

## Discharge Instructions – Total Hip Replacement

**Surgery performed:** Total Hip Replacement (THR)

**Prognosis:** Your pet has a good chance to make a full recovery.

**Convalescent period:** Weight bearing is typically seen within the first week after surgery. By two weeks after surgery most dogs are bearing a moderate amount of weight on the operated limb. By 6-8 weeks after the surgery the lameness should be resolved or greatly improved.

**Please give us a call if lameness is not gradually improving, or if severe lameness develops acutely on the operated limb.**

**Diet:** If your companion will not eat the regular diet, a home-made bland diet (50:50 mix of meat and carbohydrate) consisting of lean hamburger, chicken breast, lean turkey meat and a carbohydrate source such as rice, potato, or pasta) should be offered for 3 days and then wean back onto the regular diet over the next three days.

**Bowel movements:** Your companion may not have a bowel movement for the next 4 days after surgery. If your companion does not have a bowel movement after 4 days or is straining to defecate, constipation may be present. Unflavored Metamucil at a dose of 1 teaspoon per 50 pounds body weight can be mixed in canned food (in each meal) as a laxative. If this treatment is not effective, other laxatives can be prescribed.

**Exercise:** Use a sling that is placed under the abdomen in front of the back limbs when walking outdoors for support during the first two weeks after surgery. During icy weather conditions, the sling should be used at all times outdoors (except when your pet is posturing to eliminate). If it is not icy, remove the sling once you are outdoors so that your companion will be able to urinate. **Cover all slippery floors with throw rugs or indoor/outdoor turf carpet for the first 12 weeks after surgery.**

**Limit activity to very short leash walks for bowel and urinary purposes until the for 12 weeks. Do not leave your companion off the leash for 3 months. No jumping up and down off furniture, climbing stairs or rough-housing with other pets or people.** Strenuous activity may result in severe complications.

### Rehabilitation therapy

1. First 3 days after surgery:

a. Apply a cold compress (frozen peas, frozen corn or a cold gel pack) to the operated hip three times daily, twenty minutes each time for the next three days. Place a thin towel between the cold compress and the hip for patient comfort.

2. Day 4 to day 14:

a. Apply a warm compress (warm water bottle or microwaved raw rice in a cloth bag) to the hip three times daily, ten minutes each time. Monitor the temperature of the compress so that it does not burn the skin. Place a thin towel between the warm compress and the hip for patient comfort. Follow this by gentle massaging of the muscles of the limb from bottom to top, focusing on the muscles in the front of the hip.

b. Range of motion exercises **should not** be done.

3. Day 14 to the 12th week postop:

a. As long as your pet is bearing a moderate amount of weight on the limb 10 minute slow walks three times daily are permitted.

b. We also recommend professional rehabilitation therapy, which can start in 4 weeks after surgery at an animal rehabilitation facility.

- c. A recheck and x-ray should be done at our hospital 12 weeks after surgery.

**Incision:** A bandage covering the incision should be removed tomorrow. Daily, check the incision for signs of infection: redness, swelling, pain or discharge. Swelling of the lower part of the limb (hock) is common and will resolve within 7 to 10 days. Do not allow licking of the incision as this could cause an infection or open the incision. An Elizabethan collar should be kept on your companion for 2 weeks to prevent licking of the incision.

**Follow-up examinations:**

1. Please make an appointment for a recheck with us in 2 weeks for an evaluation of the operated limb.
2. A recheck and x-ray should be done at our office with us in 3 months. Please fast your pet for this visit, as sedation likely will be needed.
3. On an annual basis, we recommend to examine &&PTNAME and x-ray the pelvis.

**IV catheter bandage:** Your companion had an intravenous catheter for the administration of IV fluids during anesthesia. The catheter has been removed and a small bandage has been placed over the site (typically on the lower part of a front or hind limb) to prevent bleeding. Please remove this bandage when you arrive home.

**Long-term management of osteoarthritis (of other joints that may have arthritis):**

Recommendations to control signs of osteoarthritis include:

1. Weight management: your pet should be kept in a trim body condition
2. Do not change your pet's diet unless directed by us or your primary care veterinarian. Diets with high levels of omega fatty acids can be fed if your pet has arthritis in other joints in the body: Hill's Mobility diet or other similar prescription diet is recommended. It is important to wean your pet onto this diet over a period of 2 weeks to prevent excess flatulence and/or diarrhea. Note: if your companion has food allergies do not change the diet.
3. Nutraceuticals: Dasuquin is a high quality, very pure form of chondroitin sulfate and glucosamine that is readily absorbed by the intestines in dogs. In addition, it contains avocado/soybean unsaponifiables (ASU), which are natural anti-oxidants that help alleviate signs of arthritis. Please obtain this supplement from your primary care veterinarian.
4. Pain management: If your pet has arthritis in other joints of the body, Intermittent use of a non-steroidal anti-inflammatory may be needed during periods of soreness due to changes in the weather or high activity. If needed please obtain this medication from your primary care veterinarian.
5. Exercise: Maintaining good muscle mass is important for long-term function. Daily walks, swimming, incline walking and regular activity are recommended after all exercise restrictions have been lifted.

**Long-term prevention of infection of the replaced hip:**

1. Patients that receive a hip replacement are at a small, but increased risk for developing an infection in the bone surrounding the metal implants. Should your pet develop an infection anywhere on the body, prompt treatment with antibiotics is essential.
2. Your pet should have dental prophylaxis and dental x-rays once or twice yearly to minimize the formation of periodontal infection which can be transferred to the hip via the blood stream.
3. Should your pet require surgery or dental cleaning/extractions at any time, intravenous antibiotics should be given by your primary care veterinarian 30 minutes prior to the procedure and oral antibiotics given for 7 days after the procedure.

4. If your pet is prone to dermatitis, very careful management of this condition by your primary care veterinarian or a dermatologist is essential.
5. If your pet is prone to urinary tract infections, it is essential that this be closely monitored by your primary care veterinarian and be treated promptly.

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Medications: A pain management protocol has been prescribed which should be very effective. If your pet seems to be uncomfortable (whining, restless), the most common cause for this is that your pet needs to urinate or defecate. Take your pet outdoors to eliminate (make sure that the sling is removed once upon arriving to the area for elimination). If your pet still seems painful, please give us a call.

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