



POST-OPERATIVE DISCHARGE INSTRUCTIONS

TOWN CENTER ORTHOPAEDIC ASSOCIATES

Charles Seal MD

LUMBAR DECOMPRESSION SURGERY

OPEN DISCECTOMY/LAMINECTOMY/FORAMINOTOMY

OTHER _____

FOLLOW UP APPOINTMENT ON _____ at _____

Your post-op medications have been sent electronically to the pharmacy that is on file at Town Center Orthopedics. You may pick them up after you are discharged.

I. ACTIVITY RESTRICTIONS

- A. Return to work will be discussed on an individual basis with Dr. Seal or the NP.
- B. No driving while taking NARCOTIC medications
- C. You may slowly, progressively increase your activity as tolerated. While there are no specific restrictions, please increase your activity slowly and do not overdo it
- D. Most patients do NOT need a brace after surgery. If you are prescribed a brace, wear it as instructed by Dr. Seal.
- E. **ALWAYS** be mindful of good body mechanics as discussed with your physical therapist and/or Dr. Seal or the NP.

II. PAIN MANAGEMENT

Post-operative pain is to be expected and will vary depending on several factors: the type of surgery, prior use of narcotic pain medications, and personal tolerance of pain. Given the

individual variation of pain, your post-operative pain management will be managed on an individual basis, and your post-meds will be e-prescribed to your pharmacy prior to discharge.

- A. It is normal for you to have some spasms and aching pain in the back following surgery. **You may be given muscle relaxants for the muscle spasms.** These symptoms will resolve over time.
- B. If needed, you may take over-the-counter anti-inflammatory pain medication following surgery. The medications include: Ibuprofen/Advil/Motrin, Naproxen/Naprosyn/Aleve, Diclofenac/Voltaren, Excedrin, Celebrex, Aspirin.
- C. Narcotic medications will **only** be refilled during office hours. **Please** be aware of how many pills you have left so that you will not run out when the office is closed.

III. INCISION CARE

- A. Unless otherwise stated, your incision(s) have been sutured from the inside with material that dissolves. Thus, there are no sutures or staples that need to be removed at a later time.
- B. You can remove the outer dressing on postoperative day number 2. After that, **YOU MAY SHOWER**, and do not scrub. Gently pat dry. Do **NOT** soak the incision by taking baths or sitting in a pool/hot tub until the incision is completely healed (generally 3-4 weeks).
- C. Healing tissue that will exist along your incision does not contain the pigment melanin that normally protects the skin against the sun. For cosmetic reasons, it helps to protect the incision from the sun by covering it with clothing or using sunblock (if exposed) with at least **SPF 30 or higher for 6 to 12 months.**
- D. It is normal to have swelling around the incision site after surgery. You may use ice over the incision site for no more than 15 minutes at a time, as tolerated.

IV. POST OPERATIVE CONSTIPATION

- A. It is very common to have constipation after surgery. This is typically due to side effects of the narcotic pain medications. You should continue to take a stool softener (such as Colace) twice daily while on narcotic pain medications to help with this issue. If you are unable to have a bowel movement, first try over-the-counter laxatives (such as MiraLAX or Dulcolax), suppositories or enemas. Please get in touch with Dr. Seal's NP for advice on how to proceed if you are unable to have a bowel movement. **CONTACT** our office immediately if abdominal pain increases, you stop passing gas, or there is nausea/vomiting.

V. CALL our office (703 435 6604), your private physician's office or present to an emergency room **IMMEDIATELY** if any of the following occur:

- A. Fever (>101.5 degrees Fahrenheit), chills or sweats that occur beyond 2-3 days after surgery. It is **NOT** unusual to have a low-grade fever (100.5 degrees Fahrenheit) for 2-3 days after surgery
- B. Redness or swelling or warmth around the incision(s), **NON**-clear drainage from the incision, or increased pain in or around the incision
- C. Any neurological change in the arms or legs such as new weakness or increased pain/tingling/numbness
- D. Persistent or increased difficulty swallowing or speaking
- E. Severe headaches that are different in nature to prior headaches and ones that are worsened with standing and better with lying down
- F. Abdominal bloating associated with persistent nausea and vomiting (often these symptoms will be accompanied with constipation or inability to have a bowel movement)
- G. Calf swelling, redness, pain or warmth as this can be a sign of a deep venous thrombosis (also known as a "blood clot")
- H. Chest pain, difficulty breathing or cough

VI. FOLLOW-UP APPOINTMENT

- A. A post operative appointment has been made for you and is written on the front page of this paperwork. This appointment is typically made with Dr. Seal's NP where they will do x-rays (if indicated) and check your incision. They will refill any needed medications and discuss the next steps in your recovery including whether or not you need physical therapy. Please let us know if you need to change this appointment.

If there are any problems, please request to speak with Dr. Seal or the Nurse Practitioner
ALWAYS FEEL FREE TO CONTACT US WITH YOUR CONCERNS & QUESTIONS

Important Contact numbers

Main Office Number: 703-435-6604, this number can be used to reach Dr. Seal/on call physician after hours or on weekends for EMERGENCIES only.

**During the week, you can contact Dr. Seal's assistant and nurse practitioner:
Assistant: Emily Kassab 571-463-8730**

Nurse Practitioner: Rachel Feltcorn 703-794-5109