# Spine Surgery Instructions









### Prepare yourself for surgery and recovery at home

In this packet, you will learn:

- How to prepare your home.
- What your stay at the hospital will be like.
- Tips and guides to make your recovery easier.

Hailey Office Hours: 8:30am - 4:30pm

Office Phone Number: (208) 788 - 7779

# Prior to surgery, we recommend watching the Patient Guide to Spine Surgery Video.

1. Ways to access the video

**Email** - If you use email, we will send you a link to the video.

**Websites** - You can access the video at www.northcanyon.org under Spine Care.

**QR Code** - You can scan this QR Code with your phone's camera.

2. After finishing the video, complete the confirmation page on the website. Our office will be notified and get in touch with you for the next steps.



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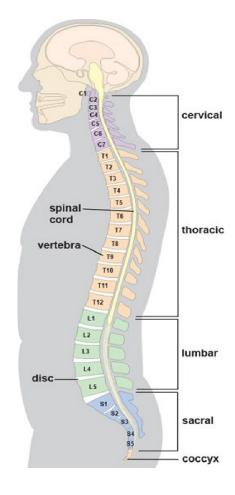
Origination Date: April 2023

### The Spine

The spine is one of the most important parts of the body. It supports most of your weight and protects the spinal cord from being injured.

The spine has 33 vertebrae that make up the 4 parts of the spine:

- Cervical (Neck)
- Thoracic (Middle of the Back)
- Lumbar (Lower Back)
- Sacral (Tailbone)



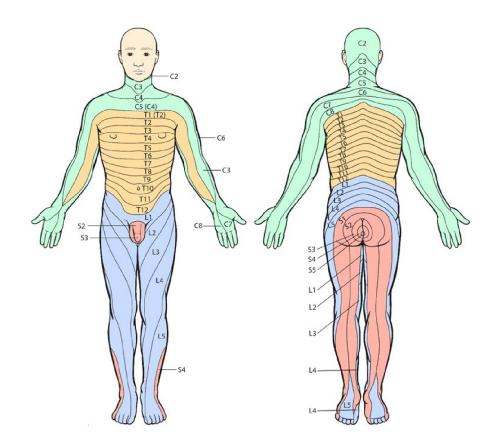
In between the vertebrae are discs, which can get damaged and cause pain. Each vertebra in the spine is associated with a nerve. Most of the time, the nerves are what is causing pain in people who need surgery.

- Injury to the cervical spine area (neck) can cause pain in the arms, hands, or fingers.
- Injury to the thoracic spine area (middle of the back) can cause pain in the ribs, chest, or navel.
- Injury to the lumbar spine area (lower back) can cause pain in the legs or feet.
- Injury to the sacral spine area (tailbone) can cause pain in the rear or legs. It also can cause problems going to the bathroom.

# The Spine

Dermatomes are areas of feeling. If there is pressure on a nerve or a nerve is damaged, you might feel pain, tingling, or numbness. Where you feel these sensations depends on the location of the nerve that has pressure on it or is damaged.

- Cervical (Neck)
- Thoracic (Middle of the Back)
- Lumbar (Lower Back)
- Sacral (Tailbone)



Does your pain, tingling, or numbness match an area seen here on the diagram?

### **Preparing for Surgery**

### Medications your spine surgeon should be aware of:

- Aspirin
- Ibuprofen (Advil, Motrin)
- Naproxen (Aleve)
- Blood thinning medications
   Medications for lupus
- Medications for rheumatoid arthritis
- Medications for psoriasis
- Garlic Tablets
- Vitamin E
- Omega-3 (Fish Oil)

### Bring a list of ALL medications you take to the hospital on the day of your surgery.

Medication Name & Strength	# of pills/tablets	Frequency
Example: Tylenol - 500mg	2 pills	Every 6 hours
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
10)		
11)		
12)		
13)		
14)		

# **Preparing for Surgery**

Mov	e Items to Waist Level:	Pack	ing for the Hospital:
	Shoes		Slippers/Shoes
	Clothes		Sweatpants
	Pots & Pans		Button-up Shirt
	Food		Underwear
	Medicine		Toothbrush & Toothpaste
	Shampoo/Soap		Hearing Aids (if needed)
Rem	ove Tripping Hazards:		CPAP Machine (if needed)
	Rugs		Pre-op Spine Packet (this packet)
	Electrical Cords	Opti	onal:
The	Bathroom:		Headphones
	Non-skid Bathmat		Tablet
	Personal Items at Waist Level		Laptop
	Liquid Soaps/Body Wash		Book(s)
			Charger
If Yo	u Live Alone:		
	Prepare some easy meals prior to surgery		
	Find assistance for yard work		
	Find assistance for grocery store trips		
	Find assistance for follow-up appointment	ts	
	Find assistance for caring for pets		
	Find assistance for changing clothes		

### **Preventing Infections**

### Ways You Can Lower the Risk of Infection

Hibiclens - A medicated soap that kills germs that live on your skin.

