



SPINE SURGERY

Patient Education Booklet



Atrium Health
Musculoskeletal Institute

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Welcome

Thank you for choosing Atrium Health for your surgery. We are here to give excellent care so you will get the best results from your surgery. This booklet will help you know what to do before, during and after surgery. Each patient's experience is different. You and your surgeon will decide what is best for you. Always follow what your surgeon tells you to. Please share any special needs such as cultural or religious practices so we can best care for you. Ask questions about your care at any time.

My surgery date is: _____

Atrium Health will call me the day before my surgery. They will tell me what time to be at the hospital.

I need to be at the hospital by (time) _____

I may have to come to the hospital 2 hours or more before my surgery. This is so staff can get me ready.

_____ (adult's name) will take me to the hospital.

Before Surgery

(Example: medical clearance appointments, anesthesia clinic, etc.)

Appointment Type	Time and Date	Provider/Other	Location	Phone Number

After Surgery

(Example: therapy, post-op appointments)

Appointment Type	Time and Date	Provider/Other	Location	Phone Number

Important places

Location	Address	Main Phone Number	Other

Things I need to do:

- Read all of this booklet. I will also get information about my surgery from my surgeon's office.
- Share it with my family and loved ones.
- Fill in the blanks with info about my surgery. My surgeon or care team will be able to help me with answers if needed.
- Use the checklists to help me get ready before and after surgery.
- Ask questions if I have trouble with anything in the booklet.
- Bring this booklet with me to each visit with my surgical care team.

Spine surgery pre-operative (pre-op) patient education class

I should talk about the pre-op education class with my surgery scheduler team. This is a big part of getting me ready for surgery. I can use this booklet to take notes and prepare for my care.

To help prepare patients for their upcoming surgeries, Atrium Health has virtual class options. It is recommended that I attend one of these classes 2 to 4 weeks before my surgery.

Classes are now offered online. There will be no classes on Holidays.

Monday	No classes
Tuesday	No classes
Wednesday	11 a.m. to noon
Thursday	No classes
Friday	11 a.m. to noon

To sign up, send an email to this email address: MSKI_Spine@AtriumHealth.org

- I will include which class I would like to attend, who my surgeon is, the date of my surgery and the location where I will be having my surgery.
- I will receive a meeting invite to join the class online.
- It is recommended that I use a PC or laptop computer to join the class; cellphone screens will likely be too small for me to see the presentation.

Below are tips for joining the online class using the link sent to my email.

