



NEUROLOGIC ASSOCIATES OF WAUKESHA HOME CARE SURGERY INSTRUCTIONS

Home Care

When you go home, there are several things you will want to remember for your comfort, safety and recovery.

Caring for Yourself at Home:

Discomfort

- Walk short distances at least several times a day.
- Avoid sitting longer than 30 minutes.
- Use ice for pain control. Ice will decrease discomfort to your affected area. Ice is most beneficial for the first 48 hours following surgery, then use as needed. Make sure that the ice pack is wrapped in a towel to provide a protective barrier between the ice and your skin and avoid ice burns. Apply ice for 20 minutes every two hours. Do not apply directly to skin. (A bag of frozen vegetables, such as peas, wrapped in a towel makes a great ice pack. Be sure to label the bag to be used only as an ice pack.)
- If a brace or collar is necessary, be sure to wear as instructed by your surgeon.
- No lifting more than a gallon of milk.
- No bending at the waist, bend only with your knees, and no twisting after lumbar surgery.

Medication Management

- Take medications only as prescribed, pain pills should be taken with food.
- Call your surgeon one week before refills are required.
- Do not take any other medications or supplements without checking with your doctor.
- Ask your surgeon before taking any herbal or over-the-counter medications such as Advil, Aspirin, Tylenol, Ibuprofen or Aleve.
- For safety reasons, do not drive or operate machinery while taking pain medication.
- If a fusion has been performed, avoid anti-inflammatory medications such as Ibuprofen, Naproxen, Aleve, etc. for the next several months until approved by your surgeon.
- Tips on swallowing pills:
 - a. Take a drink of water before taking your pills
 - b. Drink a full glass of water after taking all of your pills
 - c. Sit up for a few minutes after taking your pills.
 - d. Talk to your doctor or pharmacist if you have trouble swallowing your pills

Physical Changes

- Your appetite may be poor, but this will improve. Be sure to drink plenty of water to prevent dehydration and/or constipation.
- You may experience difficulty sleeping at night. This is normal. Try to avoid napping too much during the day.
- Your energy level will be low for the first four weeks, this is normal. Remember to eat healthy and obtain an adequate amount of sleep.
- Your pain medication contains narcotics that have a tendency to cause constipation. Increase fluids and fiber (fruits and vegetables) while taking pain pills. Over-the-counter stool softeners may be used if necessary.
- If you were given an incentive spirometer to use while you were in the hospital, continue to use it 4 times a day for 5 days after surgery to prevent postoperative pneumonia.
- Numbness and tingling you may have experienced prior to surgery may continue for several weeks following surgery. This is normal and can be discussed with your surgeon post-operatively.

Stockings

If you were given white elastic stockings in the hospital, you should continue to wear them. These are used to compress the veins in your legs. They decrease the amount of swelling, which lowers your risk of blood clots and prevents blood from pooling in the legs.

- Initially wear the stockings continuously, removing for one hour twice daily for skin care.
- You may stop wearing your stockings when you are walking on a regular basis.
- Notify your physician if you notice increased pain or swelling in either leg.



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Incision Care

- Keep your incision clean and dry; observe daily.
- Incision may be left open to air.
- If Steri-Strips ("Butterflies") are present, leave in place, they will fall off in one or two weeks or you will be instructed by your surgeon on removal.
- You may shower 3 days after surgery, your incision may get wet at this time, pat incision dry, do not rub.
- No tub baths, swimming pools, or hot tubs for at least 2 weeks following surgery.
- No lotions, powders or perfumes should be used on or near the incision area.
- Do not use antibiotic ointments on the incision

If you have been instructed to change your dressing

1. Wash your hands.
2. Open all dressing change materials (4x4 gauze, alcohol wipes and paper tape).
3. Inspect incision for signs of infection.
4. After disposing of the old dressing, rewash your hands.
5. Swipe incision with alcohol pads three times, one down each side and the final down the middle.
6. Place two 4x4 gauze dressings lengthwise on top of the incision. Secure with paper tape.

