Get Up and Go Joint Program™ Philosophy:

With the development of newer and more sophisticated artificial implants, there is now a stronger focus on early and more rapid recovery of the patient. Patient’s expectations are higher than they were 30 years ago. The artificial parts are more durable and can last longer. To keep up with these demands, a program such as the Get Up and Go helps patients understand how to maximally recover in the shortest period of time. At the Matthys Orthopaedic Center, we understand that to have a successful outcome, patient education and participation is critical. Participation in an exercise program before surgery (“pre-hab”) can greatly improve your recovery process from hip replacement surgery. Dr. Matthys’ technique for joint replacement follows the basic principles of minimally invasive surgery by using the Direct Anterior Approach. Through a small 4 inch incision the surgery is performed without cutting or removing any muscles around the hip. During the recovery process, this puts the hip at an advantage compared to more traditional techniques.

This work book is meant to be a guide to help you regain your strength and mobility. Surgery is important part of the process, but your commitment to therapy and exercising will be paramount in maximizing recovery of your hip.
Walking and Early Activity after Surgery

After your surgery you will begin to walk short distances in your room and perform light activities with nurses and therapist.

Weight Bearing As Tolerated:

Stand as straight as you can with your weight evenly through your legs. You are allowed to put as much weight (on your operated leg), as you feel comfortable with.

Hip Precautions:

With traditional hip replacement surgery, there are precautions that you have to follow so the hip does not dislocate. These precautions include no crossing of the legs, care with bending over at the waist, and twisting maneuvers at the hip. Traditionally patients have had to sit in only certain chairs, sleep on their backs and be partially weight-bearing. Another great advantage of the Direct Anterior Hip replacement is that there are NO PRECAUTIONS AFTER SURGERY. You will be able to maneuver and place your leg in any position desired.
Immediate Postoperative Exercises

You may begin the following exercises immediately after your surgery, as they are important for:

• Helping to prevent complications with your breathing
• Helping to prevent blood clots in your legs
• Increasing your circulation

1. Deep Breathing and Coughing Exercises

Until you are up and moving well take at least 10 deep breaths, followed by a cough, every hour that you are awake.

2. Ankle Pumping

Move your feet up, down and in circles. Repeat 50 times every hour that you are awake.

3. Buttock Contractions

Tighten your buttock muscle and hold for a count of 5 seconds. Repeat five to ten times, three to four times each day.
Learning to Move

After surgery, plan ahead. Take pain medication ahead of time.

Lying down:

Your nurse or therapist will show you how to safely turn on your side. When lying on your side you may put a pillow between your legs for comfort. After surgery it is OK to lay on either side.

Getting in and out of bed:

1. Sit down on the bed in the same manner as you would sit in on a chair.
2. Slide your buttocks backward until your knees are on the bed.
3. Pivot on your buttocks as you lift your legs onto the bed.

Reverse the procedure to get out of bed.
Learning to Move Continued

Sitting

1. Sit on a firm, straight back chair with arm rests.
2. Sit in chairs higher than knee height.
3. Do not sit on soft chairs, rocking chairs, sofas or stools.

Standing

1. Move your buttocks to the edge of the chair so that your feet are flat on the floor.
2. Bend your non-operated leg under you to hold your body weight.
3. Keep your operated leg straight out in front of you.
4. Do not bend forward.
5. With your hands, push off the surface you are sitting on. Put all of your weight on your non-operated leg.
Learning to Move Continued

**Sitting down:**

1. Feel for the chair or bed with the back of your legs.
2. Reach for the armrests.
3. Lower yourself down keeping the operated leg straight out taking the weight on your non-operated leg.
4. Do not bend forward.

**Using a Walker or Crutches:**

Stand up tall and look ahead while you walk.

1. Move the walker or crutches forward first, followed by your operated leg. Then move your unaffected leg forward.
2. Put your weight on the walker or crutches to take the weight off your operated leg when you step onto it. Follow your own weight bearing instructions when using a walker or crutches.
How to Manage Stairs

While you are in hospital, your therapist will teach you how to climb stairs.

