
Patient Surgery Discharge Instructions

Hip Arthroscopy with Labral Repair

These instructions are intended to guide your recovery to be as smooth as possible. Always follow any additional instructions given by Dr. Mayo or his team, contact the office if you have questions.

Activity

Weight Bearing/Crutches

- You can walk placing only the weight of your leg only down on the ground.
- Surgery will cause your thigh muscles to be weak, so take your time and be safe.
- You will be on crutches for 4 weeks.

Motion Restrictions

- Do NOT flex your hip more than 90 degrees.
- Avoid external rotation of your hip (knee away from midline).

Driving

- You may not drive until cleared to do so by Dr. Mayo or his team.

Physical Therapy

- You will be advised on your physical therapy needs at your first postoperative visit.

Smoking

- Refrain from smoking as it can interfere with healing.
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Pain Control

Postoperative pain is common but should be controlled by these interventions.

Ice Therapy

- Apply ice or use your cold therapy unit, if you have one, as often as you can tolerate for the first several days after surgery. Wear it over your clothing.

Pain medications

- Tylenol (Acetaminophen) 500 mg
 - Take every 6 hours for 1 week (scheduled, not as needed) to control your pain.
 - After 1 week, take it as needed.
 - Oxycodone 5 mg – this is a narcotic pain medication. Take as instructed below.
 - Day 0-1: Take 5 mg every 4 hours as needed for pain.
 - Day 2-3: Take 5 mg every 6 hours as needed for pain.
 - Day 4-6: Take 5 mg every 8 hours as needed for pain.
 - Day 7-8: Take 5 mg every 12 hours as needed for pain.
 - Day 9: Take 5 mg before bedtime as needed for pain.
 - Do not take more than prescribed. After this continue with acetaminophen.
 - This is the only prescription for a narcotic pain medication that we will provide. Any additional pain medications after this will need to be provided by your primary care physician.
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Other Medications

Blood Thinner

- Aspirin (Ecotrin) 81 mg – this is to help prevent blood clots after surgery.
 - Take twice a day for 28 days whether you are having pain or not.



Other Medications

- Naproxen 500 mg – this is an anti-inflammatory medication to help with pain and prevent heterotopic ossification (abnormal bone formation).
 - Take twice a day for 28 days whether you are having pain or not.
- Promethazine (Phenergan) 12.5 mg – this is to help with postoperative nausea.
 - Take every 6 hours as needed for nausea/vomiting for up to 7 days.
- Colace 100 mg – this is an over the counter medication for postoperative constipation.
 - Take twice a day as needed for constipation.

Home Medications

- Resume or hold home medications as directed in your discharge papers.

Dressings/Bathing

Bandages/Dressings

- Keep all your bandages clean and dry. If your dressings get wet, or saturated with blood, please call the office at the number below for instructions.
- Remove your bulky bandages on postoperative Day 3. Leave the small white band-aids (Steri-Strips) on. They will be removed when your sutures are removed around 2 weeks after surgery.
- You may be able to see suture tails under your bandages. This is normal. Do not pull them, we will take them out in clinic.
- After the initial bandages are removed, keep the wounds covered with clean dressings.
- Postoperative bleeding is not unusual. Reinforcing your dressing is alright. If you have concerns about the amount of bleeding, please call.

Showering/Bathing

- You can shower after the initial post op dressing is removed allowing water to run over the area. Do not scrub the incision area. Pat the area dry.
- No soaking in a bathtub or any swimming (pool, hot tub, lake, river, etc.).

Follow-up & When to Call

- Follow-up will be in approximately 1-2 weeks with Dr. Mayo or his team. If you do not have an appointment already scheduled, please call the office number above.
- If you have *any* concerns about your recovery, feel free to call our office. It is better to check early rather than wait if something seems wrong
- Call the office promptly and/or report to the Emergency Department for evaluation if you develop any of the following: signs or symptoms of infection, including fever >101.5, marked increase in pain, new redness, or increased drainage, particularly purulent drainage, or if you develop unusual chest pain and/or shortness of breath, significant calf swelling, tightness, or pain.
- Call the office or seek medical attention if you have calf swelling, redness, or pain; this can be a sign of a blood clot (DVT).
- If your fingers or toes become cold, discolored, or you feel increased numbness or tingling, loosen the bandages slightly and call the office if symptoms do not improve quickly.
- If this is after hours and urgent, please call 855-750-5757. If of an emergent nature, please go to your local Emergency Department to be evaluated.

