

**Sinai
Health**

Mount Sinai Hospital

Joseph & Wolf Lebovic Health Complex

Hip Replacement Surgery

A Patient Guide to Recovery

- Home same day as surgery
- To be admitted after surgery

Important phone numbers

Surgeon's Office _____

Pre-Admission Unit 416-586-4800 ext. 8824

Patient Inquiry 416-586-8300

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Your Health-care Team

You and your surgeon have decided to proceed with joint replacement surgery. You have now taken the first step toward returning to your daily routine and to the activities you have enjoyed in the past.

Our goal is to help you get back to your home and community as soon as possible after your operation. This booklet has been developed to provide you with general, helpful information regarding what you may experience before and after your surgery.

Before, during and/or after your surgery you will be meeting and working with some or all of the following members of the health care team.

- Surgeon/Resident/Fellow
- Anesthesiologist
- Nurse
- Pharmacist
- Social worker
- Physiotherapist
- Occupational therapist
- Blood conservation co-ordinator
- The most important member of the team is you!

To achieve the best results from your surgery, it is very important that you actively participate in your recovery. Being prepared for surgery helps to improve recovery and reduce anxiety.

Please feel free to speak to members of your health-care team regarding any questions or concerns that you may have.

Pre-admission appointment: _____

The Pre-Admission Unit (PAU)

4th floor, Room 459 (from the main floor take the escalator, at the top turn left turn left)

The purpose of your Pre-Admission Appointment is to prepare you for your surgery. You will meet with members of your health care team to make sure you are medically fit for surgery and anesthetic. They will review what to expect in hospital and how to prepare for your discharge home. They will answer your questions and discuss your concerns.

You must attend this appointment in order to have surgery. Your surgeon's office will inform you of your PAU Appointment, date and time. Your appointment will last 3-4 hours. Please take your usual medications the day of your appointment. You may eat and drink before your PAU Appointment.

During your appointment you may: meet with a PAU Nurse, Pharmacist, Anesthetist, and Social Worker. You may also require Blood work, ECG, X-ray and attend a Physiotherapy education class.

What to bring to your appointment:

- OHIP card
- Supplemental insurance info, policy/certificate numbers (if applicable)
- All medications including herbal supplements and over the counter medications in their original containers
- Information about your Emergency contact person (name and phone number)
- Wear comfortable clothing, bring a snack/drink and arrange for an interpreter/someone to assist (if required)

My Discharge Plan Following Surgery

To be completed with Mount Sinai Hospital's Social Work Department.

The name of the social worker who saw me in the Pre-Admission Unit:

Print Name

The name and number of the Social Worker I can call with questions from now until a week after my discharge home is:

My Discharge Plan following surgery will be:

Home with publicly funded outpatient physiotherapy []

Time Frame: Within one week [], 2-3 weeks post discharge home [], Other []

Home with my own private physiotherapy []

Alternate plan:

After My Surgery, When do I go Home?

Date: _____

Your Medication Instructions:

(As advised by the pharmacist during your pre-admission appointment)

Medication to stop before your Surgery:

_____ when _____

Medication to take the morning of your surgery (with water):

Medication to bring with you to the hospital:

Preparing for Your Surgery

Date of your surgery _____

Time you should be at the hospital _____
(3 hours before surgery or 6:00 a.m. if first Surgery of the day)

Time of your surgery _____

Confirm your surgery time

- Please call the Pre-Admissions Unit one business day before your surgery date to confirm your surgery time: **416-586-4800 ext. 8824** (Monday to Friday 11:00 a.m. to 4:00 p.m.)
- If you must cancel your surgery for personal reasons, please inform your surgeon immediately.
- If there's any change in your health status after your assessment in the Pre-Admission Unit and before your surgery date please call your surgeon immediately.

What to pack for the hospital

- Health Card
- Any insurance policy information that you may have, as well as a credit card for charges for private or semi-private rooms, or telephone (optional).
- A sturdy pair of closed-toe slippers or comfortable shoes with non-slip soles. A pair that allows room for potential swelling is best.
- A dressing gown/house coat (preferably one that closes in the front and loose, comfortable, fitting clothing).
- Personal toiletries if you are staying overnight in hospital (toothbrush, shampoo, skin cream, facial tissues etc.)
- Glasses, hearing aids, dentures and their storage containers.

