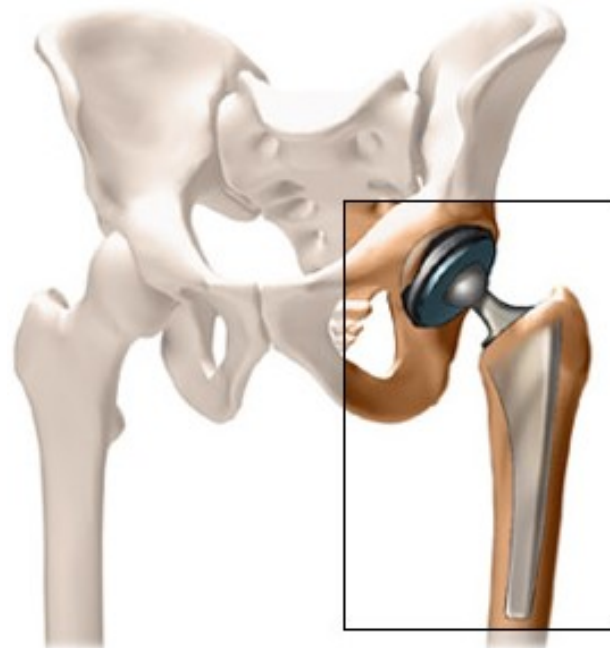


Total Hip Replacement Exercise Booklet

Restricted Weight Bearing with Hip Precautions



Patient Name: _____

Surgeon: _____

Date of Surgery: _____

Physiotherapist: _____

- (416) 967-8633 (3rd floor)
- (416) 967-8637 (6th floor)
- (416) 967-8520 (7th floor)



Sunnybrook

HOLLAND BONE AND JOINT PROGRAM

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Hip Precautions

The following precautions are to be followed **at all times** until your follow-up visit (6-8 weeks), unless otherwise instructed by your surgeon or Advanced Practice Physiotherapist/Occupational Therapist (APP/OT). At your follow-up visit, you will be advised whether you can discontinue your hip precautions.



DO NOT **BEND**
BEYOND 90°
AT THE HIP



DO NOT **TWIST**
AT THE WAIST



DO NOT **CROSS**
YOUR LEGS

Walking and Early Activity

It is important when you begin to walk that you know your “*weight bearing*” status.

Your physiotherapist will tell you the amount of weight allowed through your operated leg based on your surgeons orders. You should continue this amount of weight until your follow-up visit.

- Non-Weight Bearing** – Your operated leg must be OFF the floor when walking.
- Touch Weight Bearing** – The foot of your operated leg touches the floor, but almost all your weight is taken through the arms (walker/ crutches). To help, consider “If you are walking on soft earth there would be no foot print on it.”
- Partial Weight Bearing** – You are allowed up to 50% of your weight on your operated leg.

Walking with a Walker:

Walk halfway into the walker with your *operated* leg first, followed by your *non-operated* leg. Remain standing up tall and straight. Keep your eyes up.

Sequence: **1. Walker** ⇨ **2. Operated Leg** ⇨ **3. Non-operated leg**

Sit to Stand:

- When rising from a seated position you must *extend your operated leg* out in front of you
- Put all of the weight through your arms and non-operated leg as you push up into a standing position. **You must NOT put weight through your operated leg when rising from a chair**

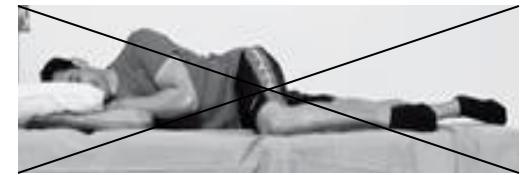


Caring for your new hip

In order to maintain your hip precautions you will need to modify how you move with daily activities. An Occupational Therapist will be teaching you how to do so after your surgery. Here are a few examples:

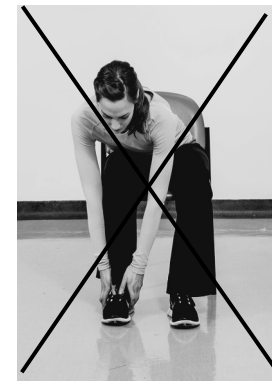
Sleeping:

- You are required to sleep with pillow(s) between your legs until you have your 6-8 week follow-up and your hip precautions have been removed
- You may sleep on your back or on either side with pillow(s) between your thighs, but not on your stomach



Sitting:

- Avoid low, soft sofas and chairs, this includes Lazy Boy type recliner chairs. Ideally, the best chair for you is a high, firm chair with armrests. A dining room chair is an example of a good chair. A carry cushion may be used to make getting in and out of the chair easier. Talk to your Occupational Therapist about adjusting your chair and bed to the appropriate height.
- Most toilets are too low to comfortably sit and rise from after your surgery. **Do not sit in a position where your knees are higher than your hips.** A commode or raised toilet seat may be suggested by your Occupational Therapist.



