

PATIENT INSTRUCTIONS AFTER LUMBAR SPINE SURGERY

These instructions are to assist you and your family with the care needed after spine surgery. If you have any additional questions after reviewing this information, please feel free to contact us at 972.250.5700

DIET

- Resume your normal diet. Pain medication and decrease in activity can often cause constipation. A high fiber diet along with an increase in fluid intake may help reduce bowel problems. Taking a stool softener and/or a laxative is recommended.

ACTIVITY

- For the first 2 weeks after surgery, you should rest whenever possible. If you feel tired or uncomfortable, lie down and rest. A sudden increase in activity may cause strain and discomfort.
- **Avoid:** lifting anything greater than 10 pounds, and bending and twisting at the waist.
- Walking is excellent exercise and recommended following spine surgery. The amount of time you spend walking should be gradually but steadily increased each day after the first week following surgery.
- An exercise program should not be initiated until approved by your surgeon. Do not attempt to work out discomfort with exercise or increased activity.

MEDICATIONS

- You will experience pain from the low back and area of incision(s). This is normal. Pain medication should be taken as prescribed. Do not drink alcohol or drive while taking narcotic pain medications. If you continue to have discomfort that is not relieved by rest and medication, please contact the spine office at the number above.
- Resume all other medications that you were taking prior to surgery as directed in your discharge instructions.

HYGIENE

- When not showering, keep the incision clean and dry.
- A shower is the preferred method of bathing. No bath tubs, pools, or otherwise submersing incisions in water for 3-4 weeks after surgery, or until the incision is fully closed and healed. You may shower two days after surgery. You will not need to cover your incision while showering.
- No special ointments, creams, or lotions are to be applied to the incision.

REASONS TO CALL

- Please call the spine office if you develop any fever, sweats, chills, redness, or drainage from the incision area.
- For nights and weekends, please call 972-250-5700 and ask the operator to page the on-call orthopedic surgeon.

RETURN APPOINTMENTS

- Your first revisit with your surgeon will be approximately 4 weeks after surgery. If you have sutures to be removed, you will see the nurse 10-14 days after surgery.

Postoperative Bowel Management Regimen

Constipation is a common problem many patients face after surgery. If left untreated, constipation can cause significant pain, nausea, vomiting, and lead to injury or re-hospitalization. For this reason, we recommend you follow a bowel regimen while you are on the pain medications used after surgery (i.e. Norco, Percocet, etc.), which are known to cause constipation.

If you develop any abdominal pain, nausea, vomiting, or have not had a bowel movement by the 5th postoperative day, call spine surgery office for further instructions.

The following medications are non-prescription, over-the-counter drugs generally thought to have a high degree of safety and efficacy. If you are allergic to any of the below medications, or have had a bad experience with them, do not use them.

If you have a prescription of narcotic-containing pain medications, please follow this regimen:

1. The day you arrive home from the hospital, begin **docusate sodium with senna (Pericolace or Sennakot-S)**: Take one tablet by mouth twice per day with plenty of water.
2. If you have not had a bowel movement by the second day home, continue #1 and take **polyethylene glycol (Miralax)**, one capful in 6-8 ounces of fluid every morning.
3. If you have not had a bowel movement by the third day home, continue #1 & #2, and take **bisacodyl (Dulcolax)** suppositories, one rectally every twelve hours.
4. If you still have not had a bowel movement after the above treatments, continue #1, #2, & #3, and drink one full bottle of **magnesium citrate**, undiluted.
5. If all of these measures have failed to induce a bowel movement, call the spine surgery office.

*If you develop loose, frequent, or watery bowel movements, reverse these steps.