- Cell phones can be used in most areas of the hospital and are a good way to communicate with your family.
- Your assistive aids, such as walker or crutches (as discussed during your Pre-Admission Appointment). Please label all of your equipment with your name.

Note: Please remove all of your piercings before coming for your surgery.

Note: Your belongings will be locked in a locker during your surgery. Please only bring a soft bag (i.e.: gym bag) with you. We cannot be responsible for valuables therefore, PLEASE LEAVE ALL VALUABLES AT HOME.

Medication information

On the day of surgery, please;

- Bring only the medications that you were specifically told to bring during your Pre-Admission Appointment.
- Bring the phone and fax numbers of your pharmacy.
- Be sure to let the admission nurse know if there have been any changes to your home medications since your Pre-Admission Appointment.

Equipment to arrange for in advance

- You will need a mobility device (walker, crutches etc) available for the day you are discharged home from Hospital.

Assistive Devices/aids you may need – discussed at your Pre-Admission Appointment:

- Raised toilet seat
- Sock aid
- Bathtub transfer bench or shower chair
- Long handled sponge
- Long handled reacher
- Elastic shoe laces
- Wedge cushion
- Long handled shoehorn

You will be advised how to rent or purchase the equipment listed above. For a list of vendors please see page 22. It will be your responsibility to obtain the recommended equipment in preparation for your return home.

Preparing Your Home

After your surgery, it will take time to regain your current state of functioning and mobility. In order to best prepare for a smooth and easy transition home from hospital, there are a number of things you can organize prior to your surgery.

- Tell your family, friends or neighbors about your upcoming surgery and arrange help with laundry, shopping, cooking and cleaning for the first few weeks after you return home.
- Arrange transportation to the hospital and for your day of discharge and follow-up visit. You will also need to arrange transportation to your outpatient therapy appointments.
- Set up your home by getting the necessary equipment and making the following preparations before your upcoming surgery:

Outside your home

- Ensure any stair railings are secure.
- If possible, use an alternate entrance that does not require you to manage stairs.
- Consider installing a ramp over stairs (consult an expert).
- Be aware of any uneven ground or excessive slopes around your yard.

General living area

- Clear pathways and remove any clutter so that you can navigate your walker/mobility aid safely within your home.
- Prevent tripping hazards by removing scatter rugs and securing edges of area rugs to the floor with double-sided tape.
- Remove electrical cords and wires from pathways.
- Place automatic night-lights in rooms/hallways.
- Keep a phone accessible (ex. carry your cell phone or a cordless phone with you).
- Attach a bag, tray or basket to your walker so you can carry light items, such as your phone.
- Firmer chairs with armrests are ideal. You can raise chair heights using an extra seat cushion (eg. wedge cushion) or with furniture risers.
- Be aware of pets and consider finding someone to help care for your pet if needed.

Bedroom

- Make sure that your bed is not too low. You can add another mattress or use bed blocks to raise the height if needed.
- Have a sturdy bed-side table for important items (phone, water, etc.).
- Rearrange your closet and dressers so that your clothes are within easy reach.
- Consider temporarily moving your sleeping area to the first floor. If you do not have a bathroom on the main floor, you can set up a commode chair.

Bathroom

- Install any needed adaptive equipment (raised toilet seat, shower chair, tub transfer bench, grab bars/rails). Do not use towel bars, toilet paper holders or soap trays as grab bars as they are not intended to support your weight and can become dislodged from the wall.
- Place a non-slip bath mat in your tub or shower. A hand-held shower head can be helpful.
- Place hygiene items (soap, shampoo, razors) in an easy-to-reach location.
- Secure bathroom rugs to the floor using doublesided tape.
- Keep all necessary toiletries at counter-height level to avoid having to frequently bend or crouch down.

Kitchen

- Move items you use most often to counterheight surfaces or easy to reach shelves, including items in your refrigerator.
- Prepare meals in advance to keep in the freezer and heat in the microwave. If needed, you can also arrange for meal or grocery delivery services.

