



ADVANCED Surgical Hospital

A PHYSICIAN OWNED HOSPITAL



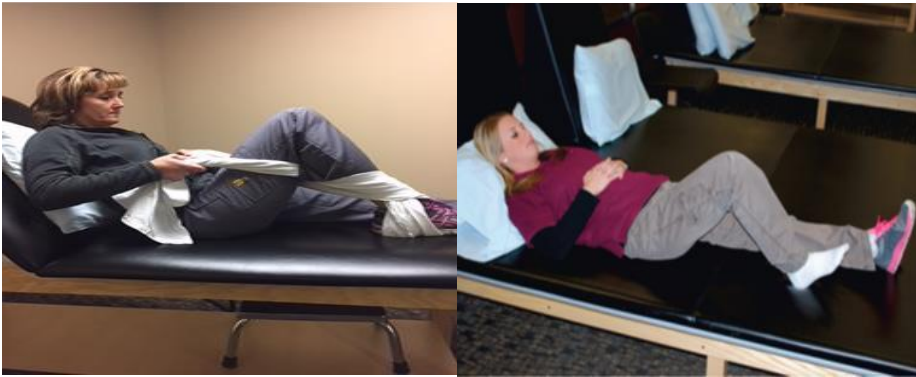
Pre-Operative Lower Extremity Joint Replacement Program (Knee and Hip)

Pre-Operative Exercise Program:

(DO THESE EXERCISES TO THE BEST OF YOUR ABILITY)

Heel Slides:

- Lie on your back with your knees and toes pointed toward the ceiling.
- Gradually bend your leg while keeping your foot on the bed.
- Bend your leg toward your body as far as comfortable and hold it there for 5 seconds.
- Gradually straighten your leg until your knee is flat against the bed.
- Perform this exercise 2-3 times per day for 10 repetitions each leg.
- Total Knee – use sheet to assist; Total Hip – do not use sheet



Quad Sets:

- Lie with your back supported and your knee straight. Place a folded towel under your knee.
- With your knee straight and toes pointed toward the ceiling, tighten the muscles of your thigh (this will cause your leg to straighten further).
- Hold this position for 5 seconds then relax.
- Perform this exercise 2-3 times per day for 10 repetitions each leg.



Glute Sets:

- While lying on your back, squeeze your buttock muscles together as tight as tolerable.
- Hold this position for 5 seconds then relax.
- Perform this exercise 2-3 times per day for 10 repetitions.

**Long Arc Quads:**

- Sit on a chair or the side of your bed.
- With both knees bent, gradually straighten 1 leg at a time.
- With your leg straight, tighten the muscles of your thigh.
- Hold this position for 5 seconds then relax.
- Lower leg back down and repeat exercise with your opposite leg.
- Perform this exercise 2-3 times per day for 10 repetitions each leg.



Chair Push Ups:

- Sit on a sturdy chair with armrests with your feet flat on the floor.
- Straighten your elbows by pushing up on the armrests.
- Slowly lower yourself back into a seated position.
- Perform this exercise 2-3 times per day for 10 repetitions.



Straight Leg Raise:

- Lie on your back with one leg straight and the other one bent at the knee.
- Lift your straight leg up no higher than the height of your opposite bent leg.
- Hold for 3 seconds then gently lower your leg back down to starting position.
- Perform this exercise daily for 25 repetitions.



Post-Operative “DO’s and DO NOT’s”

Sleeping/Lying on your side:

DO:

- Lie on the non-operative side of your body.
- Lie with a pillow between your knees

DO NOT:

- Do Not lie on the affected side of your body.
- Do Not lie without a pillow between your knees.



Lying flat on your back:

DO:

- Keep your legs straight with your toes pointed toward the ceiling.

DO NOT:

- Do Not cross your legs and Do Not roll the surgical leg inward and outward (this is if you had a total hip replacement).
- Do Not have a pillow under your surgical leg which would cause your knee to be bent (this is if you had a total knee replacement).

Walking:

DO:

- Wear supportive shoes with rubber soles.
- Use your walker and observe your weight bearing status as prescribed by your surgeon.
- When turning, lift and turn your foot. Take as many steps as needed to make the turn safely.
- Stand up straight and advance the walker a short distance in front of you.
- Walk in a pattern: 1) Walker 2) Surgical Leg 3) Non-Surgical Leg 4) Repeat.



DO NOT:

- Do Not wear slippers.
- Do Not pivot on your surgical leg while turning.
- Do Not place your toes in front of the front feet of the walker.

Sitting:

DO:

- Sit in a firm chair (preferably one with arm rests).
- Sit with your hips above your knees.
- Keep your toes pointed straight ahead of you.



DO NOT:

- Do Not sit in a deep/low chair that permits your knees to raise higher than your hips.
- Do Not lean forward or bend down to pick up items from the floor (this only applies if you had a total hip replacement).
- Do Not cross your legs/ankles (this only applies if you had a total hip replacement).
- Do Not put on your socks without adaptive equipment.