Dressing:

- Dressing your lower body may be a challenge after surgery. A reacher, long-handled shoe horn and sock aid will help you to dress yourself
- Your Occupational Therapist will show you other assistive devices to try, if needed

Reduce Pain and Swelling

Ice and Heat:

- Ice can be applied to your operated leg for **10-15 minutes every hour**, as needed. You may find this most helpful after exercise. When resting, **lie flat**, apply ice where you have pain, elevate your leg above the level of your heart (do not bend your hip past 90 degrees). Move your ankles up and down. This can help reduce swelling, pressure and pain
- Beginning **one week** after surgery, you may apply heat for **10-15 minutes** before you exercise. **Do not** apply heat directly on the incision



Pain Medication:

- Pain medication should be taken as prescribed
- It is important that your pain is controlled so that you are able to complete 2-3 exercise sessions each day and gradually progress your walking
- If you have pain when doing your exercises, take your pain medication before starting your exercises. The goal is to be 4/10 or lower (low to moderate pain) on the 0-10 pain scale (0= no pain, 10= pain as bad as it can be)
- For more information about pain management visit www.sunnybrook.ca/hipkneepain

Scar Sensitivity:

- Scar sensitivity is normal and may make it uncomfortable to lie on your operated side. To decrease sensitivity, gradually increase the amount of time you spend lying on your operated side with a pillow between your legs (see Sleeping section on page 3)

How To Manage Stairs

While you are in hospital, your physiotherapist will teach you how to climb stairs

****Remember - A handrail will make things easier and safer for you. Place one hand on the railing, and hold both crutches on the other side of your body**

To go up the stairs:

- Keep the crutches with the operated leg
- Start close to the bottom step, and push down through your hands
- Keeping the weight on your hands, step up with your ***non-operated*** leg first.
- Step up to the same step with the ***operated leg and crutches***, putting only the allowed amount of weight through your ***operated leg***
Check your balance before you proceed to the next step

To go down the stairs:

- Start at the edge of the step
- Bring the crutches and your ***operated*** leg down to the next step
- Use upper body strength to support your weight and keep you balanced
- Step down to the same step with the ***non-operated*** leg, putting only the allowed amount of weight through your ***operated*** leg
Check your balance before you proceed to the next step

****If no handrail is available, use one crutch on each side of your body. Follow the same sequence as above**



Post-operative Exercises

Your exercises are a very important part of your recovery

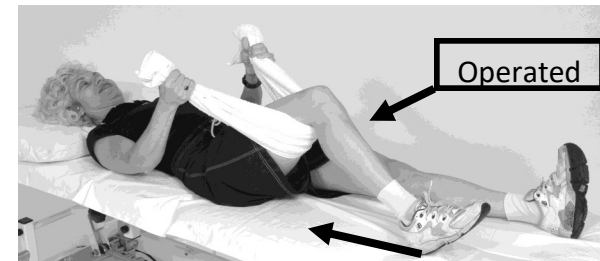
Range of Motion

- Hold each exercise for 5 seconds, repeat 10-15 times
- Repeat 2-3 times per day

1. Hip Bending

- With the help of a towel/sheet bend your knee and bring your **operated** leg toward your chest, keeping your other leg flat to the bed

