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POST-OPERATIVE EDUCATION: HIP ABDUCTOR TENDON REPAIR

WEIGHT BEARING & BRACE:

Abductor Tendon Repair: You will use a specialized abduction brace or pillow at all times following surgery. This is meant to keep your leg at an angle away from your body to protect the repair. You may use the abduction pillow when you are seated or sleeping. You may NOT put your weight on your operative leg. That means that you MUST use crutches or a walker EVERY TIME you walk for 6 weeks. We DO want you to be up and around at home as much as possible after surgery. You will be “toe-touch” weight-bearing, which means you will place your foot flat on the ground to “hold your place,” but will not put any weight on the foot. Do NOT hold your foot in the air while you walk with crutches; if you are doing this correctly, all muscles in your hip and leg will be relaxed.

MOVING YOUR HIP:

It is OK for you to start moving your hip right away. Keep your leg away from the midline of your body at all times with the brace or pillow. You should not push past the points of pain, and should not bend at the waist past 60°. Your surgeon will discuss progression of activity at clinic follow-up visits.

LEG EXERCISES:

You will learn additional exercises in Physical Therapy, which typically starts within 2-6 weeks after surgery. Your surgeon will discuss the timing of therapy at clinic follow-up visits.

ICE:

Please note that with the dressings placed during surgery, you may notice decreased benefit from the ice. Use as needed and if you notice benefit. Ice is most helpful in the first 3 days after surgery, but can help up to 2 weeks after surgery. We do not recommend that you use heat, as this can increase swelling.

If you chose to purchase a commercial ice machine, please use it according to manufacturer’s recommendations.

If you chose not to purchase an ice machine, you may use a commercially available ice bag or fill a large plastic bag with ice and water. (Do not place a plastic bag directly on your skin, rather place a towel on your hip in between your skin and the ice bag.) You can ice your hip 20 minutes on and 20 minutes off throughout the day. Do not ice an area longer than 30 minutes at a time, as this can cause frost bite.

BANDAGES:

You may remove tape and WHITE gauze the morning after surgery. Please leave the YELLOW gauze on your skin and cover with Band-Aids. You may remove the Band-Aids and gauze to shower THREE DAYS after surgery. If you have white Steri Strips, DO NOT remove them. If a Prineo mesh dressing was applied, it will be removed in clinic at your post-operative visit. It is OK to get your incisions wet after the bandage is removed, but it is very important not to soak the incision underwater (no bath, pool, hot tub etc.) for 3 weeks. It is OK to wash the incisions gently with soap and gently pat dry with a towel. Do not place any lotion or other ointment on your incisions. You may cover them with Band-Aids for comfort if they catch on your clothing.

MEDICATIONS:

Required Medications:

Blood Thinner: You will be prescribed a blood thinner (Ecotrin – stomach-protective aspirin, Lovenox – by injection, or Eliquis) to be taken for prevention of blood clots. These will be used for 2-6 weeks.

Additional medications:

Narcotic pain medicine (such as Percocet – oxycodone or Norco – hydrocodone): Take this AS NEEDED only. Start with Percocet (stronger) if given a prescription for multiple narcotics. Transition to Norco (less potent) as your pain improves. You may stop narcotics whenever you can tolerate the pain. Do not take additional Tylenol (also called acetaminophen) with these medicines, as they already have Tylenol in them. You may SUBSTITUTE Tylenol for a narcotic pill if you choose to. Be certain that you do not exceed the maximum Tylenol dose on the Tylenol bottle.

Stool softener: Pain medicines often cause constipation. It is best to take this medicine when you start taking narcotics and before you have a problem.

Zofran (ondansetron): You may take this medication if you are having nausea or vomiting.

Robaxin (methocarbamol): This muscle relaxer may help with spasms experienced commonly after hip surgery.

You may also use **SCDs** (sequential compression devices) following surgery. These squeeze your legs, and are further protection against blood clots. Compression stockings should be worn for 3 days, with short breaks.

FOLLOW-UP APPOINTMENTS:

You should have a **follow-up appointment** with your surgeon in about 2 weeks. You may also have an additional visit with the Physician's Assistant within a few days of your surgery. Call (480) 964-2908 right away if you do not have an appointment already scheduled. We will check your incisions and remove any sutures at the 2-week visit. We will also answer any specific questions you may have about your surgery. You should start Physical Therapy as directed (commonly approximately 2 weeks following surgery), unless other instructions were given.

CALL OUR OFFICE at (480) 964-2908 with any urgent or emergent questions or concerns that you may have, or if you develop swelling in your leg with calf pain, swelling that will not go away when you elevate your leg, a temperature above 101.4, or drainage from your incisions.

If you experience high fever (above 102.5), chest pain, difficulty breathing, fainting: go to an **Emergency Department** close to your house.