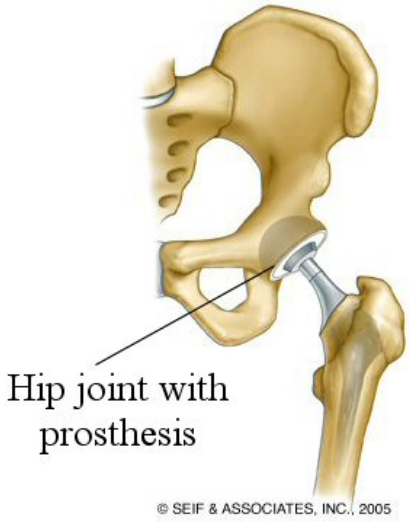
Hip Dislocation (Artificial)

The dislocation of an artificial hip is when the ball of the hip has slipped out of its socket. Many of these dislocations can be treated by simply putting the ball back in the socket. This can often be done with a set of mechanical parts that move bones (*traction*) and moving the leg around (*manipulation*). When the artificial hip is put back into place with manipulation, a brace or cast may be needed. Your caregiver will decide if a brace or cast is necessary. Your caregiver will decide amount of time required for this. A brace or cast will help you heal completely so the hip will be less likely to dislocate again.



When the hip cannot be relocated with manipulation, surgery may be needed.

BEFORE HAVING ANESTHESIA, LET YOUR CAREGIVERS KNOW ABOUT THE FOLLOWING:

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

BEFORE AND AFTER YOUR HIP RELOCATION

Before your hip is put back in place, an IV (intravenous line for giving fluids) may be started. You may be given an anesthetic in your back to make you numb from the waist down (a spinal anesthetic). After surgery you will be taken to the recovery area. A nurse will monitor your progress. You will be returned to your room when you are awake and without problems. You will receive physical therapy until you are moving around by yourself and your caregiver feels it is safe for you to be released.

HOME CARE INSTRUCTIONS

- You may resume a normal diet and activities as directed or allowed.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Use crutches as instructed. When you are allowed full weight bearing, begin slowly. Reduce the activity if it is causing pain or discomfort.
- Apply ice to the injured hip for 15 to 20 minutes four times per day while awake for 2 days. Put the ice in a plastic bag and place a thin towel between the bag of ice and your cast.
- Do range of motion exercises if instructed by your caregiver.
- If you have been given a brace wear it as instructed.

SEEK MEDICAL CARE IF:

- There is swelling or tenderness of your calf or leg.
- You develop shortness of breath or chest pain.
- You have increasing pain or discomfort in your hip which is not relieved with medication.

- You notice increasing swelling around the hip.
- You have any numbness or tingling in your hip or leg.
- You are not improving, or are getting worse.
- You have any other questions or concerns.
- If your hip re-dislocates

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop a rash.
- You have difficulty breathing or develop shortness of breath.
- You develop any reaction or side effects to medicines given.
- You develop chest pain.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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