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Spine Surgery • Orthopedic Surgery • Joint Replacement Surgery • Orthopedic Trauma

You will be scheduled for Total Hip Arthroplasty (THA)

What is a THA?

A total hip arthroplasty (also called hip replacement) is a procedure to restore the joint space of the hip. An incision (on average 6 inches) is made through the lateral buttock. The arthritic bone of the femur is cut away and an implant is cemented into the remaining bone. A cup shaped implant is secured into the pelvis, restoring the socket side of the hip joint. The incision is then sutured closed. The superficial layer is glued. A Prineo dressing is placed over the incision.

Will I require wound care?

No. Your incision is covered by a special dressing called Prineo. It looks like a big piece of tape that keeps your incision protected. It is waterproof, so you can shower, but avoid submerging your hip in water, as in a bath. Make sure to pat dry afterwards. Do not remove this tape.

Will I be placed on a blood thinner?

Yes. If you are already taking a blood thinner, you will resume after surgery. Otherwise, you will be prescribed enteric-coated aspirin 81 mg to be taken twice daily for one month for DVT prophylaxis.

What is my mobility?

On average, recovery is around 3 months. For the **first 6 weeks** you will need to use a walker and maintain a **20 lbs. weight-bearing restriction** to the operative leg. This is to allow the prosthesis and the bone to grow together. You will then transition to a cane which will then be weaned once your gait has normalized.

Will I participate in physical therapy?

Yes, you are expected to attend **outpatient physical therapy**, beginning the week after discharge from the hospital.

What are the risks of THA?

Risks of surgery include bleeding, infection, wound healing problems, fracture, leg length discrepancy, neurovascular injury, DVT/PE, hip dislocation/ instability, chronic hip pain/ stiffness/ dysfunction, failure of procedure/ need for revision surgery.

You **must follow Total Hip Precautions**: do not bend at the hip more than 90° (to sit on a curb, low step), do not turn your foot in or out, do not move your knee inward past your navel (cross your leg).

What may happen if I do not proceed with this surgery?

Risks of non-operative treatment include worsening arthritis pain, decreased function, decreased ambulatory capacity, falls, fractures, decreased quality of life.

If you are a smoker, you must stop and be non-smoking for 6 weeks prior to surgery and throughout the duration of rehabilitation.

Please ask your surgeon if you have any questions regarding the above information.