

Hip newspaper

Discharge

You are allowed to go home!

This afternoon, you will either go home or move to the rehabilitation department. In this booklet, we provide some tips to help facilitate your recovery. We wish you a speedy recovery!

What the nursing staff does for you today:

You are going home:

- The nurses will provide you with additional tips and advice to consider at home.
- You will receive several documents, including a letter for your general practitioner and prescriptions for the pharmacy, physiotherapist, and home nurse.
- We will schedule your first follow-up appointment

You are moving to the rehabilitation department:

- The rehabilitation team will continue to guide you until you are sufficiently recovered to return home.
- During your stay in rehabilitation, you will continue to exercise in the physiotherapy room and the occupational therapy room.

Which documents will you receive for home?

- Discharge letter: This is the letter intended for your general practitioner. Please submit it at your next visit. We prefer your doctor to perform a scar check approximately 2 weeks after the surgery. No stitches need to be removed; removing the bandage is sufficient.
- Physiotherapy prescription: Hand over this prescription to your physiotherapist at the first visit. Initially, the physiotherapist will visit you at home, but after some time, it is advisable to continue the treatment at the practice. Your initial prescription covers 30 sessions, and it can be extended for an additional 30 sessions if needed.
- Electronic pharmacy prescription for painkillers that you can take if you experience any pain, as well as a prescription for the blood thinner.
- Follow-up appointment: The orthopedic surgeon wants to see you again after about 6 weeks. You will already have an appointment scheduled. If you wish to reschedule this appointment, please contact the secretary directly by phone.



Radiography prescription: For the follow-up appointment after 6 weeks, a radiograph needs to be taken. This can be done on-site at the Vilvoorde hospital, just before the appointment.

Note: Facilities for producing radiographs without an appointment may not be available at other locations (such as M.C. Elewijt, M.C.H. Wezembeek-Oppem). Please inquire about this. At MC Elewijt and MCH Wezembeek-Oppem, radiographs are only taken by appointment, and you should clearly mention this when scheduling your appointment.



Tips from the occupational therapist:

Picking up an object from the ground

- Method 1: The object is in front of you on the ground. Ensure that you can support yourself with your hand on a stable object like a table, chair, or cupboard. Fully support yourself on the non-operated leg. Lean forward and move the operated leg backward. The non-operated leg bends slightly, and with the free hand, pick up the object.
- Method 2: Place the knee of the operated leg on the ground. The other leg supports on the foot. Bend forward and pick up the object. To stand up, lean as much as possible on the non-operated leg. Hands can also provide support.
- Method 3: A long-reaching grabber tool can also be used to pick up an object from the ground.

Showering or bathing

In the initial phase, it is advisable to take a shower instead of a bath. Ensure there is a non-slip mat inside and outside the shower. Optionally, you can use a shower chair or a bath board to prevent prolonged standing. A plastic garden chair can be suitable for this purpose.

Toilet

You can consider having a handrail installed next to the toilet for additional support when sitting down and standing up. Additionally, you may use a toilet seat riser. There are toilet seat risers with integrated armrests.



Dressing and undressing

After the surgery, you were instructed to avoid certain movements. It's also important to consider this during dressing and undressing.

Try to do as much as possible while sitting to prevent the risk of falling when standing on one leg.



To put on or take off pants or skirts, you can use a reacher or a slip lift. This allows you to stay upright while bringing the pants or skirt down to the foot to put on. Always insert the operated leg into the pant leg first and then the non-operated leg. When undressing, reverse the order.

A tool for putting on stockings is a stocking aid.



Always wear closed shoes. Even slippers or sandals should have a strap to prevent the heel from sliding beside the shoe.

When putting on shoes, start with the shoe on the non-operated side. To put on the other shoe, it's easier to stand up. Use a long shoe horn for this, and be careful not to twist the heel outward. Use the shoe horn on the inside of the foot.

