Dr Peter D'Alessandro

MBBS Hons. (UWA) FRACS FAOrthA Orthopaedic Surgeon

Shoulder & Knee Reconstruction Hip Arthroscopy, Surgery for Athletes



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HIP ARTHROSCOPY

Discharge / Post-Operative Appointment / Surgical Outcomes

Discharge is normally the morning following your surgery. However if you are feeling well it is possible to leave on the day of surgery. Your post op appointment is 2 weeks after surgery. If you do not have an appointment please contact my PA Bronwyn on 9230 6333 or bronwyn@coastalorthopaedics.com.au. If you are enrolled in the Surgical Outcomes System please complete the online questionnaires that will have been emailed to you.

Pain Relief / Medications / DVT Prophylaxis / HO Prophylaxis

You have been prescribed a range of pain-killers by your Anaesthetist. In general, you should take paracetamol regularly (3-4 times per day). Use stronger painkillers for top-up pain relief as required. You can cease them as soon as the pain allows. Check with your nurse prior to discharge if you are unsure. You should take Mobic or Celebrex daily for 2 weeks and Aspirin/Nexium daily for 28 days unless otherwise directed.

Swelling / Icing

Some swelling around the hip is normal. However the sooner your swelling settles the better. Please ice your hip as many times per day as you can tolerate, ideally using your *BODYICE kit*.

You should continue icing for as long as you hip remains swollen, which can be up to several weeks.

Concerns

We have an excellent practice nurse Cherie who will see you with me at your 2 week appointment, and will be happy to answer any questions or concerns you may have in the peri-operative period. Remember numbess in the genital region/groin, thigh or foot may persist for days or even weeks post surgery. If you are worried about your hip, if there is new redness or fever or if you develop significant calf pain or swelling please contact us immediately or attend your local doctor or emergency department.

Dressings / Sutures

Leave the waterproof sticky dressings in place. You may shower but still cover your dressings and keep them as dry as possible. If they become saturated or fall off, dry and clean your wound with antiseptic and replace with a similar dressing. You have 'dissolvable' sutures that do not require removal.

Crutches

You can weight bear as tolerated and can discard your crutches once at least 2 weeks have passed and you can walk comfortably with NORMAL gait. You should NOT hop-your foot should be flat on the ground.

Rehabilitation / Physiotherapy

Please see the 'rehabilitation' section of my website www.drpeterdalessandro.com.au for exercises you should perform several times per day, immediately after discharge. You should see your physiotherapist as soon as possible after your surgery to start your guided program. Please inform me of who this is, or ask me for a referral. If you are enrolled in a UWA study HFRC will liaise with you for assessments. You should start spinning on a stationary bike (with a high seat) the day after surgery, but the priority is maintaining GENTLE, PAIN FREE range of motion, not doing resistance exercise. Avoid flexing your hip significantly past 90 degrees or aggressively rotating your hip for 6 weeks or as pain allows.

Return to Work/Driving

If you work in an office or can arrange to do so, you may return to work in around a week once you feel comfortable. If your work involves significant physical activity/manual work, you may need 6 weeks off work and then a period of light duties. If surgery is on your left hip you can drive as soon as you feel comfortable. On your right this may take a few weeks.





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