








YOUR PATH TO RECOVERY AFTER CERVICAL SPINE SURGERY

	Day of Surgery: # 0	After Surgery Day: # 1
Precautions	<ul style="list-style-type: none"> • No Bending • No Lifting • No Twisting 	<ul style="list-style-type: none"> • No Pushing • No Pulling
Activity	<p>Walk 3 times with collar & help Goal: Walk 50 feet</p>  <input type="checkbox"/>	<p>Walk 3 times with collar & help Goal: Ready for home Practice stairs & car transfers</p>  <input type="checkbox"/>
Diet	<p>Ice Chips, then Food & Liquids</p>  <input type="checkbox"/>	<p>Food & Liquids: Home</p>  <input type="checkbox"/>
Pain <i>Tell nurse if you are having pain</i>	<p>Pills or IV</p>  <input type="checkbox"/>	<p>Pills only, prescription given</p>  <input type="checkbox"/>
Discharge Plan <i>With patient and family</i>	<p>Discuss & confirm discharge plan</p> <input type="checkbox"/>	<p>Home with plan</p>  <input type="checkbox"/>
Important Reminders		
<ul style="list-style-type: none"> • Follow-up with your surgeon within 1-2 weeks • Log roll in & out of bed • Cervical collar is worn at the discretion of the surgeon • Start walking daily • Monitor your wound for infection • Eat slowly, take small bites, chew thoroughly • Driving precaution and restrictions apply 		<p>Before leaving hospital- Make sure you have blue envelop with:</p> <ul style="list-style-type: none"> • Patient Visit Summary Discharge Instructions • Patient Belonging's Record • Case Management Discharge Planning Final • Discharge Instructions Spine Surgery (Cervical) • Physical therapy home exercise program • Occupational therapy home exercise program
SUDDEN LOSS OF BOWEL OR BLADDER FUNCTION, LOSS OF FEELING IN LEGS OR IN GENITAL AREA, CHEST PAIN, SHORTNESS OF BREATH		

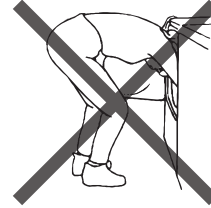
SPINE PRECAUTIONS

You will need to follow the below precautions.
Good body mechanics will be needed overall for the rest of your life.

NO BENDING



RIGHT

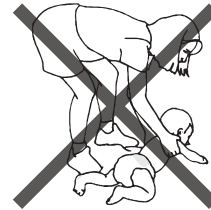


WRONG

NO LIFTING

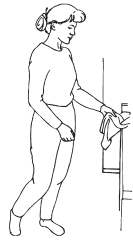


RIGHT

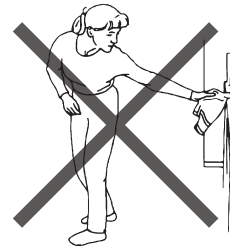


WRONG

NO TWISTING



RIGHT



WRONG

NO PUSHING / NO PULLING



RIGHT



WRONG

DISCHARGE INSTRUCTIONS

CERVICAL SPINE SURGERY

*The information below does not replace instructions your doctor may give you.

SPINE PRECAUTIONS

You will need to follow the below precautions. Good body mechanics will be needed overall for the rest of your life.

- NO bending
- NO pushing & pulling items
- NO lifting 5-10 pounds
- NO overhead lifting
- NO twisting
- NO bending neck down to look at a book/tablet/magazine etc.

*Remember Spine Precautions with All Activities

FOLLOW UP

- Follow-up with your surgeon within 1-2 weeks after your surgery

NOTIFY YOUR DOCTOR IMMEDIATELY WITH

- Sudden loss of urine/stool (bowel/bladder) control
- Loss of feeling (numbness) or weakness in both legs
- Loss of feeling (numbness) in the genital/crotch area (perineum)
- An increase in pain not relieved by pain medication or rest
- Fever above 100.4 degrees Fahrenheit
- Pain, swelling, tenderness in your calf
- Any signs of infection to the incision or the surrounding skin : increased swelling, redness, pain, very warm to touch, painful to touch, increase in drainage or the presence of pus-like drainage, the incision is pulling apart, foul smell, shaking, chills

CALL 911 RIGHT AWAY IF YOU HAVE ANY OF THE FOLLOWING

- Difficulty breathing
- Unable to swallow liquids
- Shortness of breath
- Chest pain

IMPORTANT REMINDERS

- You may still experience the same symptoms you did prior to surgery
- Healing can take time, even months
- Be sure to Log Roll in & out of bed
- Common to feel a "lump" in throat- This may take weeks to resolve

SPINE PRECAUTIONS

A cervical collar is used to provide support and limit movement of the neck. Your doctor may or may not order a cervical collar.

