

Hip Preservation Program

Periacetabular Osteotomy
(PAO)



www.orthopedicONE.com



Hip Preservation Program

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Welcome to Hip Preservation

At Orthopedic One, we work hard to preserve your hip joint. Hip preservation means more than just hip surgery, it is total care of your hip joint. Our goal is to help you be free of pain, return to physical strength and good range of motion.

We take a team approach to care for your needs. Your treatment team may include physicians, physician assistants, physical therapists, athletic trainers, radiology and sports medicine. Together, we manage your care to reduce downtime from surgery and get you back to the activities you enjoy.

At Orthopedic One, you are an important member of your care team. Please share your needs and concerns with us. We are here to best serve your needs. We want to help you learn more about your hip and the care needed for your health and recovery.

- Please read this booklet as well as share it with friends and caregivers who will help you while a part of our hip preservation program
- Share the therapy booklet with your care team, including your physical therapist, so we can work together to best guide your needs

Sincerely,

Thomas J. Ellis, MD

Our Offices

Dublin

6840 Perimeter Drive
Dublin, OH 43016

Sawmill

4605 Sawmill Road
Upper Arlington, OH 43220

Surgery Locations

Dublin Methodist Hospital

7500 Hospital Drive
Dublin, OH 43016

Contact Us

Scheduling

614-827-8700

Fax

614-827-8701

Email

columbushiparthroscopy@gmail.com

Website

Columbushiparthroscopy.com
Columbushipdysplasia.com
Hipdysplasia.org

Surgical and Post Operative Appointment Schedule

Surgery Appointments

Surgery Procedure: _____

Surgery Date: _____

Surgery Location: _____

Post Operative Appointments

2 Week Post Op Visit with Tiffany: _____

6 Week Post Op X-ray: _____

6 Week Post Op Visit with Dr. Ellis: _____

6 Week Post Op visit with Physical Therapy: _____

**Please contact our office if you are unable to make these
appointments or need to reschedule.**

**Additional visits will be scheduled after your 6 week follow up
appointment based on your individual progress after surgery**



About the Hip Joint

The hip is a weight bearing joint that is made up of the pelvis and femur. Together, the round end of the femur fits into the socket, or acetabulum. The socket is covered by a soft tissue or cartilage called the labrum.

Hip Dysplasia

In patients with hip dysplasia, the hip joint is the wrong shape. The hip socket is not in the correct position to cover the femoral head completely. This abnormality can result in damage to the hip joint and cartilage.

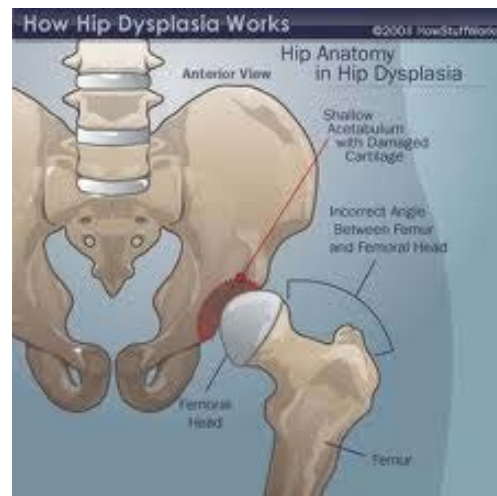
Why Treatment?

Periacetabular osteotomy, or PAO, works to correct the anatomy of the joint and avoid further damage and pain in the hip. The surgery is performed using an open approach to allow for appropriate visualization. A series of cuts around the socket, acetabulum, are made to adjust the position of the bones. The bones are then screwed down into the new position using x-ray as guidance to ensure proper positioning of the bones after the correction has been made.

Beginning the Process

Testing for hip problems starts with your medical history, physical exam and imaging. X-rays are taken to check the structure of the hip joint and the amount of space left between the bones. MRI may be used to check for labral tears in the joint. 3D CT may be used prior to surgery to assess boney deformity.