You can get Hibiclens at:

Local pharmacy

How to use Hibiclens:

- Use the soap the night before and the morning of the surgery.
- Apply the soap to a wet hand towel and wash from your neck to your feet, including your arms, front, and back.
- · Rinse with warm water.
- Dry off with a clean towel.

Do not use Hibiclen on your face or genital area. Do not use regular soap, powders, or lotion/creams on areas where Hibiclens was applied.

Stop Smoking - research shows that smoking increases the risk of infection

Don't Shave - We will take care of any shaving that needs to be done before your surgery

Clean Sheets - sleep on clean bed linen and sheets

### The Night Before Surgery

### No Food After Midnight

You may continue to drink water and clear liquids

### **Examples of clear liquids:**

- Water
- Chicken, Beef, or Vegetable Broth
- Tea
- Jell-o
- Popsicle
- Sprite
- Ginger Ale
- Plain Black Coffee (No cream or milk)

### 4 Hours Prior to Your Surgery

Drink 12 oz of a clear liquid with carbohydrates. After finishing the drink, do not eat or drink anything until after your surgery.

### Examples of clear liquids with carbohydrates:

- Any Color Small Gatorade (No diet, no G2)
- Any Color Small Powerade (No diet, no Zero)
- Can of Soda (No diet, no Zero)
- Small Cup of Coffee With Sugar (No cream, no milk)

### If You Take a Pain Pill in the Morning

Take the pain pill with a small sip of water. Tell the surgeon and anesthesiologist the name of the medication and the time you took it. **Do not take Ibuprofen or Aspirin.** 

### Day of Surgery

#### Check-In

The surgery team will call you the day before your surgery (usually in the afternoon) and let you know what time you need to check in at North Canyon Medical Center in Gooding. If your surgery is on a Monday, they will call you on the Friday before surgery.

### What you will see when you wake up:

Nasal Cannula - Flows oxygen into your body through your nose.

Oxygen Finger Sensor - Monitors breathing.

Systematic Compression Device -Helps with blood flow after surgery.

# What you might see when you wake up:

Drain - Decreases pressure in your spine. You may go home with a drain.

Urinary Catheter - Used to empty the bladder during surgery.

Bandages - Covering your incision.

Ice Machine - Decreases swelling.

You will be in the recovery room for 2-3 hours after surgery, so that a nurse can monitor you and help with any pain or nausea you might have.

# **Daily Goals**

### The Day of Surgery

Manage what you eat
Go for a walk
Empty your bladder
Manage pain

### **Every Day After Surgery**

Eat meals sitting in a chair
Follow bowel care guides in discharge instructions
Go for a walk with someone 4 - 7 times a day
Follow the home exercise program 3 times a day
Prepare questions for follow-up appointments
Learn about new medications
Manage pain
Start weaning off the pain medicine



# Pain Management



Our goal is to keep your pain level tolerable by monitoring you closely. Below are some medications you will see before and after your surgery.

Medication Name	Purpose	Side Effects
Acetaminophen (Tylenol) Hydrocodone with Acetaminophen (Norco, Vicodin) Hydromorphone (Dilaudid) Morphine (MS Contin) Oxycodone (Roxicodone) Oxycodone with Acetaminophen (Percocet) Tramadol (Ultram)	Treats Pain	Drowsiness Difficulty Urinating Nausea Constipation
Cyclobenzaprine (Flexeril) Carisprodol (Soma) Diazepam (Valium) Methocarbamol (Robaxin)	Relaxes Muscles	Drowsiness Difficulty Urinating Constipation
Ondansetron (Zofran) Promethazine (Phenergan) Scopolamine Patch (Transderm-Scop) Lavender & Peppermint Aromatherapy	Prevents/treats nausea and vomiting	Headaches Dizziness
Famotidine (Pepcid) Omeprazole (Prilosec)	Prevents/treats Heartburn	Constipation Gas
Cefazolin (Ancef) Ciprofloxacin (Cipro) Vancomycin (Cancocin)	Prevents/treats Infections	Diarrhea Rash Ringing in your Ears
General Anesthesia	Allows you to sleep during surgery	Diarrhea Rash Ringing in your Ears

### Pain Management

### **Important Information About Your Medications**

- Do NOT take Acetaminophen (Tylenol) if you're taking: Hydrocodone (Norco) or Oxycodone (Percocet). These medications contain Acetaminophen and too much can cause serious harm.
- Do **NOT** drive while taking pain medication.
- Do **NOT** drink while taking pain medication.
- When prescribed an antibiotic, finish all of the prescription as directed.