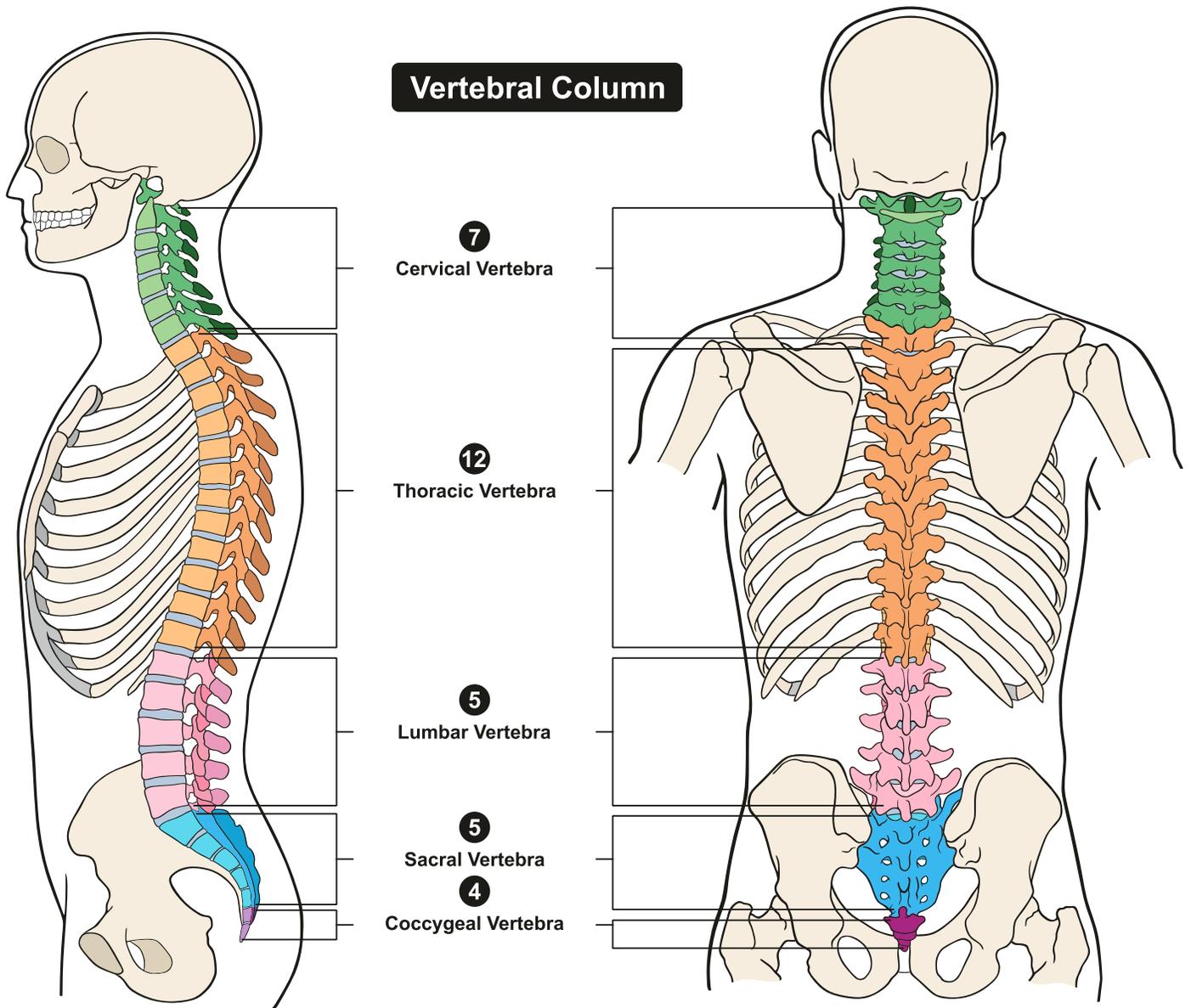
The image contains four screenshots illustrating steps for joining a Microsoft Teams meeting:

- 1**: A screenshot of an email link to join a Microsoft Teams meeting. The link text "Join Microsoft Teams Meeting" is circled in black, and a white arrow points to it from a yellow box labeled "CLICK HERE". Below the link, the phone number "+1 704-588-9728" and "Conference ID: 000 000 000#" are visible. A white box with the number "1" is in the bottom right corner.
- 2**: A screenshot of the Microsoft Teams desktop app download page. The text "Join on the web instead" is circled in black, and a white arrow points to it from a yellow box labeled "CLICK HERE". A white box with the number "2" is in the top right corner.
- MICROPHONE OFF**: A screenshot of the Microsoft Teams meeting control bar. The microphone icon is circled in red, and a yellow box at the bottom left says "MICROPHONE OFF".
- MICROPHONE ON**: A screenshot of the Microsoft Teams meeting control bar. The microphone icon is circled in red, and a yellow box at the bottom left says "MICROPHONE ON".

A yellow box with the text "*Click Microphone Button to turn your microphone on/off" is positioned between the two microphone status screenshots.

What I need to know about my spine

The spine is made up of a group of bones in the back called vertebra. In between each vertebra is a cushion, called a disc. Surgery can be done on a disc, vertebra or any part of the spine. This can be cervical (neck), thoracic (middle back) or lumbar (lower back).



Well Ahead of Surgery

Things I should do once I set my surgery date

■ Plan for help

I will need someone with me the first 2 to 7 days after I leave the hospital. This person may help me with household matters, fixing meals and taking care of pets. If I do not have someone, I can talk to my surgeon.

■ Decide who will help me at home after my surgery:

Name and phone number _____

■ Plan for smoking

- Plan to stop smoking and using tobacco.
- Using tobacco products like cigarettes, snuff, nicotine patches or e-cigarettes is not healthy. It affects my healing after surgery. If I do not have a plan in place, I can talk to my healthcare team.