Do not go beyond a 90 degree bend at your operated hip
Repeat on both legs



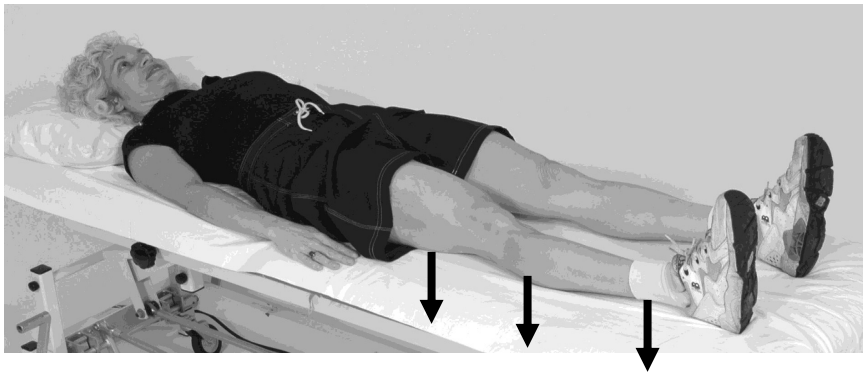
2. Hip Abduction

- Tighten thigh muscles and slide the **operated** leg sideways in bed with the help of a sheet if needed
- Keep your kneecap and toes pointing up towards the ceiling
- Do not lift your leg off the bed

Strengthening Exercises

- Perform slow and controlled movements, no need to hold the position
- Repeat each exercise 10-15 times, 2-3 times per day

3. Straight Leg Push Down



- Press your whole **operated** leg into the bed. Feel the muscles in your buttock and operated leg tighten

4. Quads Strengthening Over a Roll

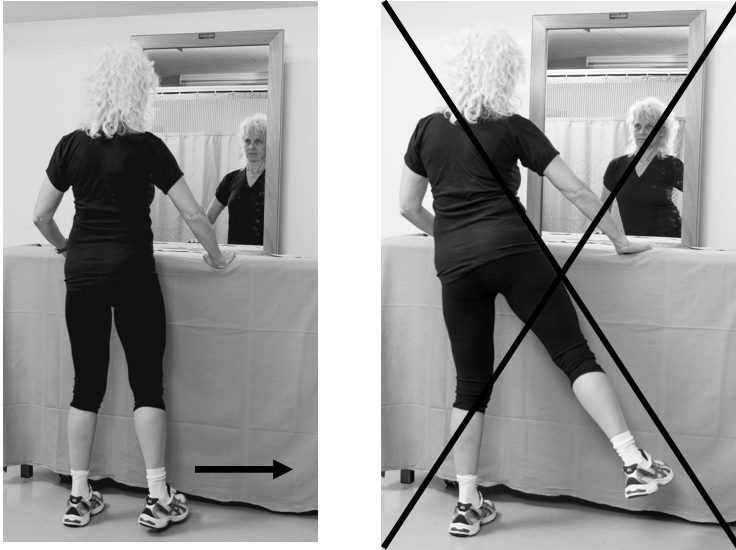


- With a towel roll under the knee of the **operated** leg, lift your heel off the bed. Make sure that your thigh does not come off

Strengthening Exercises Cont.

- Perform slow and controlled movements, no need to hold the position
- Repeat each exercise 10-15 times, 2-3 times per day

5. Standing Hip Abduction



- Hold onto a counter for balance
- Move your **operated** leg out to the side while standing tall
- Keep your hips level and upper body straight
- Do not hike your hip. Try to keep your foot **slightly off the floor**
- **Keep your toes pointing forward**

6. Standing Hip Bending

In standing with support for balance, bend your **operated** hip by bringing your knee up towards your chest
**** Do not bend more than 90 degrees**



7. Hamstring (Back of Thigh) Curls



- Hold onto a counter or table for balance
- Bend your knee so that the heel of your **operated** leg moves towards your buttock
- Keep your thighs level with each other and keep your knee pointed to the floor

Post-operative Hip Replacement Education Session

Your Post-operative Hip Replacement Education Session is on: _____ at _____

Date

Time

The session is held at the Holland Centre in Rehab Services, Basement Level

Please bring the following items with you:

- This booklet
- Your health card and Sunnybrook hospital card
- Reading glasses, if needed
- Wear comfortable clothing
- Orange/coral referral, if provided by your surgeon

***Please remember Sunnybrook is a scent free hospital**

When you attend the session a Physiotherapist will teach you the “Progression Exercises” that are appropriate for you

* Please call **416-967-8626** as soon as possible if you have not been booked into a session or need to change your appointment

After your 6-8 week follow-up

- The following section of the book only applies **after** you have had your first follow-up appointment with your surgeon or Advanced Practice Physiotherapist/Occupational Therapist (APP/OT)
- This section contains tips about safely returning to your daily activities and progression exercises. Note, if advice from your surgeon or APP/OT is different from the information provided in this booklet, please follow the advice of your surgeon or APP/OT
- When you attend the Post-operative Hip Replacement Education Session we will review the following information and teach you the “Progression Exercises” that are appropriate for you

Remember: Exercise is Medicine!