### **How to Manage Pain Without Pain Medication**

- Make a plan with someone to walk 4 7 times a day at the hospital and at home.
- Use ice to decrease swelling.
- Relax! Do something that helps you de-stress.
- Watch TV or browse the Internet, the hospital has cable TV and free Wi-Fi.
- Visit with friends or family, visitors can come by between 7am and 9pm.
- Listen to music (don't forget to bring headphones).
- Play with your pet! While the pets should not sleep in the bed with you while recovering, playing with your pet reduces stress and blood pressure. They also help improve your mood.

# **Medication Record**

Medication Name	Frequency	Date/Time	Date/Time	Date/Time	Date/Time
Example: Tylenol - 2 pills	Every 4 hours	8/3 11:15am	8/3 4:05pm	8/3 8:15pm	8/3 12:30pm

### **Reducing Pain Medications**

Pain medication and muscle relaxant are not usually addictive, but can lead to addiction if not managed carefully. 3 - 5 days after surgery, you will need to *slowly* start weaning yourself off pain medication and/or muscle relaxants.

### **Example**

If you've been taking 2 pills every 4 hours;

Decrease the dose while using the same time intervals your doctor instructed.

Take 1 pill every 4 hours for 1 - 3 days, then take half of a pill every 4 hours for
 1 - 3 days

Increase the amount of time between taking the medication

• Take half of a pill every 5 - 6 hours for 1 - 3 days, then take half a pill every 7 - 8 hours for 1-3 days

Stop taking the medication

### **Pain Alleviation Tips**

- Pain medication takes around 45 minutes to take effect.
- Figuring out when to take the pain medication before bed can help you get a full night's rest.
- If you have a stiff or sore back in the morning, set an alarm in the middle of the night to take the pain medication.
- Ice helps to decrease pain and swelling.
- Changing your resting position every 20 minutes while awake decreases muscle stiffness.

# The Day of Discharge

### **Discharge Instructions**

You will be given individual discharge instructions before you leave the hospital.

YOU MUST HAVE HELP AT HOME FOR 72 HOURS AFTER SURGERY. If you do not your surgery will be canceled until you have help in the home for the first three days.

### **Heading Home**

Please arrange for someone to drive you home.

### **Dressings**

You will be given dressings before leaving the hospital if you need them. Please have the person who will be changing your dressings at the hospital to learn how to do it.

### **Medications**

You will be given an updated list of medications and instructions on when to start and stop taking specific medications. Antibiotic and pain medications will be sent to your pharmacy.

### Follow-up Appointments

These are generally scheduled within 2 weeks of you being discharged from the hospital. We will make sure that one is scheduled after your surgery.

#### Make Sure You Know How to:

- Change a dressing
- Roll in and out of bed
- Call in case of an emergency and who to call depending on the situation
- · Exercise correctly while recovering
- Shower
- Use any equipment given to you by the doctor

### **Key Contacts**

### **Important Numbers**

- 1. For emergencies, call 911
- 2. Hailey Office (208) 788-7779, from 8:30am-4:30pm
- 3. After Hours:
  - Dr. Verst: (208) 309-0016
  - North Canyon Medical Center: (208) 934-4433 ext 1118

### When to Call Your Surgeon

- No bowel movement for 3 or more days
- Uncontrollable nausea or vomiting
- Unbearable pain even with pain medication
- Fever of 101 °F for more than 6 hours
- Redness, swelling, odor, or drainage at incision site
- Headaches that go away when lying down

### When to Go to the Emergency Room

- Difficulty breathing or swallowing
- Difficulty moving or increased weakness in legs
- Loss of bowel or bladder control

You must have 24/7 care at home for the first three days after you leave the hospital.

### **Incision Care**

#### How to Care for Your Incision

Your incision from surgery will be closed internally with stitches and externally with steri-strips. If your incision is covered with a clear saranwrap like dressing OR foam dressing when you get home from hospital, please remove it, leaving the steri-strips in place. If you would like, you may place gauze dressing over the steri-strips. Occasionally, Dr. Verst will use staples. Follow the same incision care routine.

