

Discharge Instructions

LUMBAR FUSION

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Orthopedic Specialists Phone 314-909-1359

Patient: _____

Date: _____

- You should already have a follow-up appointment made; if not, please call the office at 314-909-1359 and ask to be seen 10-14 days following the date of your surgery. If you cannot remember your follow-up time, call the office and we can look it up for you.
- Take only short showers initially. Remove your dressing prior to the shower and re-apply a new dressing following the shower. You may pat dry the incision following the shower. You can use gauze and tape to cover your wound. You should **not** sit in any bathtub, Jacuzzi or swimming pool until after your first post-op visit. Continue with your dressing until your first post-op visit.
- The incision is covered by a special skin glue. **DO NOT** apply any ointments, gels, or creams to the incision. **DO NOT** scrub or rub the incision or apply soap or hydrogen peroxide to the incision. The wound does not need to be cleaned and the dressing only needs to be changed if you shower or you get your dressing wet. Moisture is what dissolves the skin glue so the more it is kept dry the better, but a quick shower is OK.
- No lifting greater than 20 pounds for the first 4 to 5 months following your surgery unless otherwise instructed. You can ride in a car, walk, bend over, and use stairs as your pain allows. You can sleep in whatever position is most comfortable. Your physical therapy early on is simply walking a little every day. You will not heal faster by trying to push it physically until your fusion is strong enough to take it. Doing activities greater than those listed above, increase your risk of breaking down your fusion before it has time to heal.
- Call the office at 314-909-1359 should you develop a temperature greater than 101.5 degrees or if the wound develops redness or drainage.
- Call the office **immediately** should you experience any of the following: 1. Weakness in your legs; 2. Numbness or tingling in both legs; 3. Bowel or bladder disturbances, such as loss of control or inability to go; 4. Numbness or tingling around your anus or in the area of your genitals; 5. Persisting headaches, especially headaches which are relieved by lying down.
- You have been given a prescription for narcotic pain pills-**TAKE THESE ONLY AS DIRECTED**. We do not refill narcotic pain medications after hours or on weekends; so **PLEASE** call during regular office hours. If you have problems with nausea from your pain meds, try taking them after eating and/or breaking them in half. If you are having poor pain control because you cannot take your pain pills secondary to problems with nausea, please call the office.
- Narcotic pain medication can cause constipation. The following medications may be purchased at the pharmacy without a prescription to aid in relief of constipation; 1) you can take Dulcolax Tablets, 1 to 2 tablets one to two times a day. 2) Instead of Dulcolax, you may use Senokot-S at 2 tablets one to two times a day. If you get diarrhea from these medications, reduce the dose. 3) If the Dulcolax or Senokot-S doesn't work, take 30 ml. of Milk of Magnesia. If problems still persist, drink ½ bottle of Magnesium Citrate and if there is still no bowel movement then finish the rest of the bottle after 2 hours. Lastly, you may use a Fleet Enema. Call the office if this protocol fails and you do not have a bowel movement within 3 days.
- If you develop abdominal distention, stop passing gas, or start vomiting, please contact the office for further instructions.
- It is common to feel discomfort or numbness in the back or leg that was painful prior to surgery and sometimes it takes time for these symptoms to calm down. The area of the surgery is usually the sorest for the first few days to weeks, and then should slowly improve week to week after that. It is common to have good and bad days and be sorer for a day or two after a more active day during your recovery.
- **DO NOT TAKE** any non-steroidal anti-inflammatory medications (arthritis medications) for 6 weeks following the procedure. Some common anti-inflammatories are as follows; Advil, Motrin, Aleve, Ibuprofen, Celebrex, Naprosyn, Mobic or Relafen. It is important that you avoid these medicines because they can interfere with healing of your fusion.
- **DO NOT SMOKE OR USE NICOTINE PRODUCTS** after your surgery as they **greatly** increase your risk of not healing your fusion. Your post operative pain will last **much** longer and if you do not heal your fusion you will require more surgery.
- In case of a question or concern after office hours that cannot wait until the office opens, the best way to contact us is to still use the same office number. This will direct you to our answering service and they will page us. Do not call the hospital or surgery center for medical questions about your surgery.

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**Lumbar decompression and Fusion
 Guidelines for Recovery**

The following are general guidelines for recovery; advancements in activity, work, etc., will be based on your progress at follow-up evaluations.

Criteria	Day of Surgery to initial post op visit	2-4 weeks	4-8weeks	8-12 weeks	>12 weeks
Movement	Avoid repetitive type movement. Avoid hyperextension/flexion.	X	X	X	X
Care of Incision	Keep covered until 1 st post-op appointment. At home can take short 5 minute showers. Gently pat dry and cover with dry dressing.	Skin glue/tape gradually dissolves or peels off (usually around 2 weeks). No soaking in baths, hot tubs, or pools until incision is fully healed.	X	X	X
Driving	May drive when clear minded or not using medication that decreases awareness.	X	X	X	X
Imaging		X-rays taken at 1 st post op appointment		X-rays taken at 2 nd post op appointment 10 weeks after surgery.	As needed
Weight Restriction	Limit lifting to less than 20lbs	Limit lifting to less than 20lbs	Limit lifting to less than 20lbs	Limit lifting to less than 20lbs	May increase lifting as tolerated.
Activity/Exercise	May walk, but no long distance or exercise. ->	No exercise, walking short distance okay.	No exercise, walking short distance okay.	May increase walking slowly.	Begin resuming normal activity. Start slow and increase as tolerated.
Physical Therapy	X	X	X	X	Physical therapy may be recommended to increase flexibility and strengthen.
Follow-up Appointments	1 st post op appointment 10-14 days after surgery	x	X	10 weeks	As needed
Return to Work	X	May return to sedentary-light duty work.	May return to light duty 4-6 weeks out from surgery.	Continue light duty with restrictions.	May return full duty 3-4 months out from surgery.

**No NSAIDs (Ibuprofen, aleve, motrin, diclofenac, meloxicam, etc., for 6-8 weeks after surgery). May use Tylenol (acetaminophen), not to exceed 3,000mg/day.

