

Anterior Total Hip Replacement

Quick Reference Guide · Dr. Jesse Chrastil, MD · Panorama Orthopedics & Spine

Date of Surgery:		Surgery Location:	
Arrival Time:		Post-Op Appt:	

About Your Anterior Hip Replacement

Muscle-sparing anterior approach — no muscles are cut. Dissolvable sutures (no staples to remove). Weight-bearing as tolerated immediately. NO hip precautions — dislocation risk is extremely low with this approach.

Care Team & Important Phone Numbers

Care Team - Dr. Jesse Chrastil, MD — Surgeon - Jessica Wieczorek, PA-C — Surgical & Clinical PA - Rebecca Grosh, PA-C — Surgical & Clinical PA (Mon Highlands Ranch) - Kate Taylor, CMA — Surgical Coordinator / 2-wk visit - Chaelyn Sipres, CNA — Medical questions & refills Contact Kate or Chaelyn for questions — not directly reachable by phone. Leave a voicemail. Clinic Line / Email: 720-497-6191 drchrastilpc@panoramaortho.com	Phone Numbers After-Hours URGENT: 303-233-1223 Scheduling: 303-233-1223 → Opt 2 → Opt 1 Rx Refills (M–F 7am–3pm): 720-497-6191 Clinic Line / Email: 720-497-6191 drchrastilpc@panoramaortho.com PT Scheduling: 303-274-7330 (only if ordered) Billing: 720-497-6637 Surgery Locations: - OrthoColorado Hospital (720) 321-5450 - Centennial Hospital (303) 699-3000 - South Denver Surgery Ctr (720) 360-3400
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Before Your Surgery — Checklist

Timeframe	What You Need to Do
4–6 Wks Before	- PCP medical clearance within 30 days of surgery (labs, EKG, physical) - Dental exam within 6 months; major dental work ≥1 month before surgery - No hip injections for 2–3 months before surgery - Designate a 'Total Joint Care Provider' to stay with you 2–3 days post-op
2 Wks Before	- Purchase/borrow 2-wheeled walker (used ~5–10 days); cane for the transition week after - Optional: shower chair, raised toilet seat, hand-held shower head; stop tobacco
1 Wk Before	- Start CHG wipes/soap once daily for 5 days (OTC — no Rx); do NOT shave legs - Remove tripping hazards; arrange pet care and rides to surgery - Start Senna-S stool softener 2 days before surgery (2 tabs twice daily) - If you are on a blood thinner or GLP-1 medication see chart below on when to stop these meds
Day Before / Day Of	- Stay well hydrated day before; NOTHING to eat/drink after midnight — violation cancels surgery - Take only Dr. Chrastil's / PCP-approved meds that morning - Bring photo ID, insurance card, glasses/hearing aids/dentures, loose comfortable clothes

Medications to Stop Before Surgery

Stop When	What
7+ days before	ALL NSAIDs (ibuprofen, naproxen, Advil, Aleve, Celebrex, Meloxicam, Voltaren, etc.) • Aspirin products • Birth control/hormones • Vitamins A/C/E/K, fish oil, glucosamine, all herbal supplements
5 days before	Plavix (clopidogrel). EXCEPTION: Do NOT stop if you have coronary stents without cardiologist approval
72 hrs before	Blood thinners: Eliquis, Xarelto, Coumadin
GLP-1 meds	Weekly (Ozempic, Wegovy, Mounjaro): stop 1 week before • Daily dose: stop 1 day before
Day of surgery—DO NOT take	ACE inhibitors (lisinopril, enalapril) • ARBs (losartan, valsartan) • Diuretics (HCTZ, Lasix) OK to take: beta-blockers, calcium channel blockers, vasodilators
OK to continue	Cholesterol meds, psychiatric meds, gabapentin, Tylenol, Tramadol, iron

Surgery Day, Recovery & Resources

Surgery Day

- Arrive 2–3 hours early (facility calls with exact time)
 - Spinal anesthesia + sedation — you are fully asleep
 - Surgery ~60–90 min: anterior, muscle-sparing approach — dissolvable sutures, no staples
 - Recovery room ~1 hr: must walk before discharge
 - Same-day discharge is the goal (S. Denver Surgery Ctr is outpatient-only)
- Weight-bearing as tolerated immediately — walk right away. No hip precautions needed with this approach.**

Post-Op Medications

Pain (narcotic): Oxycodone / Norco / Hydromorphone + Tramadol as needed
Anti-inflammatory: Meloxicam 15 mg or Celecoxib × 6 weeks (with food)
Blood clot prevention: Aspirin 81 mg twice daily × 30 days + Protonix, OR Eliquis 2.5 mg twice daily × 30 days
Constipation: Senna-S starting 2 days before (continue while on narcotics)
 ⚠️ Refills: 720-497-6191, Mon–Fri 7am–3pm ONLY. Do not stop blood thinners earlier than prescribed without checking with us.

CHG Skin Prep (5 days before surgery)

Buy CHG soap or wipes OTC (no Rx). Use once daily for 5 days before surgery.

Evening before:

- Shower, then use CHG in shower OR apply wipes on dry skin
- Wipe: hip → chest/abdomen → both arms → hips/groin → legs → outer buttocks
- Do not rinse; no lotion/deodorant after
- Wear freshly laundered clothes; sleep on fresh sheets

Morning of surgery:

- Repeat full-body wipe; wear fresh clothes; no shaving/creams/deodorant

Recovery Timeline

Days 1–10: Groin/thigh pain common (may radiate to knee) — walker, then cane by day 5–10

Weeks 1–2: Most difficult — swelling, bruising, warmth around hip normal for 2–3 months; wear TED hose 2 weeks

Week 6: ~75–80% recovered; X-rays with Dr. Chrastil; PT if wanted/needed

3 Months: ~90% recovered; most activities resume

1 Year: Full recovery; implants last 25–30 years

Follow-up:

- 2 weeks: incision check, dressing removed (Jessica or Kate)
- 6 weeks: exam + X-rays with Dr. Chrastil
- 4–6 mo, 1 yr, every 3–5 yrs: implant monitoring

Normal After Surgery — Do Not Panic

- Swelling, bruising, and warmth around the hip for 2–3 months
- Groin or thigh pain that may radiate to the knee (first 1–2 weeks)
- Numbness near the incision — a sensory-only nerve; not dangerous
- One leg feeling longer/shorter — usually just perceived, resolves with time

Go to ER / Call 911 Immediately

- Chest pain or shortness of breath (heart or lung concerns)
- Sudden severe leg or calf pain + major new swelling (possible DVT)
- Fever >101°F + worsening redness, warmth, or drainage from incision
- Popping sensation with groin pain + inability to bear weight (possible dislocation — very rare)

Quick FAQ

Question	Answer
When can I shower?	Day after surgery. Waterproof dressing stays on until 2-wk visit. No baths/soaking for 5–6 weeks.
When can I drive?	Typically 2–6 weeks — discuss with care team first.
Will I need PT?	Not always — evaluated at your 2-week visit; ordered then if needed.
Are there hip precautions?	No — the anterior approach is muscle-sparing; dislocation risk is very low.
Will I be pain-free?	Most patients feel their hip is natural and pain-free once healed. ~90% of hip pain resolves.
Constipated?	Continue Senna-S while on narcotics. Add Miralax, Dulcolax or Milk of Magnesia if needed.



Complete Anterior THR Packet
Full 40-page guide & medication schedules



Anterior Hip Surgery & Recovery Video
Dr. Chrastil's instructional video guide



Meet Dr. Chrastil
Provider profile at Panorama Ortho