



Hip Fracture Education for Patients and Families

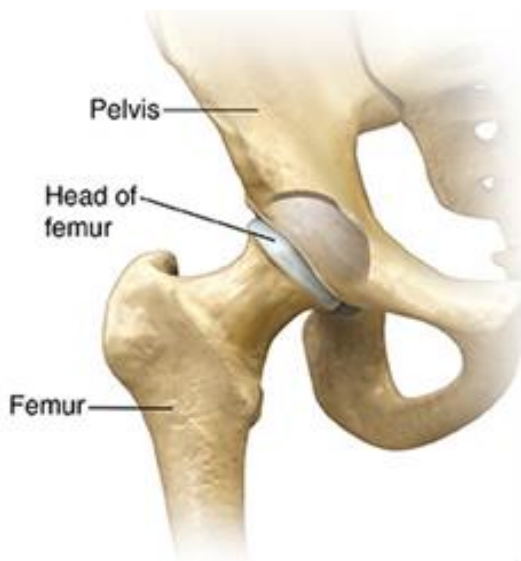
What is a hip fracture?

At Penn Medicine Princeton Medical Center, we understand that a hip fracture can be painful and frightening. When a sudden fall or accident causes a hip fracture, it can be a life-changing event. We are here to provide the specialized care you need throughout your treatment and recovery.

What is a hip fracture?

A hip fracture is a break in the femur (thigh bone), the largest bone in the body. The hip is a ball-and-socket joint where the femur joins the pelvis. Hip fractures can occur at the head, neck, or upper shaft of the femur. The break may be non-displaced (the bone is broken but remains in place) or displaced (the bone has moved out of place).

Hip fractures may occur as a result of a fall, with or without the presence of osteoporosis. Osteoporosis is a very common disease that weakens your bones and makes them brittle. Osteoporosis greatly increases your risk for fractures, even with a small fall.





Before Surgery

After a hip fracture occurs, you would have likely been taken to the Emergency Department (ED). While in the ED many tests would have been done, such as X-rays and blood tests. These tests are to confirm the fracture and ensure you're ready for surgery. Your surgery will be done once a surgical team can be readied. Your surgery may be delayed pending certain tests or while blood thinner medication wears off.

Why do I need surgery?

The goal of treatment for hip fractures is to enable you to do most of the things you did before your fracture with as little pain as possible. The most common treatment for a hip fracture is surgery. Almost all hip fractures require surgery to align the bones so they heal correctly.

If surgical intervention is not recommended due to high risk for complications, then medication and rest may be prescribed. This option may also be recommended for people who might not benefit significantly from surgery, such as those who were unable to walk before the hip fracture or those who have minimal pain.

Who is your healthcare team?

- An **orthopaedic surgeon** will diagnose your hip fracture and work with you to determine your treatment.
- A **hospitalist** is a medical physician that specializes in caring for patients who have been admitted to the hospital. This physician will manage your medical conditions and will coordinate your care with any specialists caring for you during your hospital stay.
- **Nurses** and **nursing assistants** will provide your daily care, help keep you comfortable, and manage your pain while you stay at the hospital
- A **case manager or social worker** will meet with you and your family to discuss your discharge plan, living situation, and insurance.
- **Physical therapists (PT)** will teach you exercises that build strength and aid recovery. They will also teach you how to get around safely while you heal.
- **Occupational therapists (OT)** will teach you how to do daily activities.



During Surgery

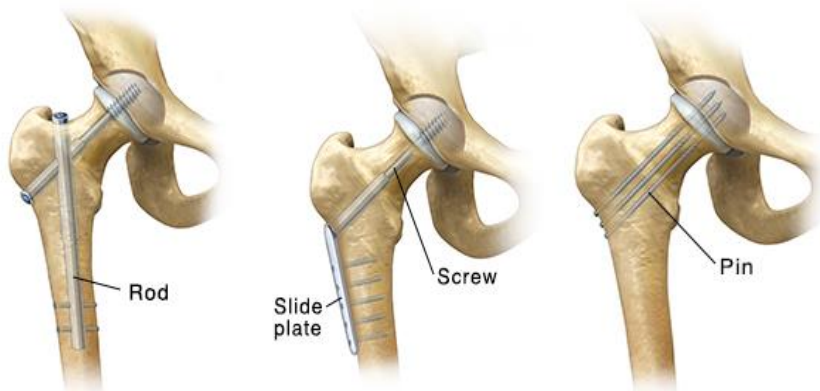
What happens during surgery?

You'll spend one to three hours in surgery, depending on the complexity of your fracture. Your surgeon will talk to you about what will happen during your specific surgery.

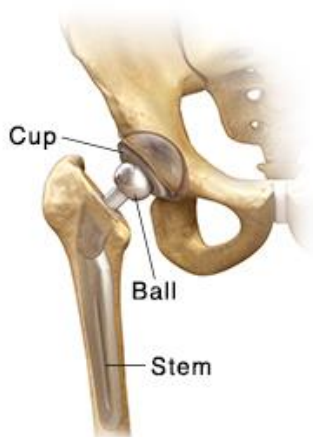
What type of surgery am I having?