After Your 6-8 Week Follow-Up (Cont'd)

Weight Bearing Status

- You have not been allowed to put full weight through your operated leg during the first 6 to 8 weeks after your surgery. At your follow-up visit your surgeon/APP will decide if you can now put your full weight on the operated leg
- It is important to realize that the muscles in your leg will be weaker. You will not be ready to immediately get rid of your crutches or walker, and you will therefore need to take time getting used to this change and slowly increase the amount of weight you are putting through your leg. This can take anywhere from 10 days to 1 month

Exercise Progressions

- The following section of exercises are more challenging and only intended for use **AFTER** your weight-bearing restrictions and hip precautions have been lifted. This normally occurs 6-8 weeks after your surgery
- It is recommended that the following exercises be taught by a registered physiotherapist. These exercises are designed to improve your hip range of motion, strength, balance and endurance

****Note:** It is important that you check at your first follow-up visit to ensure that you are allowed to begin the following “Progression Exercises”

How do I take care of my new hip after the 6-8 week follow-up?

Hip Precautions:

- It is now safe to bend your hip past 90°, but **do not force it!**
- Your hip may feel stiff. Gradually increase your hip bending by doing the exercises you will be taught
- You may now cross your legs, at the ankles or knees if comfortable
- Do not force your hip into any extreme position



Do I still need my hip cushion, raised toilet seat, shower bench, etc.?

- None of the equipment is required, but many people still find some of this equipment helpful until they have improved strength, balance and mobility (e.g. if you are very tall or still quite stiff)
- For gardeners, or individuals that spend time in a kneeling position, there is a useful tool called a “kneeler”. This device makes kneeling more comfortable and has arms to help you get up and down



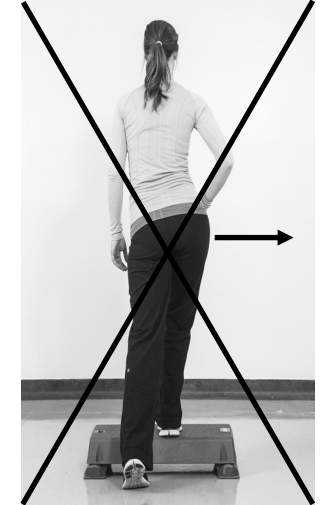
Kneeler

Progression of functional activities

Getting up or down from a chair: You no longer need to put your operated leg out in front of you when you are getting up or down from a chair, bed or toilet

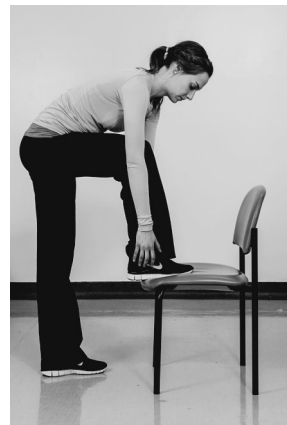
Climbing stairs: You can start climbing stairs normally when you feel strong enough. Use the railing and a cane if needed.

Note: make sure that when you step up on your operated leg, your hip does not drop to the side (see picture on the right)