- Sit on a high stool or chair in the kitchen while you are working on meal preparation tasks.
- To assist you in carrying meals/food items while using a walker or mobility aid, you can place items in a plastic container with a lid, put it in a bag and carry to the desired location (e.g. table) or alternatively get a tray or basket attachment for your walker.

Instructions for the Day Before Surgery

What to do the night before your surgery

- **Do not** eat any solid foods after midnight (12 a.m.) before your surgery.
- **Do not** eat any solid foods the day of your surgery.
- You may drink clear fluids up to 3 hours prior to your surgery (fluids include: water, apple juice, gatorade, black coffee or tea).
- You may have been instructed to take some medications the morning of your surgery. Take these with clear fluids only.
- Remove all nail polish, lipstick and cosmetics before coming to the hospital.
- Leave all of your jewelry and other valuables at home (we cannot accept responsibility for these items).
- Partial plates, dentures, hearing aids and contact lenses can be worn but must be removed before going into surgery (please bring their storage cases with you).
- You may want to bring something to read while you are waiting for surgery.
- If you need an interpreter, please arrange to have someone with you the day of your surgery who can speak English.
- If you do not have anyone you can bring, please let the Nurse know during your Pre-Admission Appointment so that someone can be arranged for the day of your surgery.

What to Expect on the Day of Your Surgery

On the day of your surgery

- Arrive at the hospital 3 hours before your surgery (or at 6:00 am if your surgery is at 8:00 am).
- Please only have 1 person accompany you.
- Use the Murray Street elevators by the RioCan Food Hall.
- Take the elevator to the Perioperative Services on the 7th floor.
- When you reach the 7th floor, proceed to the desk located beside the elevators, take a number and wait by the desk for further instructions.

Registration

- You will meet with an admitting unit clerk
- Please provide your OHIP card and supplemental insurance information and credit card information, to cover any extra charges for private/semi private room (if required).
- You will have an armband placed on your wrist and directed where to wait.

Preparing for surgery

- You will be taken into a private bay and will stay there until your surgery.
- You will be asked to change into a hospital gown and will be provided a personal locked locker to store your belongings during your surgery.
- A nurse will meet with you and get you ready for surgery. They will update your health history and review your medications. Your vital signs will be taken and you will be given preoperative medications (if required).

-
- You will meet with your anesthesiologist who will review your health information and answer your questions.
 - You may see someone from the surgical team to confirm your consent.
 - You will be taken to the operating room by either a stretcher, wheelchair or if you are able, you may walk, (if you have a preference please let the staff know).
 - The length of your surgery will depend on the type of surgery you are having (this information will be reviewed with during your Pre Admission Appointment).
 - If your family is waiting in the hospital while you are having surgery, they will be provided with your identifier number so they can track where you are. If they are not in the hospital arrangements can be made to inform your designated person when you are out of surgery.

Post-Anesthesia Unit (PACU)

- After your surgery you will be taken to the PACU to wake up from the anesthetic.
- You will be closely monitored by the PACU Nurse who will be frequently checking your vital signs, breathing, IV, and bandage. They will provide you with pain and other medications, as needed. Please let them know if you feel unwell in any way.
- If an overnight stay in hospital is the plan for you, then once you are stable and awake, you and your belongings will be transferred by the stretcher to the inpatient unit.
- While you are in hospital overnight your health care team will help manage your pain, you may start eating and drinking when you are ready, we will assist you to the bathroom and with your personal care.
- The Physiotherapist may see you the day of your surgery and the morning after, to assist you to get out of bed, walk with a walker and review your exercises.

If you are going home the same day as your surgery

- You will remain in the PACU area until you are safe to go home.
- Please make sure that you have arranged a designated person to accompany you home from the hospital.
- A responsible adult must also be arranged to stay with you for the first 24 hours after your surgery.
- Your designated person will be notified when you are ready to be discharged from hospital and instructed where to meet you.

Discharge goals

1. **You are able to drink fluids.**
2. **Your pain is controlled.**
3. **You have gone to the washroom to pass urine.**
4. **You have met with the Physiotherapist.**
5. **You have received your prescriptions**
**Your prescriptions can be faxed to MSH Rexall Pharmacy or to your local pharmacy (if you can provide the fax number). This will allow time for your medications to be ready when you are discharged.*
6. **Your wound care instructions have been reviewed (a staple remover and dressing change supplies will be provided).**
7. **Instructions have been given to you regarding your follow up appointment with the surgeon.**

Physiotherapy

Your Physiotherapist (PT) will see you in the PACU within a few hours after your surgery.