Your type of surgery depends on your age, the location of the fracture, level of displacement and the position of the bone fragments. Surgery for a hip fracture may include one of the following:

Open Reduction and Internal Fixation (ORIF), a partial hip replacement, or a total hip replacement. Your surgeon will discuss your procedure with you.



(Examples of what an ORIF might look like with screws, rods, pins or plates)



(Example of a total hip replacement)



After Surgery

What happens after surgery?

After surgery, you'll be moved to the Post Anesthesia Care Unit (PACU), also called the recovery room. You will stay there until the anesthesia has worn off and you are stable, often times for a few hours. Then you'll be moved back to your hospital room.

You will stay in the hospital for about three to four days after surgery. While in the hospital, you'll work on physical therapy, occupational therapy and pain management.

Time out of bed

Physical therapy will be ordered for the day of surgery or the next morning, depending upon the time of day your surgery is scheduled. Your goal is to build your strength enough that you'll be able to continue your recovery outside of the hospital. You'll do this by increasing your activity slightly every day. It may seem hard at first, but it's the best thing you can do for your recovery. Moving your body speeds your recovery and helps prevent problems, so it is critical that you don't stay in bed after surgery. Your orthopaedic surgeon may restrict weight-bearing activities such as walking after your surgery, depending on your specific needs.

Pain management

Managing pain well is an important part of your treatment. Even with pain medicine, some pain is normal after surgery. The goal of pain management is to reduce your pain enough so that you can do the physical therapy exercises that help you achieve as much independence as possible (within necessary restrictions) to facilitate healing. You will receive pain medication by taking pain pills or through an IV. Talk to your doctor or nurse if your pain isn't controlled and you are very uncomfortable. Be aware that some pain medications can cause confusion or disorientation for a time, as well as constipation. You can also use ice packs to help lessen pain and swelling.



After Discharge

What happens when you leave the hospital?

You can leave the hospital when your physician determines that you are medically stable. The next step of your treatment plan depends on how well you can move around safely with your walker. If you live at home or at an assisted living facility, you may need to spend some time in a rehabilitation facility. If you live at a nursing home, you'll probably return to that facility. If you can move around well enough to return home, you may need someone to stay with you to help as you recover. You will also need someone to drive you to your follow-up physician appointments.

Your long-term recovery

Recovering from a hip fracture is not an easy recovery; it will take a lot of hard work. With proper care and rehabilitation, some people are able to return to pre-injury levels of activity and independence. Hip fractures usually take three to six months to heal, but it may take up to a year. Less than half of all patients regain their previous level of function.

Follow your physician's orders. Depending on your surgery, your physician will tell you how much weight you can put on your hip. If you were sent home with a walker, cane, crutches or a wheelchair, be sure to use them.

Manage your pain well. Your physician will recommend prescription, over-the-counter pain medication, or both. If these don't manage your pain well, call your physician.

Continue your physical therapy. Do any exercises that your physician or physical therapist recommends, and continue to go to physical therapy as prescribed. Staying active will help strengthen your bones. Exercise is the most important thing you can do to ensure the best recovery possible.

Before you ever have any other procedures, tell all your healthcare providers, **even your dentist,** that you have metal hardware in your hip (if applicable). They may ask you to take antibiotics to prevent infection.



Follow up Care

Follow up visit

Ask your healthcare providers when you should schedule a follow-up visit. Most patients will visit their surgeon one to two weeks after surgery. You will also need to schedule an appointment with your primary care provider.

How can you prevent fractures in the future?

Once you've had a fracture, the last thing you want is to have another one. You can prevent falls by strengthening your bones and avoiding falls that can lead to fractures. If you're over 65, the most common reason for a hip fracture is osteoporosis.

These activities can help prevent osteoporosis and future fractures:

Gradually increase your activity. Daily activities will become easier as you progress with your exercises and physical therapy. After you recover from surgery, **a more active lifestyle can improve the strength of your hip and prevent fractures in the future.**

Eat a healthy diet rich in vitamin D, calcium and protein. This can help strengthen your bones. Talk to your healthcare provider about how much of each you need through diet and vitamins.

Avoid falling. Be especially careful about walking on stairs or icy surfaces, getting out of the bathtub or shower, and other situations where you may fall. Make sure your home is safe to help avoid accidents. Have someone help you, if necessary, and use a cane, walker crutches or handrails when needed.

When to follow up with your healthcare provider:	When to call 911 and seek emergency attention:
<ul style="list-style-type: none"> • Fever 101°F or higher • Redness, swelling or drainage leaking from your incision that worsens • Pain in your calf that worsens • Loss of feeling in your foot or leg • Pain that is not controlled by pain medication • Continued nausea or vomiting 	<ul style="list-style-type: none"> • Chest pain • Difficulty breathing or shortness of breath • Any reason you would normally seek emergency medical attention

For more information, call (609)-853-7954



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U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)

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