1. A handrail will make things easier and safer for you. Simply place one hand on the railing, and hold both crutches on the other side of your body.

2. If no handrail is available, use one crutch on each side of your body. Follow the same sequence as above.

3. As your hip range of motion and strength improves you will eventually be able to resume “normal” stair climbing.

To go up the stairs:

- Keep the cane/crutches with the operated leg.
- Start close to the bottom step, and push down through your hands.
- Step up to first step, the non-operated leg goes up first.
- Step up to the same step with the operated leg and crutches, putting only the advised amount of weight through your operated leg.

To go down stairs:

- Start at the edge of the step.
- Bring the cane/crutches and your operated leg down to the next step.
- Use upper body strength to support your weight and keep your balance.
- Step down to the same step with the non-operated leg, putting only the advised amount of weight through your operated leg.

Check your balance each time before proceeding to the next step.
Getting into a car:

1. Move the seat back as far as it goes, and recline it slightly. Reclining the back of your seat will help you keep your operated hip straight when bringing your legs into the car.

2. Back up close to the seat and place one hand on the back of the seat and one hand on the dashboard for support.

3. Sit down slowly keeping your operated leg straight.

4. Slide back as far as you can go. Swing your legs in, bending your knee to a comfortable position.

Tips: adding a firm cushion to the seat will also help you keep your operated hip straight and will help you get in and out of the car easier. You can also put a plastic bag on the seat to help you move easier.
Pre-operative and Postoperative Exercises

_These exercises will begin during your hospital stay and continue on after discharge. You should learn these BEFORE your surgery if you have received this book before your operation._ The following exercises will help you to restore normal hip range of motion and strength and improve your recovery.

Repeat sets of each exercise 2 to 3 times a day.

Complete the exercises that are checked off by your physical therapist

1a. Hip and Knee Bending

- Lie with the head of the bed slightly up, wrap a towel under your operated leg. Pull up on the towel to slide your heel towards your buttocks.
- Keep your heel on the bed.

Hold____seconds. Repeat_____seconds.

1b. Progression

- Lie with the head of the bed slightly up.
- Slide your heel towards your buttocks.
- Keep your heel on the bed.

Hold____seconds. Repeat_______times.
Repeat sets of each exercise 2 to 3 times a day.

2. **Isometric Hamstrings**
   - Press your whole operated leg into the bed.
   - Feel the muscles in your buttock and operated leg tighten.

   Hold_____seconds.   Repeat_____seconds.

3. **Quadriceps Strengthening Over a Roll**
   - With a towel roll under the knee of the operated leg, lift your heel off the bed.
   - Make sure that your thigh does not come off the roll.

   Hold_____seconds.   Repeat_____seconds.
Pre-operative and Postoperative Exercises Continued

Repeat sets of each exercise 2 to 3 times a day.

4. Hip Abduction

• Helpful Tip: Place a plastic bag under your heel and/or use a bed sheet wrapped around your foot to help you move your leg initially until you are able to move it without assistance.
• Slide the operated leg sideways in bed, keeping your leg pressed on the bed.
• Keep the kneecap and toes pointing up to the ceiling.

Hold____seconds. Repeat_____times.

5. Abdominal Activation

• While you are lying in bed on your back, lift your head slightly and tighten your stomach muscles so that your belly button moves down toward your spine.

Hold____seconds. Repeat_____times.
Repeat sets of each exercise 2 to 3 times a day.

6. Standing Hip Bending

- Stand with support for balance; bend your operated hip by bringing your knee towards your chest.

  Hold____seconds.
  - Slowly lower your leg.
  Repeat_____times.

7. Standing Hip Abduction

- Stand with support for balance; lift your operated leg out to the side while standing tall.
- Keep your hips level. Keep your upper body straight and toes pointing forward.

  Hold____seconds.
  - Slowly return leg to the starting position.
  Repeat_____times.
Repeat sets of each exercise 2 to 3 times a day.

8. Hamstring Curls
- Stand with support for balance; bring the heel of your operated leg towards your buttock. Keep your thighs level with each other.
  Hold____seconds.
- Slowly return leg to the starting position.
  Repeat____times.

