

## Total Hip Replacement Occupational Therapy Advice for Safe Discharge

### How you can help prepare for surgery:

Bring in the following items:

- A long handled shoehorn, and an aid for reaching (grabber or helping hand).
- Comfortable slip-on shoes and slippers with backs that can be easily put on using a shoehorn.
- A bag which can be worn across you - so that you can carry things while your hands are occupied with walking aids.
- Your hip folder.

### Points to consider at home:

- Measure the height of your furniture as requested in the environmental sheet environmental sheet, sent out with the hip folder. For the first few weeks it is important to maintain a right angle at the hip when seated. Your bed also needs to be of suitable height – your occupational therapist will be able to advise at hip school. You may need to adapt your chair by adding extra cushions, or use a chair of more suitable height for short-term use.
- **Personal care.** It may be useful to have a stool or chair next to the basin so you can sit down to have a strip wash, short term.
- **Shower cubicle.** Consider where you may place a balancing hand or whether you could hold the side of the shower frame when stepping into the cubicle. Practice stepping into the shower tray with the unaffected leg and stepping out with the operated leg prior to admission.
- **Over bath shower.** Access to this will be discussed and potentially practised at clinic 2 weeks after surgery.
- **Bathing.** Dry practise will be completed in the Occupational therapy (OT) flat at either 2 weeks or 6 weeks.
- **Household tasks.** Think about where you might get help with changing of bed linen, laundry, vacuuming and shopping whilst you are walking with walking aids. Perhaps family, friends or neighbours can help or some neighbourhoods have voluntary agencies who may assist you, but ask now don't leave it until you go home after your operation.

- **Kitchen activities.**
  1. Stock up the freezer with basic supplies such as ready-made meals, milk and bread. Stock up cupboards with tinned and packet foods.
  2. If you are alone during the day consider where you can eat. As you will be unable to carry plated meals whilst walking with walking aids. The OT may provide a trolley if it is not possible to eat in the kitchen. Consider buying a flask or insulated beaker for hot drinks or soup which can be carried in a neck or shoulder bag.
  3. If you have a stool of suitable height, it would be possible to sit facing the work surface, with the under bench cupboard door open to allow room your knees.
  4. If you have a table in the kitchen, move it to be within easy reach of the work surface. Check the height of the chair or stool to be used. This will need to be practised during your assessment.
  5. Arrange commonly used items in accessible groups to avoid excessive reaching or bending or walking about.
    - Position your kettle close to the sink and fill using a plastic jug. Move tea, coffee, sugar, mugs, cutlery near by.
    - Rearrange fridge freezer with regularly used items on the top shelf for easy access. Avoid large containers of milk.
  6. Use one crutch in the kitchen and take support through the other arm by placing hand on the worktop. While standing still, move item forward, then use crutch and work surface as support to walk towards it.
  7. To reach down into low cupboards or fridge or freezer, extend operated leg out behind you and take weight through good leg. Place crutch in door hinge or onto bench to prevent it falling. Keep one hand on the work surface for support.
  8. When reaching into high cupboards, take support from surface in front of you. Ensure your feet are apart to provide a stable posture and stand in front of the object you are lifting down (do not lean over to the side).
  9. Sit down where possible e.g. to do ironing or prepare vegetables.
- **Caring for your pet.** Feeding bowls will be reached more easily if they are positioned on a box or biscuit tin, near to a bench or table, which can be used for support.
- **Car user as a passenger following surgery.** Ask the driver to move the front passenger seat back as far as possible, putting a plastic cover assists sliding across the seat. Turn with you walking aids until the back of your legs are touching the car then hand your walking aids to the driver. Lower yourself down onto the car seat, holding onto the doorframe if necessary. Slide your bottom across the passenger seat towards the handbrake then bring in your legs. Full instructions are found on a separate sheet within your hip folder. Please read and practice before admission.

The occupational therapy team will be available to discuss any particular concerns relating to everyday activity both on the ward and at Post Operative clinic. You will also practice activities in our assessment flat, a few days after surgery.

## Getting In And Out Of The Car Guidance For Patients Following Total Hip Replacement.

### **Preparation.**

Always use the front seat. Before you start, ask someone to move the passenger seat back as far as possible and if you are tall move the driver's seat back, in line with the passenger seat. Reclining the back of the passenger seat will give you more room.

Avoid getting in or out of a car parked against a kerb. The driver must leave adequate space for you to step onto the road.

If you place a **plastic bag** on the passenger seat it will help you slide back and into position more easily. Remember to remove it from under you before you start your journey.

### **Getting In.**

1. Turn with your walking aids and feel the car sill with the back of your legs. Hand your walking aids to the driver.
2. Place your right hand on the dashboard and your left hand on the back of the passenger seat.
3. Place the operated leg out in front of you and sit down slowly.
4. Move your bottom right back towards the driver's seat. If you have long legs you may need to actually go on the driver's seat.
5. Now lift your legs around and into the car with as little twisting as possible, but keep your operated leg out straight and your toes pointing upwards until you are in your seat.
6. Lift your bottom across into the passenger seat and get yourself comfortable. Remove the plastic sheet at this point. Remember to reach for the seat belt with your left hand.

\* If there is a raised armrest or other obstruction between the two front seats, which would prevent you from sliding across the seats use the following method:  
Recline the front passenger seat fully; it will now be possible to slide up and backwards along the seat and its back, bringing the extended legs into the car at that point.

### **Getting Out.**

1. Move your bottom back across the driver's seat.
2. Lift your legs out of the car and slide forward to the edge of the passenger seat.
3. Place your left hand on the back of the seat and your right hand on the dashboard, (not the car door), and push yourself up to stand.
4. Then take your walking aids from the driver.