You may shower **48 hours** after leaving the hospital. Please shower and use soap and water directly on the wound. Pat the area dry after your shower and you may place a dry gauze dressing over the incision if you wish. The steri-strips will adhere to the skin through the showers, and will fall off about 5-7 days, or they will be removed at your post-op appointment.

You may **NOT** take a bath or soak in a hot tub until there is absolutely no scab left or you have permission from the doctor. This usually takes about 3 weeks after surgery, but healing times vary.

Please do **NOT** put any ointment, cream, lotion or hydrogen peroxide of any kind on the incision. Keep it clean and dry.

Drain Care- See instructions on page 16. IF you have concerns with taking out the drain, please call Hailey Office at (208) 788-7779.

#### **Additional Instructions:**

Diet: Extra calcium is needed to facilitate healing of the fusion. The diet should include 1500-2000 mg. of elemental calcium daily. Communicate with Dr. Verst about any kidney stone history. Due to the metabolic stress of surgery, eating a little extra food is essential.

### **Drain Care**

### The Purpose of a Drain

A drain is used to help empty excess fluid from the body and help with the healing processes. After surgery, there is continued oozing and shedding of cells and bodily fluids at the surgical site. Do not hesitate to call if you have any questions or concerns.

#### **How it Works**

Your drain will suction fluid out when the bulb is compressed. The bulb must be compressed very well, and the drain tab must be closed in order for the suction to work. The bulb's effectiveness is when the bulb's compression maintains its shape.

### How to Empty the Drain

- 1. Wash hands with soap and water before emptying drain.
- 2. Open the tab on the drain.
- 3. Empty the fluids into a measuring cup.
- 4. Record the amount on the measuring log.
- 5. Discard the fluid in the toilet.
- 6. Now compresses the container as flat as you can and close the tab.

The drain should be emptied every four to six hours the first few days until the amount decreases and to ensure the bulb can be compressed fully to maintain suction.

The color of the drainage will change overtime from red to a yellow. There may be red stringy material in the drainage, and these are NOT blood clots—DO NOT WORRY! This material does, however, tend to block the tubing of the smaller bulb drain. You may need to "strip" the tubing of the smaller drain. Use either alcohol wipes around tube or small amount of lotion on fingertips (to facilitate a smoother glide on the tubing) pinch and pull gently on the tubing (flattening the tube). This will move the stringy material down the tube and prevent clots from forming. The tubing of the larger Hemovac drain does not need to be "stripped". The drain should remain in place until your doctor tells you it is okay to be removed. Sometimes, after the drain is removed, the fluid may reaccumulate and swell at the surgical site. This fluid is called a seroma. This is not an emergency. There is a tab on the bulb part of the tubing that can be pinned to your bra, under your shirt, or slipped over a belt or piece of elastic.





### **Drain Care**

If you have any questions during regular business hours, call 208-788-7779 and ask for Dr. Verst's nurse.

Please record the output of the drainage in the table below. A specimen cup will be provided to you that measures fluid in mL. Please record the amounts in mL and the total at the end of the day.

When drainage output is less than 30 mL in 8 hours, notify the office immediately, and they will walk you through the next steps in removing the drain.

Date	6am or when you wake up	Noon	6pm	9pm	Daily total:

### **Bowel Care**

### **Ways to Prevent Constipation After Surgery**

Anesthesia, pain medication, muscle relaxants, and reduced physical activity can cause constipation.

While taking pain medication:

 Take 1 Senna (Senokot) tablet and 1 scoop of Polythylene (Miralax) mixed into an 8 oz non-carbonated drink in the morning and at night

If no bowel movement 3 days after surgery:

- Drink 1 bottle of Magnesium Citrate with breakfast
- If no bowel movement by noon, insert a Glycerin rectal suppository
- If no bowel movement by 2pm or if you're having frequent watery stools, call your surgeon.

All of these medications can be purchased over that counter at any pharmacy or retail store.

# Limit Bending Your Neck Limit Twisting Your Neck

- No swimming, baths, or hot tubs until approved by your physician.
- No horseback riding, motorcycle riding or gravity traction.
- Do not lift more than 10 pounds until approved by your physician.
- No housework such as cleaning, vacuuming or laundry.
- If you have increased pain with activity that lasts until the next day, you need to cut back on your activity. Pain after activity should subside after 30-60 minutes of rest. You can use heat or ice, but you need to watch your incision for signs of irritation (increased redness, swelling or sensitivity).

