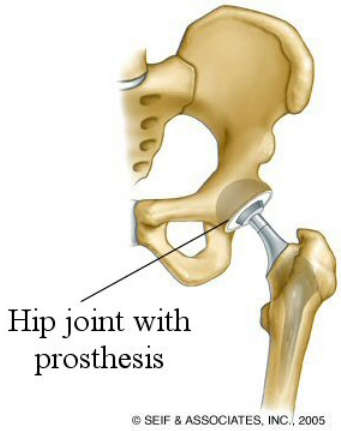
Hip Replacement, Total

In total hip replacement, the damaged hip is replaced with an artificial hip joint (*prosthesis*). The purpose of this surgery is to reduce pain and improve your range of motion. It is one of the most successful joint replacement surgeries.



BEFORE THE PROCEDURE

- **Do not** eat or drink anything before the procedure as directed by your caregiver.
- You should be present 1 hour before your procedure or as directed by your caregiver. Check in at the admissions desk to fill out any necessary forms if you are not pre-registered. There may be consent forms or other paperwork to sign before the procedure.

LET YOUR CAREGIVER KNOW ABOUT:

- Allergies.
- Medications taken, including herbs, eyedrops, over-the-counter medications, and creams.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics.
- Family history of anesthetic problems.
- Possibility of pregnancy, if this applies.
- History of blood clots (*thrombophlebitis*).
- History of bleeding or blood problems.
- Previous surgery.
- Other health problems.

PROCEDURE

An intravenous (IV) line for giving fluids will be started. You will be given medications and gas to make you sleep (*anesthetic*), or you will be given medications through a needle in your back to make you numb from the waist down. Your surgeon will take out any damaged cartilage and bone. He or she will then put in new metal, plastic, or ceramic joint surfaces to restore alignment and function to your hip.

AFTER THE PROCEDURE

After the procedure, you will be taken to the recovery area where a nurse will watch and check your progress. You may have a long, narrow tube (*catheter*) in your bladder after surgery. The catheter helps you empty your bladder (*pass your urine*). Once you are awake, stable, and taking fluids well, you will be returned to your room. You will receive physical therapy until you are doing well and your caregiver feels it is safe for you to go home. If you do not have help at home, you may need to go to an extended care facility for 5 to 14 days after the procedure.

HOME CARE INSTRUCTIONS

- You may resume normal diet and activities as directed.
- Change bandages (*dressings*) if needed or as directed.
- Only take over-the-counter or prescription medications for pain, discomfort, or fever as directed by your caregiver.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop swelling of your calf or leg.
- You have redness, swelling, or increasing pain in the wound.
- You notice fluid (*pus*) or unusual drainage coming from the wound.
- You have an oral temperature above 102° F (38.9° C), not controlled by medicine.
- You notice a bad smell coming from the wound or bandage.
- There is a breaking open of the wound (*edges not staying together*) after stitches (*sutures*) or staples have been removed.
- You are getting worse or not improving.

- You develop chest pain or shortness of breath.
- You have increasing pain with activity.
- You have any other questions or concerns.

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