

BHR Patient Information

3-4 Weeks Prior to Surgery (or day before surgery if out of town BHR patient):

1) Pre-operative discussion with a PA at Dr. Rogerson's office: 2 Science Ct., Madison, WI53711. Read and sign informed consent forms, discuss hospital course, update x-rays if needed, take range of motion measurements, receive forearm crutches, receive Rx's/samples for Celebrex (anti-inflammatory), Xarelto (blood thinner), pain medication, Niferex (iron), and PT crutch instruction at HipHab.

*If you are an out of town BHR patient, these prescriptions will be mailed to you prior to your discussion. You will meet Dr. Rogerson if you have not already and have all of your pre-operative questions answered.

2) HipHab PT appointment: (typically same day as pre-op discussion for out of town BHR patients). Receive forearm crutch instructions; tour the facility, including land/pool exercise departments.

10 Days Pre-Op (2 weeks):

Stop all blood thinners including: aspirin, herbal medication, vitamin E, glucosamine chondroitin, anti-inflammatory medications (such as Ibuprofen, Aleve, Motrin, Diclofenac, etc). If you take Coumadin or Plavix please contact our office ASAP to discuss when to stop this medication prior to surgery. Review the list of foods to decrease from your diet.

3 Days Before Surgery: **Start showering with Hibiclens soap (Chlorhexidine Gluconate 4%) three days prior to your surgery.** You should lather your entire body with the soap excluding eyes, mouth, and genitals. Let lather sit on your skin for 60 seconds prior to washing off. In town BHR patients receive this soap at your pre-op discussion. For out of town patients, this is an over-the-counter medication found at most pharmacies that you should purchase and use as directed above.

The Night Before Surgery:

Do not eat or drink anything after midnight.

Surgery Day:

Shower again with Hibiclens soap. If you normally take medicine for blood pressure, thyroid or heart abnormalities, you should still take them with a **sip** of water, unless you've been told to hold them. Other than that, you should not eat or drink anything after midnight. Arrive at Stoughton Hospital 2 hours prior to your surgery time. Please bring a photo ID and your insurance card. After entering Stoughton, you will go to patient registration on the main level and sign a few forms. Then, you will proceed to the 2nd floor, (the pre-surgical unit) to prepare for surgery.

Pre-Procedure: You will meet and talk with the surgical staff, including the surgical nurse and the anesthetist that will be caring for you during the surgery. You will discuss your anesthesia concerns. Your IV will be started. Dr. Rogerson will identify the correct hip and place his initials on the surgical leg. A compression stocking will be placed on the non-surgical leg. After all of your questions are answered, you will be taken to a special high volume air-flow operating room. Pump stockings will be placed as well as a blood pressure cuff and EKG monitoring pads.

Procedure: Your surgery will last 2.5- 3 hours. Any friends or family with you will be notified when you are in the recovery room. Most patients spend approximately 1-2 hours in recovery room before transferring to the Medical/Surgical unit on the 3rd floor where you will be staying in the hospital.

Post-procedure: Once you are in your hospital room, your vital signs (temperature, blood pressure etc.) will continue to be monitored. It is very important to remember to take deep breaths and cough, as well as pump your feet and ankles. The blood thinner (Xarelto) will be started the day after your surgery, and will be continued daily for approximately 3 weeks post-op. You will be getting up to a bedside commode with assistance the night of your surgery. You will be started on IV and oral pain meds (if needed) and ice packs will be placed on your hip/thigh.

Post-Op Day One

You will have PT twice daily. Once you are cleared by a therapist, you may walk the hallways in between therapy sessions, and are encouraged to be as mobile as possible. Continue to flex/extend your feet and ankles while in bed to keep blood flow moving. Massage around the hip incision to break up the scar tissue that will begin to form.

Post-Op Day Two

After your PT session, you will transfer to HipHab to continue therapy for 3-4 additional days. Therapy will include land and water exercises. A two week wound check appointment with a PA, and a five week post-op appointment with Dr. Rogerson will be made for you at which point x- rays will be taken to show you the new prosthesis.

Things to Bring to the Hospital

- Forearm crutches
- Loose-fitting clothes for therapy
- Shoes
- Slippers (non-skid)
- Robe
- Toiletries
- Cell phone and charger

Things to Bring to HipHab

- Everything listed above
- Memory Foam Pillow (required by Dr. Rogerson)
- Casual clothes for after PT
- Swimsuit (or clothes to swim in such as t-shirt and shorts) and towel
- Medications: Daily regular meds, Xarelto, pain meds, Celebrex, Niferex iron. Over-the-counter meds including Tylenol for mild pain; laxatives such as miralax/ dulcolax; stool softener such as Colace.