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POSTOPERATIVE INSTRUCTIONS HIP ARTHROSCOPY WITH LABRAL REPAIR

**Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Kaplan or his team supersede the instructions below and should be followed.

DIET

- Begin with clear liquids and light foods (jello, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- Maintain your operative dressing
- It is normal for the hip to bleed and swell following surgery. If blood soaks onto the ACE bandage, do not become alarmed, reinforce with additional dressing
- Remove surgical dressing on the **5th post-operative day** – if minimal drainage is present, apply bandaids or a clean dressing over incisions and change daily.

At **5 days postoperatively**, you can begin to get the incision wet in the shower (water and soap lightly run over the incision and pat dry).

- To avoid infection, keep surgical incisions clean and dry. NO immersion of the operative leg (ie: bath or pool).

MEDICATIONS

• Local anesthetics are injected into the wound and knee joint at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.

• You will be prescribed several medications postoperatively:

- **Tylenol:** 1000 mg (2 of the 500 mg pills) 3x per day (every 8 hours)
- **Tramadol:** 50 mg as needed for pain. Can be taken at most every 8 hours
- **Oxycodone:** 5 mg. This is for breakthrough (i.e. you are still having pain, despite the other medications). This can also be taken at most every 8 hours.
- **Colace (docusate):** 100 mg daily. This is to avoid constipation, which can occur with the pain medication
- **Aspirin:** 81 mg taken twice per day, for 1 month. This is to prevent blood clots after surgery.
- **Indomethacin:** 75mg daily x 10 days

- **Meloxicam:** 15 mg pill, once per day, with food (to begin after indomethacin after ends)
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease the side effects take the medication with food. If constipation occurs, consider taking an over the counter laxative.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking the narcotic medication
- For 2 weeks following surgery take one aspirin 81mg twice daily to lower the risk of developing a blood clot after surgery. Please contact the office should severe calf pain occur or significant swelling of the calf or ankle occur.

ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling.
- **Use crutches to assist with walking. You are foot-flat weight bearing, which means your foot can rest on the ground, but you should not put any weight through it**
- Do not engage in activities which increase hip pain/swelling (prolonged periods of standing or walking) for the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or standing or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

BRACE

- Your brace should be worn at all times for the first two weeks, which limits your hip from flexing beyond 90 degrees
- Can remove brace for hygiene
- For exercises, the brace will not allow bending at the hip beyond 90 degrees

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 20 minutes every 2 hours daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing. Care should be taken with icing to avoid frostbite to the skin.

EXERCISE

- Perform ankle pumps continuously throughout the day to reduce the risk of developing a blood clot in your calf.
- Formal physical therapy (PT) typically the week (or early the following week) after surgery. A prescription and protocol will be provided the day of surgery.

EMERGENCIES**

- Contact Dr. Kaplan's team if any of the following are present:
 - Painful swelling or numbness (note that some swelling and numbness is normal)
 - Unrelenting pain
 - Fever (over 101° - it is normal to have a low grade fever for the first day or two following surgery) or chills
 - Redness around incisions
 - Color change in foot or ankle
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Difficulty breathing
 - Excessive nausea/vomiting
 - Calf pain
- If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- If you do not already have a post-operative appointment scheduled, please contact our scheduler
- Typically, the first post-operative appointment following hip arthroscopy is made 10-14 days following surgery for suture removal.
- If you have any further questions please contact Dr. Kaplan through my chart, or call the call center at 929-455-2500.