Before you are discharged from the hospital the PT will teach you:

- How to get in and out of bed
- How to walk properly with the prescribed gait aid
- How to climb stairs (if required)
- Initiating hip or knee exercises

What to expect after surgery

Mobility

As you prepare for your discharge home, our goal is to have you be as mobile as possible to prevent complications.

Pain control

Although a total joint replacement is major surgery, our goal is to help make you as comfortable as possible. You will be receiving regular doses of oral pain medication in your IV as needed. Be sure to tell your nurse if your pain is not well controlled.

Swelling and bruising

Swelling and bruising can be normal soon after surgery. You may notice it near your incision or it may extend down your operated leg. Swelling is usually worse when you are up during the day but should improve as you recover. It is important to manage your swelling so you are more comfortable and able to do your exercises more easily and effectively.

There are some things you can do to help reduce and minimize your swelling:

- Balance your rest and activity levels
- Lay flat and raise your leg on pillows.
- Support your entire leg making sure not to put the pillow behind your knee only. You will need 3-4 pillows

- Apply ice to your hip or knee 3-5 times daily for ten minutes. This will help any bruising, pain and swelling. You can use a bag of frozen peas wrapped in cloth or use a Cryocuff icing machine (if recommended by your surgeon).
- If your operated leg has swelling then after you to do your exercises; rest, ice and elevate your leg.
- If you have swelling in both of your legs that is new, or pain in your calf, please call your surgeon or family doctor.

Feeling tired

It is normal to feel more tired than usual after your surgery. It takes a lot of energy to get better after surgery. There are some things you can do to help improve your energy level.

- Increase your activity levels gradually, ask for help with your daily activities
- Trying to do your daily personal hygiene activities can increase your strength and independence.
- Follow the exercise plan provided by your physiotherapist
- Eat a healthy diet. Your body needs regular nutrition to heal and give you energy
- Try to get a good night's sleep. Avoid long naps during the day. Make sure your pain is well managed at bedtime and avoid caffeine at bedtime.

Constipation

Constipation is often a problem after surgery because of certain pain medications, limited activity and change in diet. There are things you can do to help prevent constipation.

- Drink plenty of fluids, especially water. Aim for up to 8 glasses a day (unless told otherwise).
- Eat fibre rich foods and drinks (fruits, nuts, beans, whole grains, bran, prune juice, psyllium)
- Be as active as possible
- If needed take the recommended stool softeners and laxatives, as instructed by your doctor or pharmacist

Personal care

We encourage you to continue with your personal hygiene activities as much as possible to increase your strength and independence.

Your incision

The surgical dressing is waterproof. It is safe to shower with, but should not be submerged under water. Some patients apply additional adhesives or plastic wrap to reinforce during showers. Please leave the dressing on for one week. After 1 week from the day of surgery, you should change your dressing and apply the spare dressing provided to you upon discharge. Do not apply any creams/ ointments or clean the wound. The second dressing should remain on for an additional week. You should see your family doctor on or shortly after 14 days following your surgery to have the wound inspected and the staples removed (unless your surgeon has specified otherwise). A final dressing should be applied by your GP and left on for 2-3 days. This may include steri-strips or an island dressing. This can be removed after a few days.

If you notice redness, drainage, or significant bleeding from the incision, please call your surgeon's office immediately.

Nerve Block: Knees/Hips

Post-operative pain management

What to expect

- The nerve block decreases pain sensation. It usually wears off 8 to 12 hours after receiving it, but sometimes can last up to 24 to 36 hours.