Standing up:

- Scoot your buttocks to the edge of the chair/bed.
- Place your surgical leg out in front of you by sliding it forward on the floor.
- Push from the arm rests of the chair or push from the bed. Use the non-surgical leg to assist you to stand.
- After you have stood up, reach for the walker (Do Not pull yourself up with the walker).

Sitting down:

- Back up until you feel the chair or bed against the back of your leg (Be sure that whatever you will be sitting on will not roll or slide).
- Keep the surgical leg in front of you.
- Lower yourself to the chair/bed using the non-surgical leg and by using your arms on the arm rests or the bed.

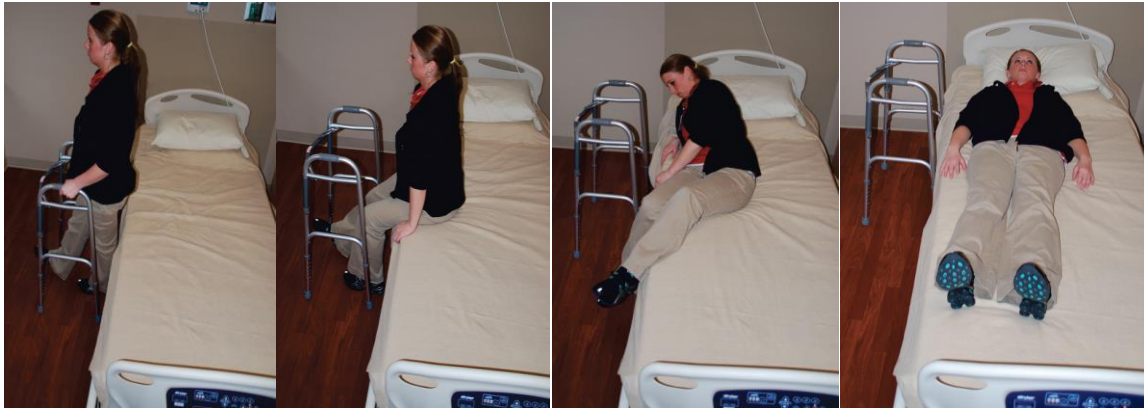


Getting out of bed:

- In short increments, gently slide your legs to the edge of the bed keeping approximately 8 inches between your knees.
- Walk your elbows behind you and push yourself into a seated position.
- Using your arms, scoot yourself to the edge of the bed and place your feet on the floor.

Getting into bed:

- Scoot yourself as far back as you can toward the head of the bed using your arms and non-surgical leg.
- Raise one leg onto the bed keeping at least 8 inches between them.
- In short increments, gently slide your legs into the middle of the bed.
- Lower yourself onto your elbows then onto your back.



Weight Bearing Status:

Weight Bearing as Tolerated (WBAT)

Place as much weight on your surgical leg as you can tolerate.

Partial Weight Bearing (PWB)

Place approximately 50% of your weight on your surgical leg unless otherwise instructed by your surgeon.

Touch Down Weight Bearing (TDWB)

You are only permitted to touch your toes to the floor for balance purposes. You are Not permitted to place weight through the surgical leg.

Non Weight Bearing (NWB)

No weight is permitted through the surgical leg.

Hip Precautions:

Posterior:

Do Not bend your hip past a 90 degree angle. Do Not cross your legs.
Do Not twist your surgical leg inward (keep your knees/toes pointed forward).

Anterior:

Do Not bend your hip past a 90 degree angle.
Do Not extend the surgical leg behind you (if backing up, lead with your non-surgical leg).
Do Not rotate the surgical leg outward. Do Not cross your legs.

HOME SAFETY SELF ASSESSMENT TOOL

(The items listed will help you identify potential home hazards that may result in a fall).

Entrance to your home:

- Lack of railings or having an unstable railing to hold on to as you enter your home.
- Having unsafe steps that are too steep, too narrow, or cracked.
- Lack of lighting at night.
- Having uneven or cracked pavement on your driveway, sidewalk, steps, or garage.
- Ice or snow on your driveway/walkway.

Hallway or Foyer:

- Having a slippery floor (think rain or snow being tracked into your home).
- Having too much clutter that you can trip over.
- Having poor lighting.

Living Room:

- Presence of throw rugs.
- Having too much clutter and not enough space to move around.
- Presence of electrical cords across the floor.
- Having poor lighting.
- Grabbing on to unstable furniture.
- Sitting on an unstable chair (especially desk chairs that have wheels).

Kitchen:

- Having cabinets that are too high or too low to reach safely.
- Standing on a stool or chair to reach things.
- Having throw rugs.
- Presence of a slippery floor.
- Having poor lighting.
- Presence of a pet underfoot while preparing meals.

Bedroom:

- Presence of electrical cords across the floor.
- Having uneven, torn, or curled up carpeting.
- Having throw rugs.
- Having a bed that is too high or too low to the floor.
- Lack of a night light.

Bathroom:

- Lack of grab bars in the tub, shower, and near the toilet.
- Toilet is too low.
- Having a slippery tub (lack of bath mat).
- Not having a bath chair in the tub/shower.
- Having throw rugs that can easily slide.

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ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

Llame al 1-888-808-9008 ID 67115549 (TTY: 711)

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