To get help to quit:

- Talk with my primary doctor to make a quit smoking plan
- QuitLineNC: 800-QUIT NOW (784-8669)
- QuitSmart® Smoking Cessation Program: call ASK FIRST at 704-403-1275



■ Plan for meals

- Buy food and make single-serving meals. Freeze them before I go to the hospital. I can also ask family and friends to help me with meals after surgery.
- Buy plenty of drinks and drink them throughout the day. This will keep me from getting dehydrated (dry).

■ Plan for recovery (prescriptions and ice packs)

- My surgeon may not give me my prescriptions before surgery. They will have it sent to my pharmacy once I am in the hospital. I can pick them up when I leave.
- I should make an ice pack to help with pain or swelling. Have at least 2 ice packs ready.

■ Plan for work

- Send any leave of absence (LOA) paperwork to my surgeon's office.

■ Plan for safety

- Keep emergency phone numbers in large print near each phone. I can also store these numbers in my cellphone.
- Wear an alarm device that will bring help if I fall.
- Keep a list of current medicines, doctors and health problems.



Fall prevention

Activity:

- Exercise often. Exercise makes me stronger and helps my balance.
- Get up slowly after I sit or lie down.
- Move items that I use often off of high shelves.



Medicines:

- Have my doctor or pharmacist look at all the medicines I take. Some medicines can make me sleepy or dizzy, which can make me fall.



Bathroom:

- Take my time when using the bathroom.
- Use support when getting in and out of the tub or up from the toilet.



Other:

- Have my eyesight checked at least 1 time a year by an eye doctor. Poor eyesight can add to my risk of falling.
- Wear shoes both inside and outside the house. Do not go barefoot or wear slippers.



Medicines I should stop 7 to 10 days before surgery

If I am taking any of the medicines below, I will let my surgeon know. These medicines can increase the chances of problems like bleeding during surgery. **I should check with my surgeon about all medicines that I am taking.** This list does not include every medicine that my surgeon may want me to stop taking (weight loss medications, birth control, immunosuppressants).

Prescription products with aspirin	Prescription products with nonsteroidal anti-inflammatory agents (NSAIDs)	Other prescription drugs: (I will need permission from the prescribing provider to stop taking the following)
<p>Alor[®] Amigesic[®] Ascomp with codeine[®] Darvon Compound 65[®] Diflunisal Dolobid[®] Empirin[®] with codeine Fiorinal[®] Lobac[®] Magan[®] Magsal[®] Mobidin[®] Monogesic[®] Norgesic[®] Novasal[®] Orphengesic[®] Panasol[®] Percodan[®] products Roxiprin[®] Salflex[®] Salsalate products Salsitab[®] Synalgos-DC[®] Talwin compound[®]</p>	<p>Celecoxib (Celebrex[®]) Diclofenac (Voltaren[®], Cataflam[®]) Etodolac (Lodine[®]) Fenoprofen (Nalfon) Flurbiprofen (Ansaid) Ibuprofen (Motrin) Indomethacin (Indocin) Ketoprofen (Orudis, Oruvail) Ketorolac (Toradol) Meclofenamate (Meclomen[®]) Mefenamic acid (Ponstel[®]) Meloxicam (Mobic) Nabumetone (Relafen) Naproxen (Naprosyn, Anaprox) Oxaprozin (Daypro) Piroxicam (feldene) Sulindac (Clinoril) Tolmetin (Tolectin)</p>	<p>Apixaban (Eliquis[®]) Cilastazol (Pletal[®]) Clopidogrel (Plavix[®]) Dabigatran (Pradaxa[®]) Dipyridamole (Persantine[®]) Dipyridamole/aspirin (Aggrenox[®]) Rivaroxaben (Xarelto[®]) Ticlopidine (Ticlid[®]) Warfarin (Coumandin[®])</p>

**Over the counter products
with aspirin:**

Alka-Seltzer® products
Anacin®
Arthropan®
Ascriptin®
Aspergum®
Aspirin
Bayer® products
Bufferin®
Doans®
Ecotrin®
Empirin®
Excedrin® products
Goody's® products (BC powders)
Halfprin®
Mobigesic®
Pepto-Bismol®
Saleto®
Vanquish®