- Typically the collar should be worn AT ALL TIMES
- Typically the collar can be removed when showering
- Change the collar in front of a mirror while holding the neck still
- DO NOT move head or neck without collar in place
- Assess skin under brace: Especially the Back of the Head & Under the Chin
- DO NOT turn head side to side or move up and down. Maintain neutral spine, especially when putting the collar on/off

**Cervical collar is worn at the discretion of the surgeon*

HOME EXERCISE PROGRAM - PHYSICAL THERAPY & OCCUPATIONAL THERAPY

- Start walking daily. This is very important for your recovery
- Walk on a flat/level surface. Try to increase the distance you walk each day
- Daily activities are crucial to returning to your life after surgery
- Be sure to keep your body in neutral spine with all activities
- Be sure to Log Roll in & out of bed

INCISIONAL CARE

- Mepilex dressing ONLY: Leave the dressing on for a total of 5 days from the date of your surgery
- Any other dressing: remove dressing, look at site daily and follow your doctors instructions on how to care for the incision - If dressing is open to air after your surgery, leave open to air
- Keep your dressing clean and dry
- If dressing comes off, seems wet or is soaked with drainage replace with new dressing
- After 5 days take off dressing and leave open to air
- DO NOT use: Soap, lotion, antibiotics (triple antibiotic, first aid cream etc)
- DO NOT remove or pick at staples, sutures, steri-strips, skin glue

PAIN

- You can expect to have pain after your surgery
- Take your pain medication as directed
 - Many doctors advise not to take NSAIDS after a fusion because it may interfere with bones fusing together-Please speak with your doctor prior to taking an NSAID (Advil, Motrin, Aleve, Ascriptin, Bayer, Ecotrin, Ibuprofen, Naproxen Sodium, Aspirin)
 - You should NOT drink alcohol or drive when taking pain medication
- Ice the surgery area, 20 Minutes On, 20 Minutes Off
 - Ensure you have a barrier between the ice and the surgery area
 - DO NOT use heat
- Change positions frequently to decrease pain and stiffness
- Use Non-Pharmacologic Interventions (No medication) such as: Guided imagery, relaxation, distraction, prayer/meditation, humor, massage

MANAGING CONSTIPATION

- Pain medication most likely will cause constipation
- Increase your water, try drinking at least 8 glasses of water a day
- Slowly increase fiber into your diet
- Over the counter stool softeners or laxatives can be helpful

NUTRITION

- It is common to feel a “lump” in throat after surgery - This may take weeks to resolve
- Eat slowly, take small bite, chew thoroughly
- Eat healthy, well-balanced meals. Softer foods maybe easier to eat
- Drink at least 8 glasses of water per day
- DO NOT diet while you are healing

SUPPORT HOSE

- Keep the support hose on for at least 2 weeks, removing stockings at least 1-2 times a day or at night to allow air to reach your legs
- Monitor skin for breakdown (blisters, deep redness, creases in skin)
- Wash with soap and water and hang to dry

SITTING AND SLEEPING

- Remember to use a log roll when getting into and out of the bed
- Sit for 20 to 30 minutes at a time to let the back muscles rest
- Sometimes sitting can cause leg pain, if this is the case limit sitting
- Sleeping with a body pillow in between your legs can be helpful to keep your spine in proper alignment if you are a side sleeper

DRIVING

- No driving under the influence of pain medication (narcotic/opioid type of pain medications)
- Must be able to make an emergency stop
- Must be able to operate machinery safely
- Driving will depend on leg positioning, strength, and coordination
- No driving with a cervical collar
- Most can drive within a couple of weeks and may take up to six weeks

SHOWERING

- Usually ok to shower within 48-72 hours after surgery
- Typically the collar can be removed when showering
- Please have a family member or friend help you in the beginning
- DO NOT swim, take baths or go in hot tubs for a few weeks

SEXUAL INTERCOURSE

- Typically can be resumed when you can walk a mile without pain
- Communication is important especially to ensure your comfort and precautions.
- Stop immediately should you experience pain

RETURNING TO WORK

- You will be recovering for a period of 4-6 weeks
- Speed of recovery depends on your condition before surgery, after surgery, how well you follow your doctor's orders and your participation
- Depends on what type of work you do

NURSE NAVIGATOR

- The navigator is your liaison between all the members of your team. They will work with you and your family as much as you need
- Do not hesitate to call the Nurse Navigator at 661.200.2225, at any time

THE CARE OF YOUR INCISION

Applies to Mepilex Dressing

CALL YOUR DOCTOR RIGHT AWAY IF:

Any signs of infection are present to the incision or the surrounding skin:

- Increased swelling, redness or pain
- Very warm to touch
- Painful to touch
- Increase in drainage or the presence of pus-like drainage
- The incision is pulling apart
- A very foul smell
- Shaking chills or fever above 100.4 °F (38°C)

KEEP YOUR INCISION CLEAN, DRY AND INTACT

- Keep your dressing clean and dry
- After 5 days take off dressing and leave open to air. Observe wound and report any signs and symptoms of infection.
- DO NOT apply anything to your incision (unless directed by your physician) especially: Soap, lotion, antibiotics (triple antibiotic, first aid cream etc)
- DO NOT remove or pick at staples, sutures, steri-strips, skin glue or a scab

APPLYING A NEW DRESSING

Step 1 - Preparing to care for your incision

- Clean your work area before changing your dressing
- Grab your new dressing, and a plastic bag
- Thoroughly wash and dry your hands

