POST-OPERATIVE DISCHARGE INSTRUCTIONS FOR CERVICAL SPINE SURGERY

PLEASE RETURN HOME AND REST. Pamper yourself. Your initial activity level is influenced by the anesthetic agent you have received. It is not uncommon to feel drowsy or tired for a number of hours. You may experience a sore throat and muscle aches. You will need to deep breathe and cough frequently for the first 24 hours post-operative. Please make sure you also do your leg exercises, pump your ankles and bend your legs up and down to help prevent clots in your legs.

AFTER ANESTHESIA: DO NOT drive a car, operate complicated machinery, make important binding decisions, drink alcohol or smoke.

1. Nourishment: We suggest you return to your normal diet slowly. (If you have had an anterior cervical surgery, you must remain on soft slippery foods for 2-3 weeks. Chew your food well.) Begin by drinking liquids such as cola, 7-Up, tea, ginger ale, or apple juice. Progress your diet to foods that are not spicy and then to your regular diet as tolerated. Sit up to eat all meals. It is difficult to swallow reclining.

2. Activity:
   - No bending, lifting, twisting, pushing or pulling anything greater than 10 lbs for 6 weeks. Let pain be your guide….. If it hurts, don’t do it. …… Do not take a pain pill to do something. If you need to take a pain pill, then you shouldn’t do it. Rest a lot in the first 7-10 days. Start with short bouts of being up, and increase as you feel better.
   - You may take a shower the next day. Cover dressing with plastic, shower, then remove the plastic and dressing. Leave steri strips intact. Cover with a dry dressing. Repeat this for 7 days, then you may shower with no covering. No baths, pools or Jacuzzis for 3 weeks.
   - Short walks only for the first few days. Walk daily. If symptoms return, shorten duration of the walk. No swimming, use of treadmill/stairmaster exercises for 6 weeks, unless directed by your physician. Further exercises/physical therapy and return to work will be discussed with your surgeon on your postoperative follow-up visit. “If it hurts, don’t do it!” Don’t take a pain pill to do something. No traveling in a car until your postoperative visit with your surgeon nurse. Please discuss driving then.
   - Your head may feel heavy for a few days. This is normal.
   - Roll your shoulders to keep loose. Do not tighten neck muscles. If you had posterior neck surgery, gently move your neck. Do not hold it still, as it will become very stiff. If you had an anterior cervical fusion, please check with your Doctor on how much range of motion he would like you to do. If you had an anterior cervical discectomy- No forced flexion or forced extension. You may sleep on your back or side with your head supported.
   - Limit sitting to meals for no more than 30 minutes. Sitting reclined with your feet up is also a kind position for your spine. Rest your head several times a day.
   - No strenuous activity for 6 weeks. Gradual activity increases will be allowed by your doctor. Check with the doctor at the postoperative visit.
   - Sexual activities may be resumed. Take a passive role.

3. Medication: No Anti-inflammatories if you have had a fusion. Resume your previous medication schedule. Your physician will advise you on what medications to take for discomfort. Take only the medications your physician has prescribed.
   - Do not take aspirin for 4 days: and only resume if it is for your heart. Do not take aspirin for pain.
   - It is advisable to take pain medications as prescribed the first 24-48 hours after discharge.
   - You will most likely need to take a stool softener while taking pain medicine to prevent constipation.
   - Prescription given; Instructions on prescription reviewed with: Patient/Spouse/Significant Other.

4. Surgery Site: You can expect:
   - No drainage/small amount/moderate amount/large amount of drainage from surgical site.
   - Tonight, reinforce the dressing only. DO NOT remove it until tomorrow.
   - If the dressing gets wet, take the wet dressing off and replace it with a dry dressing.
   - Call your doctor if the dressing continues to have a large amount of drainage on it.
   - You must change your dressing every day.
   - Apply ice packs to neck for 20 minutes at a time for 2-4 days. Protect yourself from an ice burn-place ice pack in a pillow slip.

5. YOU SHOULD CALL YOUR PHYSICIAN FOR ANY OF THE FOLLOWING:
   - Temperature greater than 101°F.
   - Tenderness, swelling, calf pain, or discoloration of lower extremities.
   - Unexplained shortness of breath, chest pain or palpitations, anxiety and/or sweating.
   - Coughing up blood.
   - Sudden pain that remains and has not been previously experienced.
   - Pain that does not lessen with pain medication.

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6. **Follow-up**

Appointment is scheduled to see the doctor or nurse for a wound check in 7-10 days.

**Wound check** appointment scheduled on ___/___/____ at ____:____AM/PM

**Postoperative** appointment with:

Dr. _______________________________

Scheduled on ___/___/____ at ____:____AM/PM

Please call for any questions and/or concerns.

24 Hour Physician’s telephone number: ( ____ ) ______ - ______

I have received, read, understand, and accepted the personal responsibilities with the above postoperative discharge instructions.

_________________________ __/___/____ ____:____AM/PM

PATIENT SIGNATURE/RESPONSIBLE PARTY & RELATION DATE TIME

I have reviewed the postoperative instructions with the:

□ Patient
□ Spouse/Significant Other
□ Other ____________________

______________________________________________ LVN/RN

NURSE’S SIGNATURE

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Outcomes:

- Provides instructions regarding dietary needs (1107)
- Provides instruction about prescribed medications (1104)
- Evaluates responses to nutritional instruction (152)
- Evaluates response to instruction about prescribed medication (148)
- Provides pain management instruction (1108)
- Identifies expectations of home care (162)
- Evaluates response to pain management instruction (153)
- Evaluates response to instruction (150)

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