9. Standing Hip Extension
- Stand with your hands at your side or holding something for support, lift your operated leg backwards, keeping your knee straight.
- It is important to remain standing up tall.
  Hold____seconds. Repeat____times.
Progression and Safety Guidelines

The following sections of exercises are more challenging. You may begin these exercises after the postoperative exercises have become relatively easy. You may require the help of a therapist to ensure the exercises are being done correctly.

- The following exercises and activities will help your hip muscles regain strength and endurance, and allow you to achieve a complete recovery.
- It is a good idea to add one new exercise at a time so you can monitor its effect on your hip.
- As a guide, soreness related to exercise should diminish within 2 hours of completing the exercise program. If you continue to experience exercise related soreness after more than 2 hours then you must reduce the intensity of the exercises. This can be done by reducing the number of repetitions, or by being gentler in how you perform the exercise. In some cases you may have to stop an exercise completely if it causes intense or unusual pain.
- If you find that an exercise is no longer challenging you might progress by:
  1. Increasing the number of repetitions gradually
  2. Increasing the number of sets (1 set = one group of repetitions)
- It is more important to increase the intensity (e.g. number of repetitions, or adding weight) of the exercises that strengthen your hip muscles. You do not have to increase the intensity of the exercises that stretch your muscles.

**Remember: This booklet is meant as a general guide for your exercises and other aspects of rehabilitation. If you are unsure of a particular exercise, or how to progress the intensity, it is best to clarify it with your therapist.**
Recovering from Joint Replacement Surgery:

Remember that everyone will recover differently. Not everyone has the same amount of weakness or the same drive to recover after surgery. In general with the direct anterior hip replacement, recovery is quicker and easier however there will still be a period of time that is required to heal and regain your mobility.

**Recovery is usually in 2 stages:**

**RECOVERY FROM SURGERY:**

Recovery from the surgery generally takes **6 weeks**. During this time, you recover from the surgical incision and the operation. It usually takes this amount of time to become routine with your sleeping, eating and bowel habits. Many people can walk independent of a walking aide by 2 weeks. Most people will need some pain medications for up to 6 weeks after surgery.

**RECOVERY OF THE HIP PROBLEM THAT EXISTED BEFORE THE SURGERY:**

The hip pain that you have had for prior to the hip replacement caused a limp with secondary weakness. After the hip replacement your hip is still weak. We do not change the strength of your muscles by replacing a hip. Many patients believe the limp will go-away as soon as the hip is replaced. The limp a patient has before surgery is generally due to one or all of the following conditions: pain, weakness and/or a leg being longer or shorter than the other.

To get your activity level back, you will need to recondition your muscles. This is accomplished by doing your exercises and staying active. It will take up to **1 year** to recover your strength and endurance of the muscles around the hip.

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**GET UP AND GO JOINT PROGRAM™**
Challenging Exercises

You may require the help of a therapist to ensure the exercises are being done correctly.

Repeat sets of each exercise 2 to 3 times a day.

10. Bridging

• Bend both knees up with your feet flat on the bed. Push through your feet and lift your buttocks slightly off the bed.
• Keep your abdominal muscles tight to avoid arching your lower back.
Hold____seconds. Repeat_____times.

11. Sideway Stepping Exercises

• Stand and practice side stepping. Take a few steps in one direction and then go back in the opposite direction, returning to your starting position. You may use hand support as needed.
• Do not bring your legs too close together or twist your trunk.
Hold____seconds. Repeat_____times.
Challenging Exercises Continued

Repeat sets of each exercise 2 to 3 times a day.

12. Forward/Backward Stepping Exercises

- Stand up tall with your weight on your operated leg. Begin by stepping forward and backward with your non-operated leg. Practice transferring your weight from one leg to the other.
- When able, you can progress to taking 5 to 6 backward steps in a row. Use hand support for safety and balance.

Repeat 10 times.