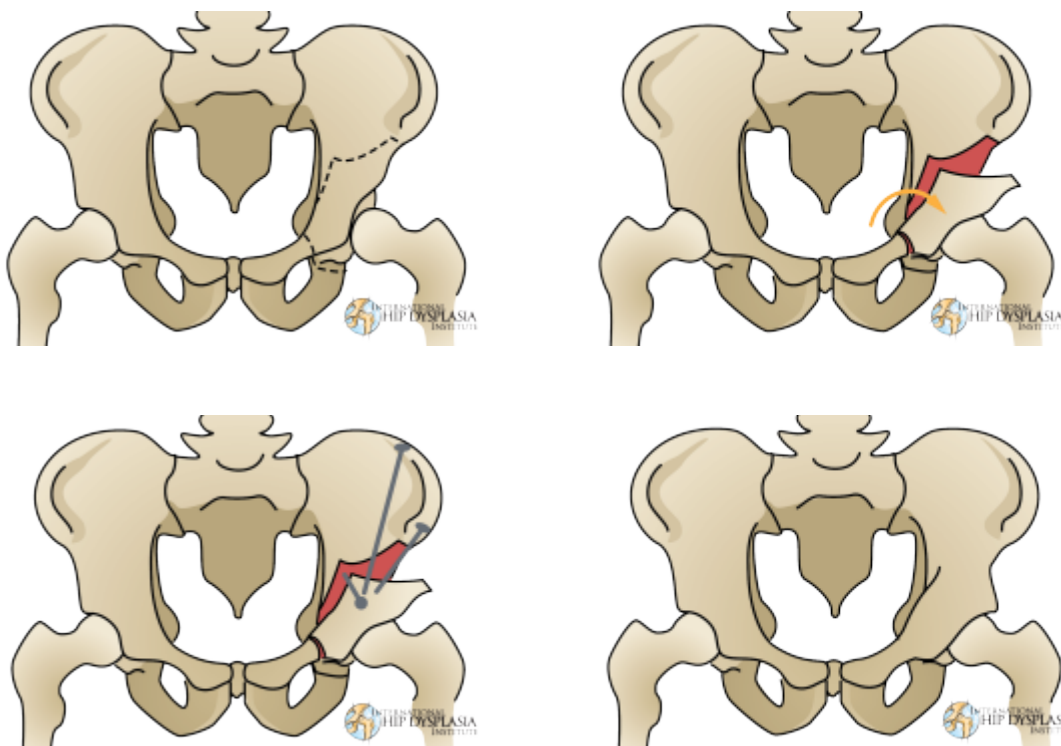
The goal of any treatment is to protect the hip from degeneration and further damage. Hip problems can start at any age but athletes may be at higher risk due to repetitive motion.



Source: howstuffworks.com

Periacetabular Osteotomy

Periacetabular Osteotomy, or PAO, is used to correct hip dysplasia and minimize further joint damage and pain.



Source: hipdysplasia.org
Video also available under adult hip dysplasia treatments

Periacetabular Osteotomy, PAO Hip Dysplasia

This surgery is most often for patients less than 40 years of age with no signs of osteoarthritis of the hip. It may help to improve your function, decrease pain and minimize risk of further joint damage.

Periacetabular Osteotomy does not treat arthritis or inflammatory hip problems

Frequently Asked Questions about Hip Surgery

You may have questions about hip surgery and hip arthroscopy. Here are some of the common questions to help you feel more confident in your treatment plan.

What are the risks?

Most patients have a low risk for problems from surgery. You may have pain and numbness in the surgery area or groin after surgery. There is a small risk of fracture during the surgery. You may have bleeding from your surgical wound. You will learn the major risks of surgery when talking to the doctor and reading the surgery consent form. Major risks of any surgery include but are not limited to infection, pneumonia, heart problems, or blood clots. There is little risk of death with this surgery.

