

Care After Your Spinal Surgery

In the hospital and at home

This handout explains care after your spinal surgery while you are in the hospital and care issues while you recover at home. It also includes information about follow-up exams, medicine refills, and when to call your doctor or nurse.

Your Spine Team at University of Washington Medical Center (UWMC) includes specially trained doctors, physician assistants, and nurses.

While You Are in the Hospital

- The 1st few days after your surgery, your pain may be managed with pain medicines through an *intravenous* (IV) line that you will control by pushing a button on your *patient-controlled analgesia* (PCA) device.
- Our physical therapists, occupational therapists, and nursing staff will help you walk and move around after your surgery.
- Once your pain is well controlled with oral pain medicines and you are able to walk without difficulty, we will determine when you will be released from the hospital.



Follow-up Visits

- You will see different members of the Spine Team during your follow-up visits after surgery. You will see your surgeon at either your 1st or 2nd follow-up visit.
- Your 1st follow-up visit will be about 2 to 3 weeks after surgery. But, if you have stitches that dissolve over time, your 1st follow-up visit may not be until about 4 weeks after surgery. We will check your incision, examine you, and we may take X-rays at this 1st visit.
- Your 2nd visit will be about 6 weeks after surgery. We may take X-rays at this visit also.
- You will return for more follow-up visits at 12 weeks, 6 months, and 1 year after your surgery. X-rays will be taken at these visits.

After surgery, you may receive pain medicines through an IV line that you will control by pushing a button.



When to Call for Help

Call 206-598-4288 **right away** if:

- You lose control of your bowels or bladder
- You have a fever over 101.5°F (38.6°C)
- Your incision is red
- There is new or more drainage coming from your incision

If you have any of these symptoms after 5 p.m. or on a weekend or holiday, call 206-598-6190 and ask for the Orthopaedic Resident or Spine Fellow on call to be paged.

- If you live outside the Seattle area, we may work with your local doctor to help manage your follow-up care closer to home.

Home Care

Call the Spine Service **right away** if you have:

- New weakness, numbness, or pain in your arms, hands, legs, or feet
- Changes in your bowel or bladder habits such as wetting the bed or not being able to pass urine or have a bowel movement
- A fever higher than 101.5°F (38.6°C), or a severe headache
- Warmth, redness, or increased drainage coming from your incision
- Sores or skin irritation underneath your brace

Incision Care

- Leave the dressing (bandages) in place for 3 days after your surgery.
- You may see a small amount of drainage coming from your incision. This is normal. It should lessen every day until your incision is completely dry.
- Keep your incision clean and dry. Change your dressing every day if there is drainage. Leave your incision uncovered when there is no drainage for 48 hours. It is OK to leave the dressing in place if that is more comfortable.
- You may shower with the incision uncovered once there is no drainage. Pat dry your incision after your shower (do not rub).
- Do not soak your incision site for 1 month after surgery. Do not take a bath, sit in a hot tub, or go swimming.

Medicines

- When you leave the hospital, you will receive pain medicine. Please follow your doctor's directions for using this medicine. Call the clinic if you have any questions or if you will run out of medicine before your next appointment.
- We expect you will no longer need pain medicine after your 2nd or 3rd follow-up visit. If you still need it at this time, you will need to talk with your primary care provider. The goal is to be off pain medicines by about 3 months or less, depending on your surgery.
- See your primary care provider about 2 months after your surgery, or sooner if needed, if you have any other health issues.



Begin walking as soon as possible after your surgery.

- If you had a spine fusion, do not take any NSAIDs (non-steroidal anti-inflammatory medicines) for pain. Common NSAIDs are aspirin, ibuprofen (Advil, Motrin, and others), naproxen (Naprosyn, Aleve, and others) and Celebrex. NSAIDs slow bone growth, and this may lead to poor healing. You may need to avoid these medicines for 3 months or longer, depending on your surgery.
- You may take Tylenol for pain, but do not take more than 3,000 mg in a 24-hour period.

Spine Support Devices

You may have been given a brace, cervical collar, or lumbar corset to wear after your surgery. This device will help stabilize your spine, provide support, and restrict movement to help your spine heal.

If you were given a spine support device:

- You will learn how to put on and care for your device before you leave the hospital.
- It helps if your caregiver learns how to help you get into and out of your device before you go home.
- Wear your device **at all times** unless told otherwise. If you have any questions, please call.
- If you have a spine support device, you will use it for about 3 months.

Activity

Walking and Physical Therapy

- Begin walking as soon as possible. Start with 2 or 3 short walks every day.
- If you had a spinal fusion surgery, do **not** do any other physical activity except for walking for the first 3 weeks after surgery, unless your Spine Team tells you otherwise.
- Most patients do not start physical therapy right after surgery. Your provider will let you know when it is safe to do physical therapy.

Lifting, Pushing, and Pulling

- Do **not** lift anything over 10 pounds (1 gallon of milk weighs 8 pounds).
- Always hold items close to your body when you lift or carry them.
- Your provider will let you know when it is safe for you to lift more than 10 pounds.
- Avoid strenuous pushing and pulling.

Bending and Twisting

- We advise most patients **not** to bend or twist after spine surgery. Bending and twisting may damage your spine, especially if you had a spine fusion.

Sleeping

- Sleep on a firm mattress. Do **not** sleep on a waterbed.
- If you have a brace or other spine support device, you may need to wear it while sleeping. Your care team will talk with you about this before you leave the hospital.

Sitting

- Do not sit for more than 45 minutes at a time. Try to maintain good posture.
- Get up and move around often.

Driving

- Do **not** drive as long as you are taking prescription pain medicines.
- Do **not** drive if you are wearing a cervical collar or brace that prevents movement of your neck or back, unless your doctor tells you it is OK.
- Avoid long car trips. If you must take a long trip, stop and get out and stretch every 45 to 60 minutes.

Smoking

- Stop smoking before, during, and at least 3 months after your surgery. Smoking slows bone and tissue healing and may affect how well you heal.

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns.

Weekdays from 8 a.m. to 5 p.m., call the UW Medicine Spine Center at 206-598-4288.

After hours and on weekends and holidays, call 206-598-6190 and ask for the Orthopaedic Resident or Spine Fellow on call to be paged.

Medicine Refills

For medicine refills, please call the Bone and Joint Surgery Center at least 48 to 72 hours before you run out of your medicines. Your nurse will want to talk with you about your medicines.

Some prescription pain medicines are restricted by law and cannot be called into a pharmacy over the phone. For these medicines, you or your caregiver must pick up your prescription at the Bone and Joint Surgery Center, or the prescription may be mailed to you. Mailed prescriptions may take 1 to 3 days to arrive.