Managing your pain

- We strongly suggest you take the pain medication prescribed to you in order to stay on top of your pain management, especially for the first 72 hours. Pain can become difficult to control if you fall behind with your pain medication. The better controlled your pain is, the more you will be able to participate and tolerate your rehabilitation exercises
- Unless you have been advised to avoid the following by your regular healthcare provider, your initial pain regimen typically consists of a short course of:
 - Acetaminophen (Tylenol)
 - Celebrex (Non-steroidal anti-inflammatory)
- In addition to over-the-counter pain medications, an opioid (morphine, hydromorphone, oxycodone, Percocet) has been prescribed to manage your pain, with a goal of 4-5/10 with activity on the pain scale.
- Often patients note the highest pain scores on post op day two (after the block has worn off and activity has substantially increased)
- If your surgeons recommend using a cryocuff post-operatively, it should be applied 4 to 5 times per day for 30 minutes at a time for the first two weeks. Please wear the tensor bandage underneath the cryocuff and remove the tensor bandage between use. You should use the cryocuff after doing your exercises or physiotherapy, and continue using it for 4 to 6 weeks post-operatively, as needed.

- Please contact your doctor or surgeon if you are unable to control your pain. Please contact your surgeon if you only have 10 pain pills left (to get a refill) if you are still requiring them to control pain to participate in rehab.



CAUTION

- If prescribed combination pain medications such as Tylenol #1/2/3 and Percocet/oxycocet please do not exceed the daily maximum dose of acetaminophen.
- Do not take more than one type of nonsteroidal anti-inflammatory (includes celecoxib, diclofenac, ibuprofen, indomethacin, ketorolac, meloxicam and naproxen) unless directed by your doctor/surgeon. For patients on pre-operative pain medications (NSAIDs, opioids) the long-term goal is to eventually stop using these medications. Please follow up with the person prescribing these medications to come up with a plan to eventually get off these medications.

Go to your nearest emergency department if you experience the following:

- Pain is out of control despite medication

Discharge from the Hospital

Making the appropriate arrangements, several weeks before you are admitted for surgery will help ensure that you have a smooth transition when you leave the hospital.

Please make arrangements for a ride home from the hospital for mid-morning of the day of discharge. If you require assistance, please speak to your nurse or social worker.

You may see a clinic social worker at the time of your Pre Admission Appointment. The social worker will discuss options available for your care in the community and will help you plan for your return home.

Things to Watch for After your Surgery

Visit your nearest Emergency Department should you experience any of the following symptoms:

- New or worse shortness of breath or difficulty breathing
- New or worse chest pain, tightness or pressure
- A significant increase in pain, swelling or redness in your calf/calves
- A sudden, severe increase in pain in your new joint

Notify your surgeon/family doctor immediately if you experience any of the following symptoms:

- Increased redness, swelling or sudden increase in bruising around the incision site.
- Fluid from the incision line for more than four days after leaving the hospital
- A foul odour or yellow or green fluid from the incision line.
- Excessive bleeding
- Any other signs or symptoms of infection (e.g. fever, chills, burning on urination or foul smelling urine, etc.)
- A persistent increase in your temperature (over 38 C)

- If you develop an infection at any time (bladder infection, dental abscess, lung infection etc. it is important to have it treated immediately.
- Let your surgeon know if you have gone to the Emergency room after your surgery. It is important they are aware of any possible issues as they may want to see you before your scheduled follow up appointment.

Post-Operative Mobility and Exercises Physiotherapy

The main role of the hospital Physiotherapist will be to assist you to move around safely in preparation for home. The exercise program provided by your therapist will ensure your new joint works well. Your safety is our top priority and your Physiotherapist will assist your strength and walking program to help you regain your independence.

Weight-bearing

The type of surgery you have will determine the amount of weight you are allowed to put through your operated leg. Your doctor and physiotherapist will inform you.

Walking

You will start walking with a walker until you are safe to progress to another mobility aid. Your Physiotherapist will help you progress your mobility and may recommend additional mobility aids as needed. Once you receive equipment recommendations you or a family member will need to arrange for the equipment to be at home.

Refer to the list of suppliers on page 22 for more information regarding equipment rental and/or purchase.

It is important to stand up tall and look ahead while you walk. If you are using an aid, the pattern of walking is as follows: move the aid forward first, then step forward with your operated leg, followed by your non-operated leg.

Caring for your new hip during day-to-day activities

Here are some tips on how to perform day-to-day activities safely and with greatest ease.

Getting In and out of bed:

Move to the edge of your bed.



- As you slide the leg closest to the edge, off the bed, push through your hands and raise your body upright.
- Sit at the edge of the bed. Now, lift the leg closest to the end of the bed, up on to the bed.
- Slide your buttocks back onto the bed.
- Lower your body with your arms while you lift your other leg onto the bed.



