

Gluteus Medius – Postoperative Instructions

PRESCRIPTION MEDICATIONS

****We will fill your scripts through our pharmacy. They will contact you the week of your surgery**

Aspirin:

This medication is to help prevent blood clots after surgery.

Take one 325 mg tablet twice per day with food for 30 days.

Colace (Docusate Sodium):

This medication is to help with constipation, a common side effect after taking narcotic pain medications (like Norco) and general anesthesia.

Take 1 pill in the morning and 1 in the evening to prevent constipation

It is normal to take several days to make a bowel movement after surgery

Drink plenty of clear liquids as the anesthesia can cause dehydration/constipation as well.

Hydrocodone/Acetaminophen (Norco):

This is a narcotic medication for pain.

This medication is to be taken AS NEEDED.

Plan to stay on a scheduled dose of 1-2 tablets every 4-6 hrs for the first 2-3 days.

After 2-3 days you should be able to space out or discontinue the medication and transition to

Acetaminophen (Tylenol).

DO NOT exceed 4,000 mg of Acetaminophen in a 24 hour period.

Do not drive, drink alcohol, or take Acetaminophen (Tylenol) WHILE taking this medication.

Scopolamine patch:

For some patients, the anesthesia team will put on a scopolamine patch behind your ear to prevent nausea.

You can leave this in place for 72 hours.

When you take it off, wash hands thoroughly or it can make your vision blurry.

Zofran (Ondansetron):

This is an anti-nausea medication.

It is a dissolving tablet- place it on your tongue, allow it to dissolve, and swallow.

Take this as needed every 4-6 hours for the first 2 days after surgery.

WOUND CARE

Leave the bulky surgical bandage on and DO NOT shower for 48 hours.

After 48 hours, remove bandages and gauze, but LEAVE STERI-STRIPS (white tape) IN PLACE.

You may shower at this point.

Cover incision sites with waterproof bandage prior to getting into the shower.

Should the incision(s) accidentally get wet, pat them dry with a clean towel. DO NOT SCRUB.

It is normal to see a lot of blood-tinged soaked fluid on the bandages.

This may appear to be a pinkish-yellow fluid and is normal.

In between showers, leave the incision sites open to air

DO NOT APPLY LOTIONS OR OINTMENTS TO THE INCISION SITES

Your stitches will be removed at your first post op visit.

You may shower at this point without waterproof bandages over the incision sites.

DO NOT scrub the incision sites- you may let soap and water run down the incisions and pat dry with a towel once you're done.

DO NOT soak in any pool/bath water until 4 weeks after surgery.

PHYSICAL THERAPY

You will start physical therapy after the first few weeks of surgery.

Dr. Chahla will determine when the best time for you to start physical therapy will be based on your clinical progress and can vary in length of time after surgery.

You will receive instructions for physical therapy at your initial follow up appointment.

WEIGHT BEARING

You will be flat-foot weight bearing for the first few weeks after surgery

It is okay to partially weight bear (more) when standing in the shower or using stairs

You will not damage the surgery

Do not increase your weight bearing status unless otherwise directed by Dr. Chahla or the PA

BRACE

You will get a brace on surgery day.

Over the first few days, concentrate on icing the hip and wear the brace when you are up and about.

The brace should be worn until you are off the crutches

You do NOT need to wear the brace:

While sleeping

On the CPM machine

Laying on your stomach

Using the ice machine

Showering and using the bathroom

The lateral (outside) post on the brace should be positioned over the lateral aspect (outside) of the leg

The Velcro on the distal (lowest) strap can wear out quickly

You can call Miomed to get a replacement strap if this happens (Number listed on the last page of the packet).

The point of the brace is to prevent hyperflexion, adduction, and abduction (bringing the leg too close to the chest or bringing the leg too close or far away from the body).

NIGHT TIME PADDING:

Wear the padding at nighttime.

The point is to prevent rotation and abduction

Use this padding for 4 weeks postop.

If you cannot sleep, alternatives are:

Take your non-operative leg out of the boot/padding.

Sleep in the brace.

Use a pillow between the knees if lying on your nonop side or place a pillow at the side of the operative leg if lying on your back

ICING

Ice packs

Cycle 20 minutes on and an hour off throughout the day

Ice machine

Available for purchase in our DME stores:

312-432-2482 for the 1511 W. Harrison St. location

708-273-8426 for the 2450 S. Wolf Road St. location

708-492-5664 for the 2011 York Rd. location

If purchased or borrowed

Cycles on and off on its own

Use it as much as you can for the first 72 hours

Try to use it 4-5 times per day after the first 72 hours for the first two weeks after surgery.

***These machines are indicated for use by Dr. Chahla. Dr. Chahla's office does not assume responsibility if the equipment is not covered by your insurance. Questions about equipment use and insurance coverage should be directed to the company that provides the equipment. These companies should outline a payment plan for you in the event that your insurance does not cover the equipment. ***

GENERAL ACTIVITY LEVELS

Alternate sitting, reclining, and lying down as much as you can tolerate

We recommend you get moving once every 30-45 minutes to prevent stiffness.

Do not stay in a seated position for longer than 30-45 minutes

If you need a work note to get up from your desk, please let us know and we can send a note in to your employer.

Spend 2 to 3 hours per day on your stomach (you can take the brace off for this)

Laying around too much will make you stiff, so feel free to move around your home as you can tolerate.

You can go up and down stairs. Go up with the good leg (nonoperative leg) first and then bring the bad leg up onto that step (with the crutches or holding the railings).

No driving until you are off the crutches/walker

FOLLOW UP

You will need to follow up in clinic with the PA or Dr. Chahla in 2-3 weeks from your surgery date.

Please call central scheduling to make an appointment (contact information below).

WHEN SHOULD YOU CONTACT THE OFFICE?

If you have a fever >100.4 degrees F.

A low-grade temperature (even up to 100 degrees) is expected after surgery, but let us know if it gets this high!

If you develop chills or sweats.

If you have pus, significant pain, or redness surrounding the incision sites.

If you are unable to urinate >1-2 days after surgery.