

Post-Operative Instructions for (Low Back) Lumbar Spine Surgery Laminectomy, Discectomy, Spinal Fusion

We want to make this experience as pleasant as possible for you and for your family.

PLEASE NOTE THAT IN SOME CASES, DUE TO UNFORSEEN EVENTS INCLUDING EMERGENCIES, SCHEDULING CONFLICTS OR ABNORMAL PRE-OP TESTING, YOUR SURGERY MAY NEED TO BE POSTPONED OR RESCHEDULED.

After Surgery (Post-Op) Pain

It is not unusual to experience the following symptoms in the first few weeks after surgery:

1. Pain in and around the incision.
2. Some persistent leg pain.
3. Numbness or tingling of the leg or foot.
4. Mild swelling or redness at the incision.
5. Muscle tightness or spasm of the back going to the leg(s) to the knees.
6. Pain on moving from bed to chair or standing position. It is not unusual to be uncomfortable during the first few days following surgery, and especially at night. This will improve steadily.

Medications

With regard to pain medicine, you will be given a prescription when you are discharged. You may also get a prescription for a muscle relaxant. Take them as needed and directed. **No prescription refills will be called in at night or on weekends.**

Do not begin taking Non-Steroidal Ant-Inflammatory Drugs or NSAIDs (Advil, Motrin, Ibuprofen, Nuprin, Alleve, Celebrex, Aspirin, etc) until approximately 8-12 weeks from surgery if you had a lumbar fusion.

Incision Care

There may be staples, sutures or paper band aids (steri-strips) holding the incision closed.

1. Change the dressing daily until the first follow-up appointment with 4x4 gauze and tape, or when the dressing is soiled. After that, if there is no drainage, you may remove the dressing. You may either let the incision air dry (**leave stri-strips in place**) or cover with an oversized Band-Aid. Persistent or cloudy, smelly drainage should be reported.
2. You may shower 7 days after surgery. Do not remove the gauze, cover with a bandage prior to showering. Water will not hurt the incision but do not tub bathe or soak the wound. After showering, re-cover the incision with a clean, dry dressing (**leave stri-strips in place**).
3. Do not apply ointments or solutions to the incision. Mild soap and water is ok.
4. If you notice a small clear suture at the end of the incision, do not remove it. It will either dissolve or be removed in the office.
5. If you develop blisters, redness, or irritation from the tape, discontinue use.

Do's and Don'ts

You should think of the first week after surgery as an extension of your hospital stay. In general, if any activities increases discomfort, don't do it. It will get easier each day. Your first post-op visit will be scheduled 14 days after the surgery, posterior spinal decompression follow up six weeks after. Your second visit will be approximately 6 weeks after the first visit. An X-Ray will be ordered on the day of your second post-op visits if you have a lumbar fusion.

1. Do not use time at home to do projects.
2. Do not remain confined to bed during the day. Walk as much as you comfortably can. You may climb stairs. If you sit or stand for more than 50 minutes, you should get up and walk to avoid getting stiff.
3. Avoid exaggerated bending, twisting, or lifting more than 5-10lbs.
4. **No exercise program** is allowed until you are released by your physician to do so.
5. Sexual activity is permitted whenever comfort permits.
6. You may ride in a car as a passenger. Do not ride for more than an hour without getting out and walking for a few minutes. You may drive after your first post-op visit if you feel comfortable.
7. Decision regarding returning to work and physical therapy needs will be made on an individual basis.
8. Hot tubs – Patients who have had a fusion should not use a hot tub for at least 3 months post-op. If you have had a laminectomy or microdiscectomy and do not have any surgical implants or bone graft, you may use a hot tub at 3 weeks post-op.
9. The pain medication and anesthesia can cause problems with constipation. Start a stool softener daily, increase your fluids and walk as tolerated to help with constipation. It is ok to use an over the counter suppository (such as Dulcolax) or an oral laxative (such as Dulcolax tabs, Milk or Magnesia, Metamucil, or Miralax), as needed, if you have not had a bowel movement by 3 days after your surgery.
10. Do not sleep in a reclining chair.

Calling the Office

Call the office at 519-745-8279 if any of the following occur:

1. Sustained fever greater than 38 degree Celcius that does not respond to a dose of 2 tablets of Tylenol (Do not take Tylenol if you have contraindications or allergies to Tylenol).
2. Drainage from the incision that is increasing (Spotty drainage may be normal for the first few days).
3. Incision is very red or warm to the touch and worsening.
4. New leg or back pain, or swelling in excess of your pre-operative pain.

Calling 911

Please call 911 immediately or go to the ER if any of the following occur:

1. **Difficulty breathing, shortness of breath or pain with breathing.**
2. **Chest Pain**
3. **Leg Pain – specifically calf tightness or swelling.**
4. **Bowel or Bladder loss.**