Your doctor will always discuss the risks of surgery specific to your health.

How long will it take to recover?

Your hip will continue to heal and gain strength for up to 1 year after surgery. Common problems include loss of strength and limited range of motion as the hip heals. Most patients feel better about 3 months after surgery. By 6 months, most patients are happy they had surgery.

When can I return to work?

Talk to your employer about medical leave. You will be excused by our office for 3 months after surgery. You may be able to return sooner based on your job. Please contact the office when you are ready to return to work so we can provide you with a letter for your employer.

When can I restart a sport or other activity?

It depends on the activity or sport. It also depends on how your body is healing and improving after the surgery. **Always talk with your doctor and physical therapist before restarting sport or active hobbies.**

Hip Surgery Checklist

All checklist items must be completed before surgery is scheduled:

Surgery Checklist

- See a cardiologist or heart doctor, if you have a known heart problem or have seen a cardiologist in the past. The cardiologist needs to document that you are well enough (cleared) for surgery.
- If you have diabetes, your hemoglobin A1C (HgB A1C) level must be less than 7.0.
- Your body mass index or BMI must be less than 32.
- You must quit using all tobacco products, including nicotine patch and/or gum, smokeless tobacco, e-cigarettes that contain nicotine, cigarettes, cigars. A blood test is given prior to surgery (within a few days of surgery) to check for nicotine in your blood. **You need to quit all tobacco products at least 2 weeks prior to this test. If nicotine is present, your surgery will be cancelled.**

If you need help quitting tobacco to have this surgery, please tell our office or call the Ohio Tobacco Quit Line at 1-800-Quit Now or 800-784-8669. You can also visit their website at <http://ohio.Quitlogix.org>

Surgery Scheduling

Call our office to schedule surgery when you have completed the checklist. These health checks are done for your safety. We want to make sure you have the best possible outcomes after your surgery.

If you have concerns about any of the items on our checklist, please contact our office.

When the checklist is complete and you have your surgery date, **YOU MUST CALL to schedule your first physical therapy appointment.** Please see page 15 in this book for more information.

Tobacco and Wound Healing

To heal well after surgery, you must stop using all products that contain nicotine. Quitting tobacco at least 4 weeks and up to 8 weeks before surgery helps surgery wounds to heal.

You must quit nicotine prior to scheduling surgery

Tobacco and surgery

Tobacco hurts the function of cells in the body that help the wounds to heal and fight infection.

- Smoking for even 10 minutes lowers the amount of oxygen in the body for up to one hour. The more tobacco is used, the less oxygen in the body for health and healing
- Wound dressings absorb cigarette smoke. This makes it harder for wounds to heal after surgery.

Quitting Tobacco

If you need help quitting tobacco, use these tips as part of your quit plan:

- **Set a quit date** This is the day you officially stop using tobacco
- **Get rid of tobacco products** lighters, ash trays and spit cups in your home and vehicle
- **Tell others you are quitting** so they can support your new behaviors. Consider a “no smoking” or “no tobacco” rule where you live.
- **Write down your tobacco triggers** and create a list of new behaviors to replace time spent using tobacco such as exercise, chewing gum, going for a walk or calling a friend.
- **Use the “4D’s”** when you have cravings: **Delay** the behavior, even a few minutes may be enough for the craving to pass. Take a **Deep breath**. **Drink fluids** to clear nicotine from the body. **Do something else**.

For more support or information:

- Talk to your primary care provider, dentist or other health care provider about quitting.
- Call the **Ohio Tobacco Quit Line at 1-800-QUIT NOW or 1-800-784-8669**.
- Visit their website at <http://ohio.quitlogix.org>



Getting Your Skin Ready for Surgery

CHG is a special soap called Chlorhexidine Gluconate. It is used to get your skin prepared for surgery. By washing with this soap, you reduce the bacteria and germs on the skin. It lowers your risk for infection after surgery.