Going up and down stairs:

Your physiotherapist will teach you the safest way to go up and down stairs (do not attempt the stairs on your own). Here are some tips to remember to help you do this safely:

- If available, always use a hand railing and a crutch or cane.
- Going up the stairs: step up with your unoperated leg first, followed by your operated leg and crutch/cane.
- Going down the stairs: put your crutch/cane down first, then step down with your operated leg, followed by your unoperated leg last.



Please note "X" indicates operated leg

Note: Routine hip precautions are not needed unless otherwise indicated by your Orthopaedic Surgeon.

Car travel

You are not permitted to drive until about 6 weeks after surgery.

- Push the seat back as far as it can go.
- Stand on the ground, not curb, and lower yourself slowly to sit down.
- Still facing the car door, slide back over the seat until your bottom is near the middle console/driver's seat.
- Move your legs into the car (you may want someone's help to guide your legs into the car).
- Placing a cushion or a slippery surface such as a plastic bag on the passenger seat might make it easier to get into and out of the car.



Exercises to prevent post-operative complications

After surgery you will be encouraged to do the following exercises to help prevent blood clots in your legs and lungs. Your physiotherapist assistant will review these with you.

1. Deep breathing and coughing:

- This exercise can be performed in any position (e.g. lying in bed or sitting in a chair).
- Take five deep breaths followed by two to three coughs every 15 minutes.
- This should be performed every hour of the day that you are awake.

2. Ankle pumping:

- Lying on your back or sitting up in bed, move your ankles up and down as far as possible while keeping your legs straight.
- You may also move your ankles in circles.
- This should be performed every hour that you are awake, pumping each ankle 20 times.
- If you keep your knee straight during this exercise you will feel a stretch in your calf muscles.



Bed Exercises

These exercises are important to reduce stiffness and swelling, strengthen the muscles in your legs, and to encourage movement at your new hip joint.

Your physiotherapist assistant will instruct you on the proper way to do your bed exercises and will review them as needed.

These exercises will have the most benefit if they are performed three times each day, so it is important that you begin to perform the exercises on your own as soon as possible. These exercises will become your "homework" while you are in the Hospital and after your leave.

1. Thigh muscle setting:

- Lie on your back with your leg straight and toes pointed up to the ceiling.
- Tighten your thigh muscles by pushing the back of your knee down into the bed.
- Hold for five seconds.
- Repeat 10 times.

2. Buttock muscle setting:

- Lie on your back or sit in a reclined position in bed
- Squeeze your buttocks together.
- Hold for five seconds.
- Repeat 10 times.



3. Hip and knee bending exercises:

- Lie on your back, place a towel or hospital gown under your thigh, and hold the ends of the towel.
- Slowly bend your knee by sliding your heel along the bed toward your buttocks.
- As your leg is bending, keep your knee pointed toward the ceiling (do not let your leg roll to either side).
- Hold in the bent position for five seconds, then slowly slide the heel back down along the bed until the leg is straight again.
- Repeat 10 times.



4. Single leg bridging:

- Lie on your back, bend your unoperated knee up (keeping your operated leg straight).
- Tighten your buttocks and lift your hips up towards the ceiling.
- Hold for 5 seconds.
- Slowly lower your hips back down to the bed.
- Repeat 10 times.



5. Active assisted quads over roll exercises:

- Place a rolled towel under your knee (you may require assistance for set up).
- Keep your toes pointing towards the ceiling. Try to lift your foot off the bed by tightening your thigh muscle and straightening your knee. Hold onto the ends of a sheet and loop it around your foot. You may use this sheet to help lift and lower your foot in order to straighten the knee. Do not lift your knee off the roll.
- Hold for five seconds and slowly lower the leg.
- Repeat 10 times.



Daily Living Activities

Dressing (eg. underwear, pants)

* Always dress your operated leg first.