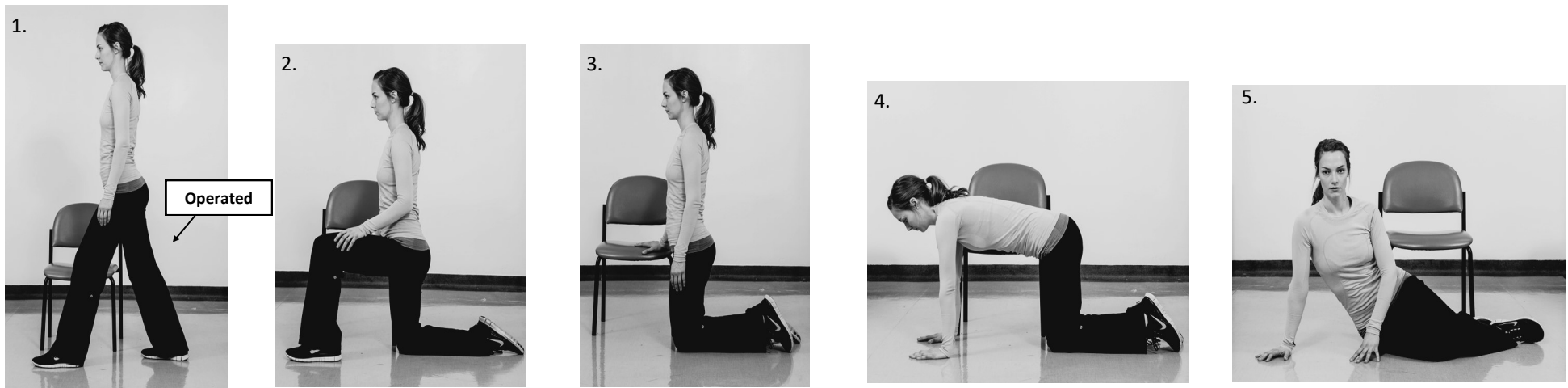
Sleeping: You are no longer required to use a pillow between your knees and you can lie on either side. If you wish, you may now resume sleeping on your stomach

Putting on shoes: Gradually work towards putting your shoes on without aids. Below are four examples of safe methods for putting on your shoes or socks. When bending down to your feet, **keep your knees apart**



Progression of functional activities

Getting up & down to the floor: Put your operated leg behind you. Follow the pictures below.



Once your hip precautions are removed it is okay to take a bath as long as your incision is fully healed and you can get up/down from the floor (as shown above). Placing a non-slip mat on the bottom of the tub will reduce the risk of slipping

Safe Lifting Tips

- Avoid heavy repetitive lifting (e.g. lifting moving boxes)
- If you must transport heavy objects, use a cart
- Avoid lifting objects that weigh more than 50 lbs or that you can not lift easily
- When lifting, bend with your knees, not with your back and hold the load close to your body, keeping a normal arch in your low back
- It is safest to lift an object that is between your knee and waist level. Consider setting up your kitchen/work areas so you can lift in the ideal range



Returning to Activities

This chart is meant as a general guideline, please always follow the advice of your surgeon or Advanced Practice Provider (APP). Ask your surgeon or APP if you want to return to an activity that is not listed

6-8 weeks (or when able to put your full weight on the operated leg and precautions are lifted)	3 months	May be allowed at 3-6 months (must discuss with your surgeon first)
Swimming -unless surgeon has said otherwise	Gardening	Downhill/Cross-country skiing
Increase walking endurance	Bowling/ Lawn bowling	Horseback riding
Golfing (putting and chipping only)	Curling	Canoeing/ Kayaking /Rowing*
Stationary bike (upright or recumbent)	Golfing	Yoga*
Elliptical/ Treadmill (Walking only)	Outdoor cycling	Hockey
Weight training –upper body, core strength	Dancing	Tennis/Pickleball (doubles)
Driving a car -unless surgeon has said otherwise	Weight training–lower body*	Skating/Snowshoeing
Tai Chi / Pilates*		

Note: With any exercise class your instructor should be aware of your surgery

* Avoid forceful repeated maximum bending of thigh to trunk. Stay within a comfortable range of motion for all activities (including sexual activities)

* If using the leg press, do not bend your hip more than 90 degrees. Start with a maximum of 25% of your body weight and progress slowly to a maximum of your full body weight. Only progress weight once comfortable with 3 sets of 15 reps

The following activities are generally not recommended after hip replacement: running, jogging, squash, racquetball, contact sports, sports where jumping is involved, heavy lifting (over 50 lbs)

Footwear

- It is not uncommon to feel like your legs are a different length following hip replacement. This may be the result of tight and/or weak muscles. You should allow 3-6 months for your body to adjust to your new hip. **DO NOT** add a shoe lift unless it has been suggested by your surgeon or advanced practice physiotherapist/occupational therapist
- Wait at least 3 months and speak to your surgeon before getting fitted for new orthotics. You may wear your old orthotics as long as they are worn in both shoes and one side is not built up more than the other, to provide a lift. If you are unsure, simply wear supportive footwear for the first 3 months post surgery