Please shower with this soap the night before and the morning of surgery

Getting CHG Soap

If you are not given this soap by your physician, it can be purchased at a grocery or drug store.

- A common brand name is Hibiclens. It may be in a 4 oz bottle or as wipes. You can also buy the store brand for less.
- You may need more than 4 oz of soap to clean your skin
- Ask a pharmacist to help you find it or look in the first aid section of the store

For your Safety

- **Avoid contact with your eyes, nose, ears, mouth and face**
- **Do not shave for 48 hours prior to surgery when using this soap**
- **Do not scrub your body too hard, CHG does not lather well**
- **Talk with the Doctor if you have open sores before using CHG**
- **Use only as directed**

Washing with CHG Soap

1. Wash your hair and body as normal with your normal products
2. Wet a clean washcloth, turn off the shower
3. Put CHG soap on the washcloth
4. Wash your entire body from your neck down gently for 5 minutes paying extra attention to your surgical area.
5. Turn the shower back on and rinse your body well with water
6. Pat yourself dry with a clean towel
7. Do not apply lotion, moisturizer, makeup, deodorant or other products to your skin
8. Put on clean clothes
9. **Repeat these steps again the morning of surgery**

Preparing Your Hip Surgery

Your Surgery Time

Dublin Methodist Hospital will provide you with your arrival time for surgery and all final instructions the day before your surgery.

- If you are sick and unable to keep your surgery time, please call our office ASAP

Getting Ready for Surgery

- Do not shave 48 hours prior to surgery
- Shower with the CHG soap as instructed on previous page
- **Do not eat or drink anything after midnight the night before surgery. This includes but is not limited to: water, coffee, candy, gum and mints.**
- If you take medication, only take the medications that your doctor has said are okay to take the morning of surgery. Please take only small sips of water with these medications
- If you have diabetes, please make our office aware so we can try to schedule your surgery appropriately
- You may brush your teeth the morning of surgery, but do **not** swallow the water

What to Bring to the Hospital

You will be admitted to the hospital for 3 days after surgery. However, some patients may need a longer length of stay based on how they are recovering after the surgery. All of the rooms at Dublin Methodist Hospital are private.

You will need to bring these items when you come to the hospital:

- Photo ID or Drivers license
- Medical Insurance card
- Copy of your Living Will or Durable Power of Attorney, if you have these items
- Copy of your medication lists with drug names, doses and how you take them
- Compression shorts (bike shorts) for going home and casual loose fitting clothing
- Storage case for glasses, contacts, hearing aids and or dentures/partials/bridgework
- Personal hygiene products
- Crutches labeled with your name. If you do not have crutches a pair will be provided to you at the hospital.
- Brace provided to you at the consent appointment.

Leave make-up, jewelry, money, credit cards and other valuables. We are not responsible for the loss of any personal items.



What to Expect in the Hospital

This is a general plan of care while you are in the hospital. This plan may be changed to meet your specific needs. You will be taught about wound care and recovery before you leave the hospital.

Medicines:

- Medicines will be given to control your pain and reduce swelling
- Medicines may be given to thin the blood and lower your risk of blood clots
- Medications will be given to help with constipation and for nausea
- Other medicines that you take may be restarted. Talk with the hospital staff about your needs
- You will be given prescriptions for medications for when you go home

Diet/Nutrition:

- If you have nausea or upset stomach after surgery, please tell staff. Clear liquids and solid food are started as your diet progresses in recovery

Bathroom:

- You will have a catheter to remove urine from the bladder during surgery. This will be removed in your room usually on post op day 2.
- Once the catheter is removed, please ask staff for assistance before getting out of bed. We want to help protect you from a fall or injury after surgery

Wound Care:

- You will be taught how to take care of the surgery incision and wound as it heals
- You will have a water proof dressing over your surgery incision. You will need to take this dressing off 7 days after surgery at home.