- Sit in a chair or at the edge of the bed with your operated leg straight out.
- Grasp the waistband of your pants with a long handled reacher and lower the piece of clothing down to the floor.
- Slip the pant leg onto your operated leg first.
- Pull the piece of clothing over the foot and up past your knee on your operated leg (then grasp the waistband with your hand).
- Continue by slipping your non-operated leg into the clothing as usual.
- Stand up with a walker/crutches for support, if needed.
- Pull the pants up the rest of the way.
- To remove your pants: unbutton/unzip pants and lower garment down past hips using walker/ crutches for support if needed.
- Sit down to remove pant leg from non operated leg first.
- Remove pant leg from operated leg using a long handled reacher.
- Pick your pants up off the floor using your long handled reacher.

Socks

- Sit down.
- Put the sock over the plastic part of the sock aid.
- Holding on to the straps/handles, drop the sock aid to the floor and put your foot into the sock.
- Pull both straps/handles up towards your body until the sock is fully on your foot.
- You can use a long handled reacher or long handled shoe horn to ensure the sock is on properly.
- To remove your sock, use a long handled reacher.



Shoes

- Slip on shoes are ideal (you can use elastic shoe laces, Velcro straps).
- Sit down.
- Use the long handled reacher to hold the shoe at the top (eg tongue) for support as you slip your foot into the shoe.
- Use the long handled shoe horn to support the back of the shoe as you make sure your foot goes in.



Toileting

- Getting on and off the toilet may be easier if you use a raised toilet seat.



Bathing

- Using a tub transfer bench: bench should be placed facing the shower head and faucets, with two of the legs inside the tub and the other two legs outside the tub.
- Move onto the outer edge of the bench until you are able to feel the bench touching the back of your legs.
- Slide your operated leg out and slowly sit down.
- Lean back and slide your bottom halfway onto the bench.
- While still leaning back, shift on your bottom and slowly swing legs into tub one at a time until you are facing the shower head and faucets. Use long handled sponge/brush to wash your legs/feet.
- A shower chair can be used in a shower stall.



Equipment Checklist

Crutches



Two-wheeled walker



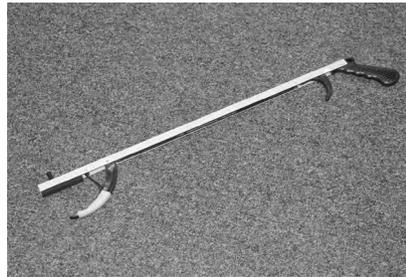
Shower chair



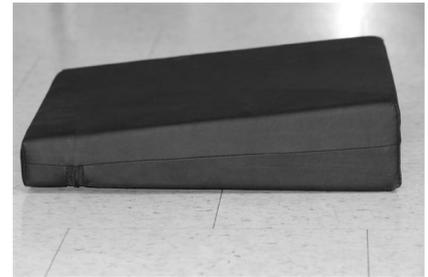
Tub transfer bench



Reacher



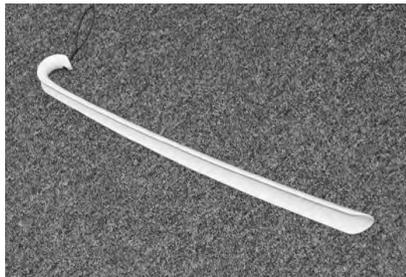
Wedge cushion



Sock aid



Long-handled shoe horn



Raised toilet seat with arms



The physiotherapist and/or occupational therapist will review your need for walking aids/equipment during your preoperative education visit. If you currently own aids such as crutches or a cane you may bring them with you, labeled with your name, to the Hospital. Prior to your surgery, you or a family member will need to arrange for your equipment to be at home when you are discharged from Hospital. You may refer to the provided list of local companies from which equipment can be rented or purchased. Ask the therapist for an additional list of providers in your area.

For more information regarding your hip surgery, please refer to the following websites:

www.mountsinai.ca/care/hip-and-knee

www.myjointreplacement.ca

<https://whenithurtstomove.org/my-surgery/talk-to-someone/>

Retail Outlets and Equipment Suppliers

Please ask your physiotherapist for additional outlets in your area.

All-Care Home Health Care

3462 Kingston Rd. 416-261-6409

Davisville Home Health Care

1901 Yonge St. Unit 4. 416-483-1665

HME - Home Medical Equipment

77 St. Regis Cres. S. 416-633-9333

Hunt's Healthcare Inc.

