

## Complications

The risk of complications from an arthroscopy is very small but can include general complications following an anaesthetic, such as inability to pass urine, constipation and blood clots in the leg(s) or lung(s).

Some swelling is normal following an operation but if you notice that either your calf or your thigh has become very swollen, tender, red and/or hot then it is important that you see your GP or attend A&E.

## During the first 24 hours following your discharge

If you have any further concerns about your surgery, please telephone the Adult Day Surgery Unit: 0118 322 7622. Fax: 0118 322 8214

Opening hours are 7.30am to 10.00pm Monday-Friday, 7.30am to 4.00pm Saturday. If you need help/advice outside these hours, please telephone the Royal Berkshire Hospital switchboard on 0118 322 5111 and ask for the on-call surgery doctor. Please note that this should be for emergencies only.

After 24 hours, please seek advice from your GP.

For further information about the Trust, visit our website  
[www.royalberkshire.nhs.uk](http://www.royalberkshire.nhs.uk)

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Advice following  
hip arthroscopy  
Adult Day Surgery Unit

## What is an arthroscopy?

Hip arthroscopy is performed under a general anaesthetic (you are asleep) using small cuts through which a camera (to see the joint) and instruments are passed. Using traction (a pulling force) to bring the hip slightly out of joint, your surgeon can get a good view of the hip and any areas that are causing your symptoms. Then, using the appropriate instruments, your surgeon can carry out any necessary procedures.

## After your hip arthroscopy

You will need to rest until the effects of the anaesthetic have passed. This may take several hours.

Pain - You may feel some pain in your hip, as well as your lower back, buttock or knee. It is important you take regular pain relief in order to help with this pain. An ice pack and some local anti-inflammatory gel (if not taking oral ibuprofen etc) can help with pain in the area.

Swelling - You may also notice some swelling around the hip and groin. This is normal and should go down over the first few days.

Walking - Your physiotherapist will teach you some initial exercises as well as help you to learn to walk with the use of crutches. How much weight you are allowed to put through your operated leg depends on the surgeon's instruction. If your weight bearing is restricted, this is usually for 2-6 weeks but depends on the surgeon and the procedure performed. If you have stairs at home your physiotherapist will show you how to manage these safely.

Wound care – It is normal for the wound sites to sometimes leak a little bit of blood or fluid in the first few days after your surgery. The nursing staff will discuss taking care of your wound with you. You will need to see a nurse at your GP's practice to have the stitches taken out at about 10-12 days after your surgery.

Driving – You can drive once you are fully weight bearing and it is comfortable to do so. You must be able to perform an emergency stop

without hesitation. You should also check with your motor insurance company to ensure you are covered to drive, as some policies state you must not drive for a certain period of time following an operation.

Work – You may return to work when the pain has settled and you are confident you can manage. If your job is not physically demanding, this can be after 1-2 weeks. However, if you have a physically demanding job this will be longer, usually 8-12 weeks. An initial sick certificate can be provided by the ward – please ask the nurse before you leave the ward. Subsequent certificates will need to be obtained from your GP.

Sports – Return to sports will depend on what you have had done during your hip arthroscopy. You will need to stop doing sports until you are fully weight bearing (and even then avoid impact sports or swimming breast stroke). Seek advice from your surgeon and physiotherapist.

Rehabilitation – This usually begins within 1-2 weeks of your hip arthroscopy. A physiotherapist will assess you and provide you with some exercises. Depending on the assessment findings your physiotherapist may refer you for hydrotherapy (pool). However, not every patient requires this. It is very important that you do the prescribed exercises as they will help to build the strength in and around your hip. Your physiotherapist will then continue to review you and progress your exercises as necessary.

Follow up appointment – You will have an appointment to see the consultant or a member of their team around 6 weeks after your operation. At this point you will be asked to complete some questionnaires about how your hip is feeling after the operation. You will also be asked to do these at 3, 6, and 12 months post operatively.

If there is anything you do not understand or if you have any questions or concerns, please feel free to discuss them with your nurse.