

DRYDEN REGIONAL HEALTH CENTRE **GUIDELINES FOR RESUMING ACTIVITY FOLLOWING** **TOTAL HIP REPLACEMENT**

The following chart will guide you as to when you can start normal activities. However, there may be some exceptions. Confirm with your surgeon at your 6-8 week check up regarding progression. Surgeon will advise you when you can stop following your hip precautions.

At 6 weeks	At 12 weeks	Discuss with Surgeon	Never
Stationary bicycling	Bowling/curling/ Outdoor cycling	Downhill skiing	Jogging/running
Driving	Gardening, ballroom dancing Golf	Cross country skiing	Cross legs
Side lying on operated hip in addition to lying on other hip with pillows.	Swimming with flutter kick	Weight lifting involving your legs	Cut your own toenails with legs crossed.
Sexual activities (4-6 wks), if comfortable, no hip bending more than 90 degrees.	Bending hip more than 90° (up to 80 degrees) to put on socks and shoes or cut toe nails – footstool.	Sitting in the bathtub	
Walk without walker, cane or crutches whenever the therapist or doctor advises.	Use a regular toilet seat	Yoga	
Can start hip abduction exercises in standing.	Walk with a cane 4-6 months for long distances to prevent limp, unless otherwise advised.	Racquetball ,Squash, Tennis, Volleyball	

It is important to **gradually** introduce the movements that you were taught to avoid after surgery.

For example, you will gradually bend your hip beyond 90 degrees (right angle ‘L’) using your own muscles to perform the movement. These “new” movements should be done within your comfort zone. **Avoid forceful or passive movements.**

Walking is an excellent activity for rehabilitation. You are strongly encouraged to gradually increase your walking distance after you leave the hospital. Walk outdoors as long as sidewalks are dry. Consider going to the arena, high school, or other large store to walk when the sidewalks are wet and slippery.