109 Woodbine Downs Blvd. Unit 7. 416-798-1303

In Motion Services

24 Martin Ross Ave. Unit 6. 416-638-9522

Main Drug Mart

1100 Sheppard Ave E
416-221-1700

MED+Home Health Care

285 Midwest Rd. 416-477-5960 ext. 205

Motion (multiple locations across Ontario)

- 1000 Gerrard St. E. 416-462-3327
- 72 Carnforth Rd. 416-751-0400 (wheelchair repairs only)
- 202 Sparks Ave. 905-715-7853

Nu-Life Home Health Care Limited

2802 Keele St. Unit 105. 416-633-3457

Rexall Pharmacy

(canes, crutches & wedge cushions only)
Mount Sinai Hospital 416-586-8288
600 University Ave (3rd floor, Street Level)

Seniors Store

4974 Dundas St. W. 416-231-1300

Starkman Health Care Dept

1243 Bathurst St. 416-534-8411

Vital Mobility Home Health Care

(other locations in Ajax & Vaughan)
3537 Bathurst St. 416-901-3509

Wellwise by Shoppers Drug Mart (multiple locations)

- 528 Lawrence Ave. W. Unit 16A. 416-789-3368
- 65 Wicksteed Ave. Unit 200. 416-467-4673
- 5230 Dundas St. W. 416-236-1201

*Some of these vendors provide rentals and will deliver to your home.

You can search the Internet for:
"hospital equipment & supplies"

Transportation (for Toronto area only)

Red Cross (call on Mondays to book)
416-236-3180 (hours 8:30am-4:30pm)

Circle of Care
416-635-2860 (hours 8:30am-4:30pm)
<https://www.circleofcare.com/transportation/>

GTA LHIN funded transportation options

Please explore the following list of resources by doing an Internet search

Central LHIN

- Central Health Line
- Better Living Health and Community Services
- CHATS - Community & Home Assistance to Seniors
- Circle of Care
- Etobicoke Services for Seniors
- Lumacare (formerly Downsview Services for Seniors)
- North York Seniors Centre
- York West Active Living Centre



Central East LHIN

- Central East Health Line
- Carefirst
- Community Care City of Kawartha Lakes
- Community Care Durham
- Community Care Peterborough
- Community Care Northumberland County
- Haliburton Highlands Health Services
- Momiji Health Care Society
- St Paul's L'Amoreaux Centre
- Transcare
- Scarborough Centre for Healthy Communities
- Yee Hong Centre for Geriatric Care

Central West LHIN

- Central West Health Line
- Canes Community Care
- Caledon Community Services

Mississauga Halton LHIN

- Mississauga Halton Health Line
- Canadian Red Cross Transportation Services

Toronto Central LHIN

- Toronto Central Health Line
- Humber Community Seniors Services
- Toronto Ride
- Warden Woods Community Centre Revera

Respite/Short stay facilities

These facilities have limited rehab. Please call the individual facility for more information:

Revera Living

Various locations, offering 1-2wk stays, please call 1-877-929-9222

Amica

General number: 416-487-2020

Amica at Bayview Gardens

19 Rean Dr, Toronto, ON M2K
(647) 286-7935

Amica at Thornhill

546 Steeles Avenue W, Thornhill, ON L4J 1A2
(905) 886-3400

Amica at The Balmoral Club

155 Balmoral Ave, Toronto, ON M4V 1J5
416-927-0055

Chartwell – various locations – please call and ask which accept short stays: 1-855-461-0685

(i.e, Chartwell Avondale is at Queen St. E and Leslie, there is also one in the Beaches, West Toronto: The Prince Edward contact Julie 416-637-9167, and Chartwell Mississauga has accommodated 2 week stays before).

Davenport Senior Living

877 Yonge St, Toronto, ON M4W 3M2
(416) 923-8887

Living Life On The Avenue

1066 Avenue Rd, Toronto, ON M5N 0A3
(416) 483-9900

Other Resources

Health Line
www.thehealthline.ca

Please explore this website for resources from transportation to home support throughout Ontario.

Mount Sinai Hospital,
Joseph & Wolf Lebovic Health Complex
600 University Avenue
Toronto, Ontario, Canada M5G 1X5
T 416-596-4200
mountsinai.ca