Safe Walking Tips

- For winter walking, Ice-O-Grips are stainless steel prongs that attach to your cane and can be flipped up while indoors
- Snow cleats are great for improving traction if you have to walk on snow and ice. For example: walking your dog in the park. Remember snow cleats need to be removed before going indoors
- Walk on well-lit paths that have been cleared of snow and ice
- Keep your hands out of your pockets (but off of your cell phone!). Ensure you hold onto handrails
- At home ensure clear, well lit hallways/paths to washroom



Active Lifestyle

- Minimize your risk of falling. Be extra careful until you regain strength, balance and coordination
- Be active. A healthy active lifestyle can help prolong the life of your new joint
- Canadian Physical Activity Guidelines recommend:
 - 150 minutes per week of moderate aerobic physical activity (sweating a little bit and breathing harder), in sessions of 10 minutes or more
 - Muscle and bone strengthening at least 2 times per week
 - More physical activity provides greater health benefits

Useful Websites

Get moving guide:

<http://whenithurtstomove.org>

Canadian physical activity guidelines:

<http://csep.ca/en/guidelines/links-to-csep-guidelines>



Exercise Instructions

Strengthening exercises:

- 3-4 times per week (**every other day**)
- Start with 1 set of 10-15 repetitions
- Progress gradually to 3 sets of 10-15 repetitions, take a 1-2 minute break between sets
- Think slow and controlled movements, no need to hold the position
- Move on to an exercise labeled “**progression**” when you can easily complete 3 sets of 10-15 repetitions
- **Repeat exercises on your other leg**

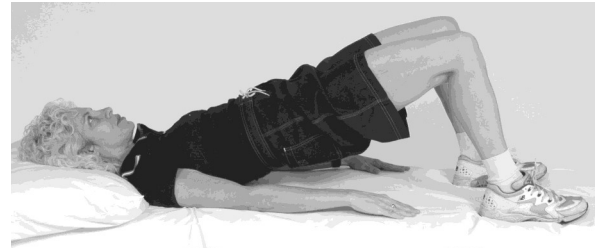
- It is normal for muscles to feel sore or even shaky when starting a new exercise
- **Joint pain** is not normal. Pain, unlike soreness, is an indicator that you may be overdoing it with your exercises. Rest for 1-2 days and then start exercising again slowly
- Gradually increase your activity level
- Walking **DOES NOT** take the place of your exercises
- Continue these strengthening exercises for at least **the first year after your surgery**

Strengthening Exercises

Please refer to page 18 for exercise instructions (including how many repetitions and how often)

8. Bridge

- Lying on your back, knees bent
- Squeeze buttocks
- Lift buttocks off the bed



Progression level 1:

- Lift buttocks off the bed with both feet on bed
- Once you are up, lift **non-operated** leg slightly off the bed
- Keep non-operated leg up as you lower buttocks back to the bed



operated leg

Progression level 2:

- Raise and lower buttocks with operated leg only on bed
- Try straightening your **non-operated** leg



operated leg

9. Clam Shell

- Lie on your **non-operated** side with your hips and knees slightly bent
- Keep your feet together
- Open your knees as much as you can **without letting your top hip roll backwards**



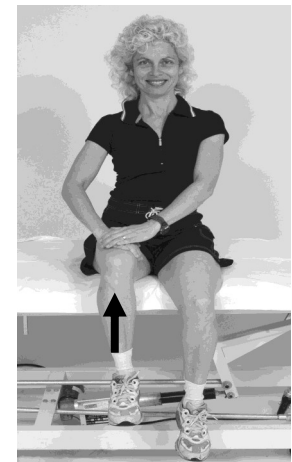
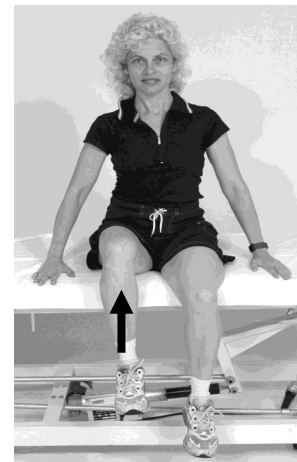
Note: if you are having difficulty opening your knees or preventing your hip from rolling then **push** your feet against a wall or headboard as you lift your top knee

Progression: tie a Theraband® around your lower thighs, just above your knees. You may want to start off with a light resistance Theraband® .

