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Dr. Brian White – Total Hip Replacement Discharge Medication Instructions

Below is a list of medications you may be going home on after surgery. Specific instructions will be given by your nurse before you go home.

- ❖ **Blood Thinner:** You will be on a blood thinner (Ecotrin 325mg, which is coated Aspirin, or Xarelto) to prevent blood clots. It is very important that you take this for the time frame it is prescribed.
 - Ecotrin can be purchased over the counter.

- ❖ **Anti-Inflammatories:**
 - They are typically NOT used in total hip replacements. NSAIDS (Ibuprofen, Advil, Motrin, Naproxen, Diclofenac) should be avoided after surgery for 4-6 weeks.

- ❖ **Stool Softener/Laxatives:** Take your stool softener (Colace or Senokot) twice daily until you are off of all pain medications as they can cause constipation. In addition, it's a good idea to take a laxative daily (Miralax, Dulcolax, Milk of Magnesia) to help facilitate a normal bowel regimen. If you are still struggling with constipation in a day or two, despite taking both of these medications, you should try Magnesium Citrate or an enema. All of these medications can be purchased over the counter.

- ❖ **Nausea medication:** To be used as needed.

- ❖ **Pain Medication:**
 - Take pain medications with food.
 - Begin weaning off at about 48-72 hours after discharge as you can tolerate.
 - Start tapering your pain medication 48-72 hours after discharge. First drop the dose (1 pill instead of 2, or a half of a pill instead of a full pill) and continue every 4 hours. You'll know in about an hour if the lower dose is effective. If it isn't, then go ahead and take the other half of your dose and wait another day to start to taper. The next step will be to begin spreading the time in between doses to 5 or 6 hours, progressing day by day. You can then begin substituting Tylenol 650mg in place of pain medications.
 - Examples of short acting pain meds are Tramadol, Norco, Oxycodone, Dilaudid
 - DO NOT drive while on pain medication.
 - DO NOT drink alcohol while on pain medication.
 - DO NOT take extra Tylenol while on pain medications while many of them already contain Tylenol. (Tylenol in excess of 3,000mg daily, or combined with alcohol can cause irreversible liver damage.)
 - ***An important point:*** Pain medications are sedating. For safety reasons, it is important that you have a family member in charge of administering you your medications. Keep your pain medication secure in your home so they don't fall into the wrong hands.

- **Please note:** Narcotics are HIGHLY ADDICTIVE pain medications. They can create constipation and lethargy. They must be used with caution. The body can adapt to them, and in order to achieve pain relief, the body may require increasing doses and ultimately become dependent on them. For these reasons, Dr. White prescribes narcotic medications with caution. They are prescribed for acute pain, but should be tapered and used sparingly.
 - **Also note:** It is the strict policy of Dr. White's office that narcotics and other pain medications will NOT be refilled on weekends or after hours. As well, to avoid creating an addiction, Dr. White will only provide 1 refill of your short acting pain medication.
 - Once you've discontinued taking pain medication, please dispose of any excess safely such as at a community drug take back event, your local pharmacy drug take back drop box, or maybe at your local police or fire station. Do not flush them down the toilet or throw them in the trash.
- ❖ **Muscle Relaxers:** To be used every 6-8 hours as needed for muscle spasms (which typically feel like a sharp, stabbing, burning or pressure type pain). Take them only if needed. Examples are Robaxin & Valium.
- ❖ For women using **hormonal Birth Control or HRT** (Hormone Replacement Therapy): Most often you can continue to take it postoperatively. However, due to increased risks of blood clots with birth control or HRT, as well as during the postoperative phase, you may need to discontinue the therapy for several weeks. It is best to consult your primary care provider, or gynecologist regarding the risks and benefits of their continued use while you recover.