### **Sleeping Tips**

#### **Bed Positions**



1. Put a pillow between your legs, under your head, and neck



2. Put a pillow under your knees and your head.

#### Getting In & Out of Bed













### **Getting In Bed**

- 1. Sit on the edge of your bed, move back until the back of your legs are touching the side of the bed.
- 2. Without twisting, lean onto your forearm.
- 3. Bring up the leg shown in the diagram onto the bed.
- 4. Bring up the other leg.
- 5. Place head on pillow.
- 6. Roll onto your back without twisting your spine.

#### **Getting Out of Bed**

- 6. Bend Knees while lying on your back.
- 5. Roll onto your side without wisting your spine.
- 4. Push your body up using your forearm.
- 3. Move your legs over the side of the bed.
- 2. Push up your body so that you are sitting upright.
- 1. Sitting on the edge of the bed, pause and make sure you are not dizzy before standing up.

### **Activity Tips**

#### **Using the Bathroom**

- Avoid reaching across the body to wipe. Use toilet aid if necessary to prevent twisting.
- Turn entire body towards toilet when flushing and lowering the seat.







#### How to Sit Comfortably in a Chair

- Always sit in a chair with a back for support.
- Sleeping or resting in a reclined chair can be more comfortable for you.
- Place pillows under your arms and behind your head for support.



#### **Everyday Tasks**

- Bring your phone up to your eye level when using it.
- If you have to pick up an object, avoid bending your neck, bend at the hips and knees.
- Use a straw for all drinks and elevate your plate when eating to avoid bending your neck.







### **Activity Tips**

#### **Getting Dressed**

- Sit in a chair with back support when getting dressed.
- To put on pants, socks, or shoes, cross your legs to reach or use a shoe horn/sock aid or reacher.





#### Tasks at Waist Height or Lower

- For front load washers and dryers, use a reacher to grab clothes or kneel/squat to pull out clothes.
- For top load washers and dryers, bend at hips to reach clothes or use a reacher to grab clothes.





### How to Get In & Out of Chairs

Sitting Down

- Back up until the backs of your legs are touching the chair.
- Reach back and use the arms of the chair to lower yourself into the chair, keeping your neck and back straight.







#### Standing Up

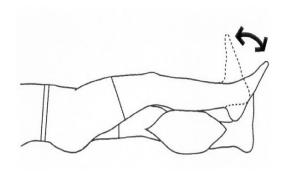
- Scoot forward until you're at the edge of the chair.
- Lean forward while keeping your back and neck straight.
- Use the arms of the chair to push yourself forward, while using your legs to push yourself up to stand.
- Don't sit in chairs for longer than 20 minutes
- The chair must have back support
- You may sit reclined in a recliner for as long as you like.

### **Exercises**

Please practice these exercises before your surgery. These exercises increase blood flow. After your surgery, do these exercises every day until your follow-up appointment.

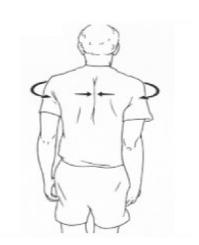
#### **Ankle Pumps**

- Lie down on your back.
- Move feet up and down while pumping the ankle.
- 10 reps every hour.



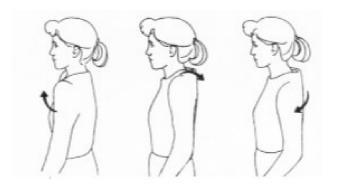
#### **Shoulder Blade Squeeze**

- Sit or stand.
- Roll shoulders back and squeeze shoulder blades together.
- 10 reps every hour.



#### **Shoulder Rolls**

- Sit or stand.
- Roll shoulders forward, up, back, then down in a circle.
- 10 reps, 3 times a day.



# **Activity Record**

Take short walks every hour during the day and 4 - 7 long walks until your follow-up appointment. Try to push yourself to walk farther each day on your walks. Check off the number of long walks you take, minimum of 4 per day.

If walking alone outside, take your cell phone with you to call for assistance if you need it.

Day 1	Date:	
Day 2	Date:	
Day 3	Date:	
Day 4	Date:	
Day 5	Date:	
Day 6	Date:	
Day 7	Date:	
Day 8	Date:	
Day 9	Date:	
Day 10	Date:	



### **DO NOT PRINT PAGE**

### **TABS:**

The Spine - between table of contents and page 1
Before Surgery - between pages 2 and 3
Surgery - between pages 6 and 7
Back Home - between pages 13 and 14