10. Hip Flexor Strengthening

- In sitting, lift your **operated** leg up so that your foot is off the floor
- Try to avoid leaning back

Progression: add resistance using your hands



11. Standing Hip Abduction



- Hold onto a counter for balance
- Move your **operated** leg out to the side while standing tall
- Keep your hips level and upper body straight
- Do not hike your hip. Try to keep your foot **slightly off the floor**
- Keep your toes pointing forward
- **Alternate legs**

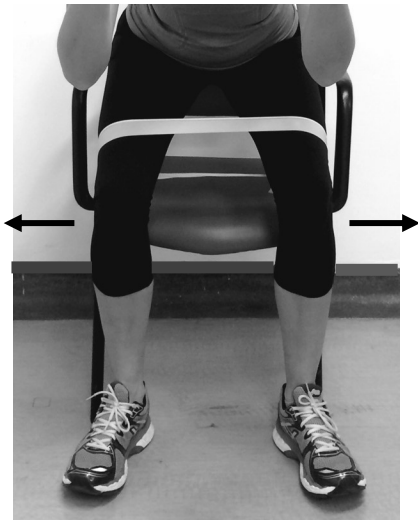


Progression:

- Tie a Theraband® around your lower thighs

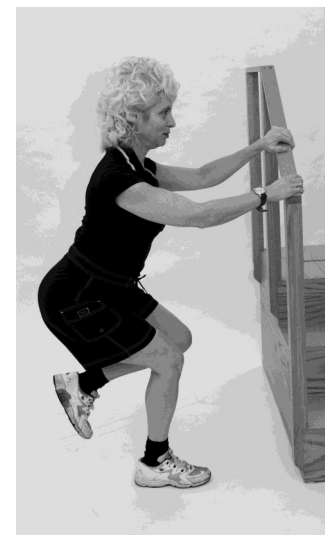
12. Squat

- Stand in front of a chair/sink and keep equal weight through both feet
- Keep your toes pointing forwards
- Bend your knees and stick your buttocks out
- Lower your buttocks down slowly and with control, using hand support if needed
- If using a chair, lower all the way down into sitting
- **Do not allow your knees to go ahead of your toes**



Progression level 1:

- Tie a Theraband[®] just above your knees. Press thighs apart against tension of Theraband[®] while doing the chair squat exercise



Progression level 2:

- Alternate single leg squat between **operated and non-operated leg**, using hand support if needed

13. Crab Walk

- Bring your feet together and tie a Theraband® just above your knees
- Stand with feet shoulder distance apart
- Stick your bottom out as if you are about to sit in a chair
- **Do not allow your knees to go ahead of your toes**
- Maintain this squat position and take a few steps in one direction, then side step back in the other direction
- When stepping feet back together, don't bring feet closer than hip distance apart
- Repeat in opposite direction until you are back to your starting position



14. Standing Abduction Against Wall

- Stand on **operated** leg
- Bend **non-operated** leg and push your knee against the wall
- Your hip should not be touching the counter
- Make sure to keep your hips level and thighs in line

Progression: try to take your hand off the counter so that your lower leg is the only part of your body touching the wall



15. Marching in Standing

- Hold onto a counter for support if needed
- Bend your operated hip and lift your knee up towards your chest
- Keep your back straight and ensure that you are not rocking from side to side
- **Alternate legs**

Helpful Tip: perform this exercise in front of a mirror

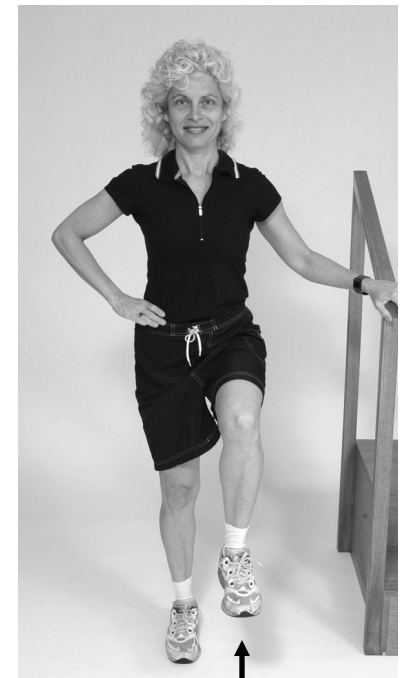
Progression:

level 1:

- Once you are able to stand without holding on, progress to marching at a slower pace

level 2:

- Standing on an uneven surface such as a flat pillow, wobble board or Bosu ball

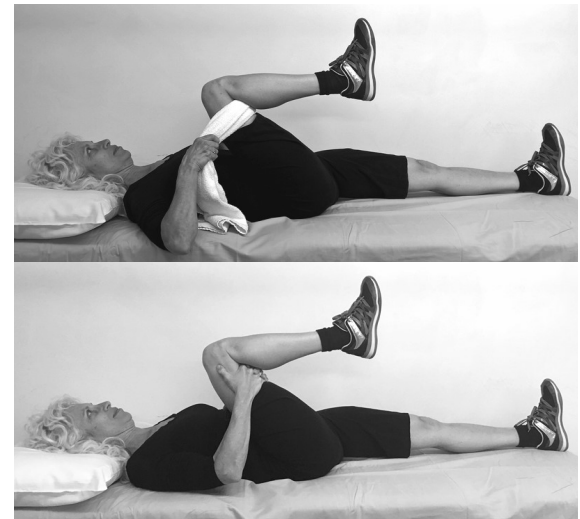


Stretches

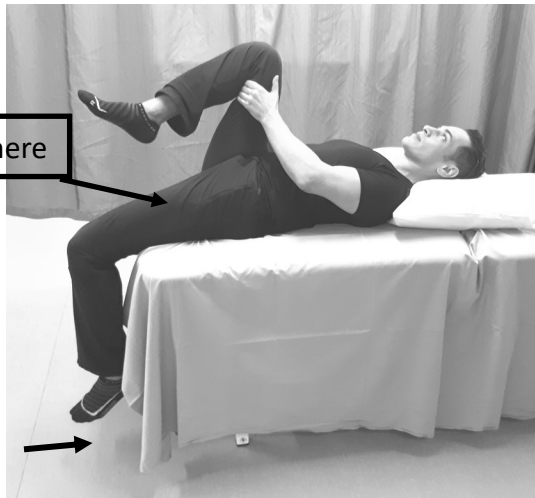
- Warm up for 5-10 minutes before stretching (e.g. walking, warm shower)
- Hold stretches 45 seconds (or 5 slow deep breaths), repeat 3 times
- Can be done **everyday** or several times a day if your muscles are tight
- **Repeat stretches on the other leg**

16. Hip Bending Stretch

- Bend your knee and bring your **operated** leg toward your chest
- When you cannot go any further on your own, use your hands/towel to pull your thigh towards your chest until you feel a gentle stretch



17. Hip Flexor Stretch



- Lie with **operated** leg hanging over the end of the bed
- Bend the **non-operated** leg toward your chest using your hands or a towel
- You should feel the stretch at the front of your thigh/groin

Note: to increase the stretch, let more of your thigh hang off the bed and bend your knee

18. Seated Hamstring Stretch

- Sit on the edge of a chair
- Keep **non-operated** foot flat on floor. Straighten your **operated** leg with heel on floor and toes pointing up to the ceiling
- Ensure that you are sitting up straight with an arch in your low back
- Slowly lean forward at hips while maintaining a straight back with chest up



Stretch felt here



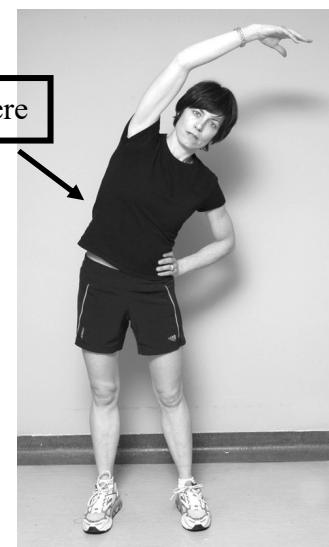
Stretch felt here

19. Adductor Stretch

- Stand with your feet wider than hip distance apart
- Lunge **away** from the side that you are stretching
- You should feel the stretch in your groin or the inside of your thigh

20. Side Stretch

- In sitting or standing
- Raise the arm on your **operated** side above your head
- Lean away from your **operated** side
- Take **5 deep breaths** to increase the stretch



Stretch felt here

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