It's easiest to wear shoes without laces. If this is not possible, you can replace the laces with elastic ones. Tie them once in the shoe, and you won't need to tie or untie them afterward.



If you're accustomed to wearing high heels, it's not a problem to continue doing so. However, be cautious with narrow stiletto heels as they may affect stability, increasing the risk of tripping.

How do I manage household chores?

First and foremost, it's important to avoid making yourself too tired. Overexertion only leads to trouble. Prolonged sitting or standing is not recommended. Try to introduce as much variety as possible into your work.

Ensure that you work in a safe environment. This means minimizing any materials that could pose a tripping hazard, such as loose carpets, electrical cords, etc.

Consider placing frequently used power outlets higher using a power strip with a cord. This way, you don't have to bend your knees constantly.

Avoid stepping on small step ladders but use a sturdy and stable stool with wide steps to easily maintain balance.

Cooking

Introduce variation between standing and sitting while cooking. For sitting, you can use a high chair if needed. Prepare vegetables while sitting at a table. Store infrequently used utensils at the bottom, and keep frequently used items in easily accessible cabinets.



Ironing

When ironing, sit on a high, stable stool or standing chair to avoid prolonged standing. The advantage is that you can comfortably sit without bending the hip too much.



Vacuuming

Hold the vacuum cleaner hose around your waist (this also saves your back). Place your non-operated leg forward. This is the leg you'll primarily support when moving back and forth with the vacuum cleaner. Vacuum close to your body and move along with it. Ensure that the vacuum cleaner has a long handle and hose to avoid excessive bending of the hip or back.



Lifting heavy objects

It's best to avoid lifting heavy objects. If it's unavoidable, carry the weight as close to the body as possible, and on the non-operated side.

Do not place the heavy object on the ground but at hand height. This helps avoid bending at the hip. Consider using aids such as a trolley, backpack, or wheelbarrow."



Mopping and cleaning windows

When mopping and cleaning windows, place a bucket on a chair. Fill the bucket only halfway to reduce weight. Use a stable stool. If you are cleaning large windows that reach the floor, either bend your knees or place your operated leg backward to avoid excessive bending at the hip.



What is allowed when?

- Putting weight on the operated leg? Immediately
- Driving a car? After 3 to 4 weeks
- Cycling? Your physiotherapist will encourage you to practice on a stationary bike first. After that, you can start cycling outdoors, typically around 4 weeks post-surgery
- Sexual relations? On average, after 4 weeks, once hip movements are smoother and less painful. Especially avoid bending the hips too deeply.



Getting in and out of the car

Certainly, you can go out with the car. Normally, you can drive the car yourself a few weeks after the operation. However, there are a few things to consider. Avoid prolonged rides. If you have to cover a long distance, take sufficient rest breaks. Ensure that you or the driver does not park the car right next to a curb (on your side). This makes getting out more difficult because the seat height becomes lower (similar to trying to stand up from a too-low chair).

You essentially use the same technique as getting in and out of bed. First, make some preparations: slide the seat as far back as possible to give you more legroom. Place a plastic bag on the seat to facilitate the turning movement.

To get in, sit sideways on the seat with your legs outside the car. Take support with both hands (left and right, for example, on the dashboard, backrest, or door frames) and turn your legs and torso into the car in one motion. Support the operated leg with your non-operated leg or with your hands.



Copophon

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Contact:

kwality@azjanportaelen.be

You can then pull the seat back to the desired position. Also, recline the backrest slightly to avoid making the hip angle too small.

To get out, do the opposite. Slide the seat back first, take support with your hands, turn the torso and legs outward together (again, support your operated leg), and stand up.

As a conclusion

The hip newspaper comes to an end. You are free to go home. We hope you had a pleasant stay in our hospital.

If you would like to leave a message for our staff or if you have any comments or suggestions, you can fill out the evaluation form.

We wish you a safe journey back home and a speedy recovery. If you wish to contact us, feel free to call Surgery 2 at T 02/257.57.30.

The Hip Team.