Activity:

- Physical therapy is typically started after your 6 week follow up appointment with Dr. Ellis. You will be given a prescription for physical therapy at your consent appointment. It is your responsibility to schedule your physical therapy appointments prior to surgery at a location convenient to you.

When You Leave the Hospital

The First 24 Hours

Do not drive, drink alcohol or make any important decisions after having surgery. You must have a responsible adult with you for your safety for the first 24 hours after going home.

Discharge Information

This is a general guide of care. Your care will be specific to your needs when you go home.

Diet and Activity

You will slowly return to a normal diet. Please start with clear liquids and slowly advance your diet as tolerated.

You will be touch toe weight bearing using crutches for the first 6 weeks after surgery. You will also be instructed on no active hip abduction (moving your hip away from your body) for the first 6 weeks post operatively. At your 6 week post operative visit with Dr. Ellis, he will determine if you are ready to start weaning off of your crutches and begin weight bearing.

Wound Care:

Keep the incisions clean and dry. You will have a water proof dressing over your incision. You will need to remove this dressing at home 7 days after surgery. There is no need to apply another dressing at that time. You may shower any time after surgery and once the dressing is removed. Please do not use any lotions, creams or powders, including neoposin, on the incision. Please do not submerge the incisions in water until given further instruction to do so.

Medicines:

When leaving the hospital, you will be given a prescription for some or all of the following medications

Medicine	Reason	How to take
Morphine	Severe pain	Tapered dosing for 15 days
OxyCodone	Severe pain	1 tablet every 4 hours as needed
Lovenox	Blood thinner	40mg injection daily
Aspirin	Blood thinner	1 tablet 2 times daily
Senokot	Reduces Constipation	1-2 tablets 2 times daily
Zofran	Reduces Nausea	Take 1 tablet every 8 hours as needed

Pain Control:

Expect pain even when taking medications. Do not take more medicine than is prescribed for your safety. To reduce discomfort use:

- Ice or cold compress: Apply directly to the site for 20 minutes at a time then remove the ice for 20 minutes before reapplying
- Game Ready: Can be used in place of ice. Follow directions on packaging
- ACE Bandage: Apply the bandage around the hip to reduce pain from swelling. You will be taught this before leaving the hospital. You may use compression shorts in place of the ACE bandage.

Constipation and Nausea:

- Senokot is stool softener with a stimulant. This will help make more regular bowel habits. We will provide you a prescription for this at the time of surgery. Please take 1-2 tablets twice daily as needed.
- Magnesium Citrate is an over the counter medication used for emergency rescue for constipation. Follow the instructions on the bottle and call our office.
- Zofran is an anti-nausea medication that will be provided to you upon discharge. Please take 1 tablet every 8 hours as needed.

Blood Thinner:

These medications are used to lower your risk for a blood clot. You will be given either Aspirin or Lovenox depending on your family history. An injection of medicine called Lovenox may be used if you have a personal or family history of blood clots.

When taking a blood thinner, you are at a higher risk of bleeding. Protect yourself from small cuts, bumps and bruises.

For your safety while on Lovenox:

- Tell other Doctors, Pharmacists and health care providers you are taking this medication
- **Avoid additional aspirin or NSAIDs** while you are taking this medication
- You will be given a prescription for a blood test at your 2 week post operative visit if you are on Lovenox. This can be completed at the lab of your choice
- Prevent injury at home: use an electric razor for shaving, wear gloves when using knives or scissors, use a soft toothbrush and brush gently, wear shoes to protect your feet and avoid tight fitting clothing or elastic that pulls on the body.

Medication Refills:

You need to plan for your refills as these medications need to be picked up in person or mailed to your home address. They are unable to be called into a pharmacy. Please provide at least 48 hours notice before running out when you need refills. Please call before noon on Fridays.

Physical Therapy:

Physical therapy typically will start after your six week follow up visit with Dr. Ellis. It is your responsibility to set up these appointments prior to surgery at a physical therapy site that is convenient for you. We will provide you with a copy of a prescription and hip preservation physical therapy protocol to give to your physical therapist at the time of your consent appointment.