Notify your Surgeon *Immediately* if you have:

Signs of Infection

- Increased swelling or redness at the incision site
- Change in color, amount of drainage, or odor at incision site
- Increased pain at incision site
- Fever greater than 101°F degrees for more than 24 hours
- Night sweats
- Persistent nausea

Signs of Blood Clots

- Swelling in thigh, calf and ankle that does not diminish with elevation of that leg
- Pain or tenderness in the calf or hot to touch
- It is possible that a blood clot could break loose and travel to the lungs, this may present as chest pain, difficulty and/or rapid breathing, shortness of breath, sweating, or confusion. This is a medical emergency - call 911 immediately

Signs of Urinary Retention

- Lower abdominal discomfort/pain
- Bloating of the lower abdomen
- Frequent urge to urinate
- Incontinence
- Little or NO urine produced



Please call our main office at 262-542-9503 days, evenings, or weekends with any questions or problems that you have after being discharged from the hospital. If our office is closed, our answering service will only page the physician for urgent needs.

The following is a list of instructions for your recovery following your spinal surgery. These are general instructions to be used as guidelines. They may be modified for an individual patient. Please call your physician's patient care coordinator with any specific questions.

1. No lifting, pushing or pulling of objects greater than 10 pounds and no strenuous activity.
2. You may progress slowly to limited lifting, bending and twisting if approved by your surgeon.
3. When bending to lift an object off the floor, bend at the knees and NOT at the waist.
4. Hold on to the back of a chair or counter when bending.
5. Do not twist the spine in any way.
6. In order to avoid twisting your spine in bed at night, use a pillow between your legs and pillows at your sides to avoid rolling over onto your stomach.
7. Use a straight back chair or a fairly rigid recliner for sitting, preferably something with arms.
8. Do not use low or soft cushion chairs for sitting, as they offer very little support.
9. Use a lumbar roll (low back support cushion) when sitting.
10. In the first 10 days to 2 weeks, do not sit more than 30 minutes at any one time. Over the next 6 weeks gradually increase the duration and frequency that is comfortable for you.
11. No back exercises will be done in the first 3-4 weeks. As you progress it will be determined by your surgeon when you can start an exercise program or physical therapy.
12. Your surgeon will tell you when you may return to work. It usually occurs between the 3rd and 4th week with increasing work hours depending on the type of surgery you have had.
13. Walking is the best activity to improve your overall fitness and endurance. This is started very early on following your surgery. You can begin with short trips and increase your time and distance. Begin with 10 minutes and slowly progress to walking 20-30 minutes 3-4 times a day.
14. You may climb stairs from the very beginning, but start slowly and use the handrail. It is advisable the first day or two, to have someone climb the stairs with you to ensure stability and that you are comfortable.
15. In most cases, dissolvable sutures have been used for your incision. The incision is glued and covered or covered with Steri-strips and a gauze dressing that protects the wound. The dressing is usually a water resistant dressing that will keep the wound dry. Pat area dry with a towel. Before you are discharged from the hospital the nurse will provide you with further instructions regarding the care of your wound. Do not take a bath for at least 2 weeks after surgery.

**NEUROLOGIC ASSOCIATES OF WAUKESHA
POST OPERATIVE INSTRUCTIONS**

16. If staples or non-dissolvable sutures are used, you will need to be seen at our office within 10-14 days from surgery to have them removed. Please call the office to make an appointment.
17. You are not to drive for the first 10 days to 2 weeks following surgery. You can ride in a car for short distances up to 20 minutes after the first week. Generally, it is best not to drive until after your first 2 week post-operative visit with the doctor. **You should not be driving until you are no longer taking prescribed pain medications.** Prolonged sitting in a car may exacerbate back or leg symptoms that were present pre-operatively.
18. You should rest between activities. You will tire more easily for the first few months post-operatively. It can take a while for your energy level to return to normal. It is generally a good idea to get up every morning, bathe, get dressed and resume a normal routine.
19. Medications may include pain relievers and analgesics to control pain, although they may cause drowsiness and constipation. They may also be habit forming and you may want to consider the amount of pain medication you are taking. You may also want to consider taking multivitamins with iron on a daily basis for a few weeks post-operatively. This may also make you constipated, so you should consider taking an over the counter stool softener.
20. Formal Physical Therapy, abdominal exercises and core strengthening programs will be started when it appears healing is well underway. Your surgeon will instruct you when to start these exercises.
21. Each individual situation is different and therefore requires individualized attention. Feel free to ask questions during your office visits. Write down your questions before you come into the office so you don't forget anything.

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