13. Single Leg Balance

- Attempt to balance on your operated leg. Begin by using a support.
- Progression Exercises:
  1. Increase the amount of time you are balancing while using support. (e.g. aim to balance for 20-30 seconds).
  2. Carefully try to balance without the use of a support.
  3. Gradually increase the amount of time on one leg while NOT using support.
Challenging Exercises Continued

Repeat sets of each exercise 2 to 3 times a day.

14. ¼ Wall Squat

- Place your feet shoulder width apart and at least 6 inches from the wall. Keep your toes pointing straight ahead. Keep your back and shoulders against the wall.
- Slowly bend your knees ¼ of the way down.
- Do not allow your knees to go ahead of your toes.
- You may use support as needed.

Hold____seconds. Repeat_____times

15. Step Exercises

- Place your operated leg onto a _____inch step.
- Bring yourself up onto the step using the muscles in your operated leg. Do NOT pull yourself up.
- Step down to the floor with the non-operated leg. Make this a slow and controlled movement. Begin with a 2-4 inch step then progress to a 6 inch step and later to an 8 inch step as able.

Repeat____times.
Challenging Exercises Continued

Repeat sets of each exercise 2 to 3 times a day.

16. Bridging (Progression from exercise 10)
   • As able, progress your bridging by lifting your buttocks AND your non-operated leg straight up off the bed. Hold_____seconds. Repeat_____times.

17 a) Hip Extensor Strengthening
   • Lying on your stomach, bend the knee of your operated leg. Lift your leg off the bed slightly. Tighten your abdominal muscles to avoid arching your lower back. Hold_____seconds. Repeat_____times.

17 b) Progression
   • Keeping the same position; progress by lifting your operated leg off the bed with the knee straight. Tighten your abdominal muscles to avoid arching your lower back. Hold_____seconds. Repeat_____times.
Challenging Exercises Continued

Repeat sets of each exercise 2 to 3 times a day.

18. Sidelying Hip Abduction

- Lie on your non-operated side; straighten the knee of the top (operated) leg.
- Lift straight leg up to the ceiling.
- Do NOT roll your hips forward or backward.

Hold_____seconds. Repeat_____times.

19. Clamshell

- Lie on your non-operated side, bend your hips and knees slightly.
- Separate your knees while keeping your feet together.
- Do NOT roll your hips forward or back.

Hold_____seconds. Repeat_____times.
Challenging Exercises - Continued

Repeat sets of each exercise 2 to 3 times a day.

20 a) Hip Flexor Strengthening

• Sit and lift your operated leg up so your foot is off the floor.

  Hold _____ seconds.   Repeat _____ times.

20 b) Progression

• As you are able, progress this exercise by resisting the movement with your hands.

  Hold _____ seconds.   Repeat _____ times.
Repeat sets of each exercise 2 to 3 times a day.

21. Hip Extension with Theraband

- Stand with your feet slightly apart.
- Bring your operated leg backward, with your knee straight, against the resistance of the strap.
- Keep your abdominal muscles tight to avoid arching your lower back.
- Allow your leg to return to the starting position.

Hold _____ seconds. Repeat _____ times.

22. Hip Abduction with Theraband

- Stand with your feet slightly apart.
- Bring your operated leg out against the resistance of the band.
- Keep your knee straight.
- Allow your leg to slowly return to the starting position.

Hold _____ seconds. Repeat _____ times.
Repeat sets of each exercise 2 to 3 times a day.

23. Marching in Standing
- Stand and lift your knee up towards your chest, alternating sides so that you are marching on the spot.
- Keep your back straight.
- Helpful Tip: Perform this exercise in front of a mirror. Ensure that you are NOT rocking from side to side. Perform for one minute.

Repeat____times.

24. Hip Drop and Lift for Abductor Strengthening
- Stand sideways on a step that has a railing/wall for support.
- Begin with your hips level.
- Keep your operated leg on the step and slowly lower your non-operated leg to the floor.
- Keep your upper body straight.
- Slowly return to the starting position.

Repeat____times.
Repeat sets of each exercise 2 to 3 times a day.

25. Side Stretch

- Begin by standing up tall. Raise the arm of the operated side above your head.
- Stretch side ways away from your operated side.
- In this position take 4 deep breaths to increase the stretch.
  Repeat____times.