



POST-OPERATIVE DISCHARGE INSTRUCTIONS

TOWN CENTER ORTHOPAEDIC ASSOCIATES SPINE SURGERY

Charles Seal, MD

LUMBAR, THORACIC, & THORACOLUMBAR FUSION SPINE SURGERY

- LATERAL LUMBAR INTERBODY FUSION WITH INSTRUMENTATION
- ANTERIOR LUMBAR INTERBODY FUSION WITH/WITHOUT INSTRUMENTATION
- THORACOLUMBAR LUMBAR INTERBODY FUSION WITH INSTRUMENTATION
- POSTERIOR LUMBAR FUSION WITH INSTRUMENTATION
- 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 his NP.
- B. No driving while taking NARCOTIC medications.
- C. No lifting more than 10 pounds unless discussed prior to surgery.
- D. You are encouraged to walk on flat, non-slippery surfaces as much as you feel comfortable. You may use an elliptical machine or walk on a treadmill as soon as you feel comfortable
- E. DO NOT SMOKE as this may significantly decrease your chances of healing/fusion.

[Type here]

- F. Most patients do NOT need a brace after surgery. If you are prescribed a brace, wear it as instructed by Dr. Seal
- G. **ALWAYS** be mindful of good body mechanics as discussed with your physical therapist and/or Dr. Seal or his NP.

II. PAIN MANAGEMENT

- A. 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.
- B. It is normal for you to have some spasms and aching pain in the back following a posterior decompression and fusion since the bone graft or spacer placed in your back is restoring the normal disc height and stretching the surrounding structures, which were previously contracted. **You may be given muscle relaxants for the spasms.** Your body will adapt over time to this restored disc height.
- C. You may be cleared to take anti-inflammatory medication at your first post-op appointment, or earlier if specifically instructed explicitly by Dr. Seal or his team. Do not take NSAIDs if you are currently on steroid medication. These NSAID medications include Ibuprofen/Advil/Motrin, Naproxen/Naprosyn/Aleve, Diclofenac/Voltaren, Excedrin, Celebrex, Aspirin.
- D. 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. If you have an anterior incision, overlying the incision are steri-strip band-aids. They provide extra support and will curl up and fall off by themselves (usually in 1-3 weeks). If a steri-strip is starting to come off and you can see that the incision under that strip is healed, you may go ahead and pull off that steri-strip.
- C. 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 (3-4 weeks).

[Type here]

- D. 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.**
- A. 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 contact 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.

[Type here]

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 to 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 the 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