Until physical therapy begins please complete the following:

- If you rent a Game Ready (not covered by insurances at this time) please use setting 2.

Hip Safety at Home

How to protect your hip and prevent injury after surgery

Activity

- Your hip may have a limited range of motion. Do not move your leg away from your body until you have been instructed to do so by Dr. Ellis after your 6 week post operative follow up.
- You will be partial weight bearing for the first 6 weeks after surgery using crutches.
- No pushing, pulling, lifting greater than 10lb for the first 6 weeks.
- Avoid sitting for longer than 20 minutes at a time for the first 6 weeks. Change position or move around for a few minutes before sitting again.
- Go to all of your physical therapy appointments as scheduled.
- If you are using a Game Ready machine, please use setting 2 on the unit.

Driving

- You may drive an automatic vehicle when you are off all pain medications. If you had surgery on your right leg or are driving a standard vehicle, you will need to wait until your strength equals the non-operative leg.
- If you sit for driving or traveling for greater than 1 hour, take a break. Get out of the car and move around for a few minutes before resuming travel.

Follow Up Visits and Plan of Care

To check on your progress and healing after surgery, plan on the following post operative appointments:

2 Week post operative visit

- Tiffany Greene, Physician Assistant, to remove sutures and do a wound check

6 Week post operative visit

- X-ray appointment to check bone healing after surgery
- Dr. Ellis for progress and healing check

3-4 Months post operative visit

- X-ray appointment to check bone healing after surgery
- As needed with Tiffany Greene or Dr. Ellis
- As needed with Physical Therapist at Orthopedic One

6 Months post operative visit

- As needed with Tiffany Greene or Dr. Ellis
- As needed with Physical Therapist at Orthopedic One

1 year post operative visit

- As needed with Tiffany Greene or Dr. Ellis
- As needed with Physical Therapist at Orthopedic One

Please call our office if you are unable to make your scheduled appointments or if you have questions or concerns between visits

When to Call the Doctor

**If you have any of these signs please call our office at 614-827-8700
If it is after normal business hours you will be transferred to a call
center**

- Fever and/or chills
- Severe headache or migraine
- Upset stomach or nausea
- Loss of function of your leg
- Signs of infection
 - Green or yellow drainage from the wound
 - Redness or streaking away from the wound
 - Increase in swelling
 - Increase in pain
 - Odor from the wound
- Signs of blood clots
 - Tender, swollen or red areas that are warm to the touch in the calf or leg
 - Skin that looks pale, blue or cold to the touch
 - Pain in the calf that does not resolve with rest
 - Shortness of breath or chest pain
 - **Note: if you have signs of a blood clot do not massage or exercise the leg**
- Bleeding Problems
- Any other sign that causes concern or if you have questions

Driving Directions to: *Orthopedic One, Dublin Office*

Orthopedic One
6840 Perimeter Dr.
Dublin, OH 43016

[Get Directions](#)



Driving Directions to: *Dublin Methodist Hospital*

OhioHealth Dublin Methodist Hospital

7500 Hospital Drive

(formerly part of Perimeter Loop Road)

Dublin, Ohio 43016

Phone: (614) 544-8000

[Get Directions](#)



Parking

Dublin Methodist offers surface parking adjacent to the main and emergency entrances of the hospital for patients, family and visitors.

There are no fees for parking at Dublin Methodist. Security officers are on duty at all times to assist you with safety and security concerns.

These officers can also help if you have been locked out of your car, need a jump-start or need an escort to your car.

Handicapped parking is available in all parking areas. If no handicap spaces are available, ask for assistance from security officers or hospital staff.

When you arrive at Dublin Methodist, you will be welcomed in the main lobby by a staff member who will help you register, provide directions or escort you to your destination. To expedite registration, convenient kiosks are located in the lobby and are available.