Step 2 - Remove soiled dressing

- Discard in the plastic bag
- Wash and dry your hands

Step 3 - Clean your incision

- Gently pour warm water or saline over the incision to rinse the area
- DO NOT scrub
- DO NOT use soap

Step 4 - Apply new dressing

- Remove the release paper (see figure A)
- Center the dressing over the incision; place the tacky side down on top of the wound. Do not stretch (see figure B)
- Gently Press the dressing onto your skin. Ensure all edges are flat to prevent moisture from going under the dressing (see figure C)



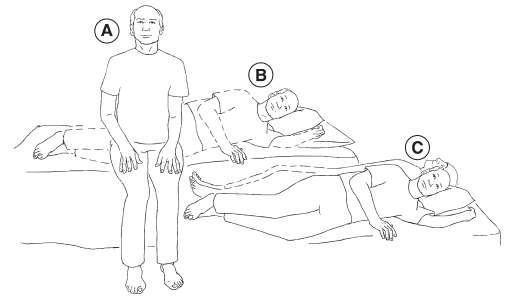
ACTIVITIES OF DAILY LIVING AFTER SPINE SURGERY

Don't rush! Give yourself extra time to set up proper work conditions and carry out good body mechanics.

GETTING IN AND OUT OF BED - LOG ROLL

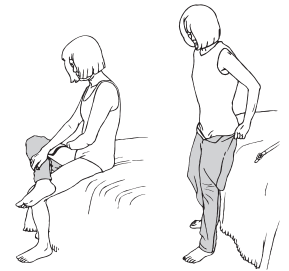
- A. Sit on edge of bed, feet on floor
- B. Lower self to lie down on one side by raising legs & lowering head at the same time
- C. Roll over onto back keeping shoulders, hips and knees moving together (Like a log)

***To get out of bed, reverse steps



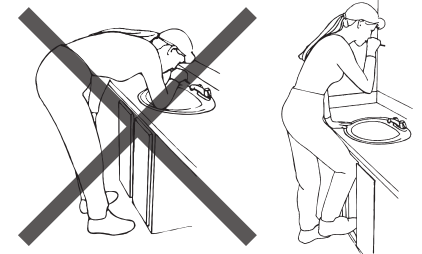
LOWER BODY DRESSING

- Sit on side of your bed or in chair
- Cross leg and start clothing over foot
- Keep back in neutral spine. Avoid arching back, twisting or bending
- As needed use: Reacher (to grab clothing)
Sock aid (to put on sock)
Long shoe horn (to put on shoe)



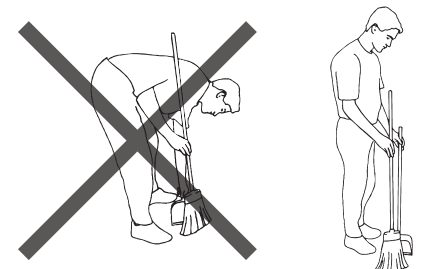
GROOMING: SHAVE, BRUSH TEETH, WASH YOUR FACE

- At the sink, bend your knees and hips
- Place one hand on the counter to brace yourself
- Do not bend over
- Bring a cup to your mouth to rinse rather than bending forward into the sink



HOUSEHOLD ACTIVITIES

- Use a reacher to grab objects on the floor
- Avoid reaching as much as possible
- Carry objects close to your body
- Keep items in easy reach



HELPFUL SHOWER ITEMS

- A hand-held shower device to direct flow of water
- Long-handled sponge to clean your lower legs & feet
- Shower chair or tub bench to help with conserving energy
- Non-skid bath mat to prevent slipping
- A rack to hold toiletries to prevent stooping & twisting
- Grab bar to promote balance & prevent falling

USING THE BATHROOM

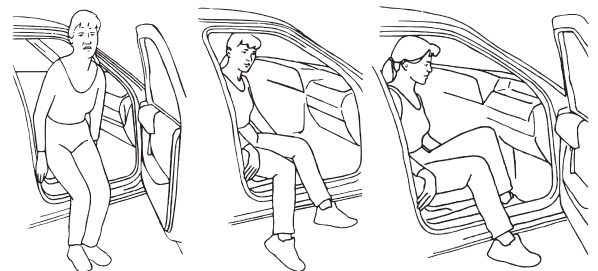
A raised toilet seat with armrests may be helpful

- Back up to the toilet until you feel the back of your legs touching the toilet seat.
- Reach back for the armrests and slowly lower yourself down
- Reverse the procedure to get up, pushing up from the armrests
- Be careful not to twist



CAR TRANSFER

- Avoid long car rides. Get up and walk around every 2 hours
- Back up to the seat, steady yourself, reach back for the seat and slowly lower yourself down
- Bring one leg in at a time
- Keep shoulders, hips and knees facing the same direction as you turn to face forward in the seat
- Reverse steps to get out



SAFETY

- Pick up clutter, remove throw rugs, and tape down electrical cords
- Arrange a driver to help you with errands during the first few days home
- Avoid long car rides
- Have a secure handrail on stairs
- Use a stable chair with a firm seat cushion and armrests