**Over the counter products
with nonsteroidal anti-
inflammatory agents
(NSAIDs):**

Advil® products
Aleve® products
Dristan Sinus®
Haltran®
Ibuprofen products
Menadol®
Midol® Extra Strength
Motril® products
Naproxen

**Natural supplements
and herbs:**

Agrimony
Alfalfa
Aniseed
Arnica
Artemisia
Asa foetida
Bishop's weed
Bladderwrack
Bochu
Bogbean
Boldo
Bromelains
Burdock
Capsicum
Cassia
Celery seed
Chamomile
Chinese wolfberry
Chondroitin
Clove
Cod liver oil
Coltsfoot
Dandelion
Danshen (salvia)
Devil's claw
Dihydroepiandrosterone (DHEA)
Dong quai (angelica)
Fenugreek
Feverfew
Fish oil
Flax seed
Gamma linoleic acid
Garlic

**Natural supplements
and herbs:**

Ginger
Ginkgo
Ginseng
Glucosamine
Horse chestnut
Horseradish
Licorice
Meadowsweet
Melatonin
Melilot
Nattokinase
Onion
Pantethine
Papain (papaya extract)
Parsley
Passionflower
Policosanol
Poplar
Prickly ash
Quassia
Red clover
Resveratrol
Sea buckthorn
Sweet clover
Sweet woodruff
Tonka beans
Turmeric
Vinpocetine
Vitamin E
Wild carrot
Wild lettuce
Willow bark

Shortly Before Surgery

One week before surgery

Pack my bag

- What to bring to the hospital:
 - My medicine list
 - Photo ID and insurance cards
 - Personal care items like a toothbrush, toothpaste, razor, dentures
 - Shoes with non-skid bottoms
 - CPAP or BIPAP machine if I use one
 - Glasses, contact lenses, hearing aids and extra batteries
 - Change of clothes to wear when I leave
- Things to leave at home:
 - Jewelry such as rings, earrings, nose rings or necklace
 - Large amounts of cash over \$20



Plan for ride home

- Plan for someone who can give me a ride home after surgery. My nurse at the hospital will keep me updated on the plan for going home.



Get my body ready

- Make sure I have a bowel movement (i.e. poop) the day before or the morning of surgery.
- Drink plenty of water.
- Make sure I am eating a healthy diet that includes fiber and protein. Examples are:
 - Lean red meats: beef, pork and lamb
 - Seafood: oysters, clams, tuna, salmon and shrimp
 - Beans
 - Nuts
 - Cereals, oatmeal, grits, cream of wheat, breads, rice and pasta
 - Tofu, chicken, turkey
 - Egg yolks
 - Vegetables: broccoli, swiss chard, asparagus, parsley, watercress and Brussel sprouts
 - Dried fruit



Bathing with Chlorhexidine (CHG) 4% cleanser

I should shower with the CHG wash once a day for 5 days before surgery.

Start date: _____

Cleaning your skin before surgery

- I need to make sure that my skin is as free of germs as possible before surgery. Carefully washing my skin with special soap can help keep my skin free of many germs.
- My surgeon may tell me to use Chlorhexidine Gluconate (CHG). This is a special soap often used to cleanse the skin before surgery. I may find this soap under a different name like Dyna Hex® or Hibiclens®.
- If I am allergic to Chlorhexidine, I should let my surgeon know. They will tell me what to use for my shower or bath.
- I can get this special soap from my surgeon or pharmacy. If I have a preop medical visit at the hospital, I may get it from there.

Why is it important to keep my skin clean?

Germs on my skin are a common cause of infections that may happen while I am in the hospital. Some of these germs live on my skin all the time. Other germs come from the hands of people around me (family, visitors and staff).

CHG is a chemical that can fight against many types of germs that cause infection. CHG has few side-effects. It offers both fast-acting and long-lasting protection from germs.

How to use the special soap

I should follow the steps below the night before surgery and again the morning of surgery:

- Turn the water on to wet my body before using the special soap. After my body is wet, turn the water off to prevent rinsing off the special soap too soon.
- Using a fresh, clean wash cloth, apply the special soap to my entire body. Use **only** from the neck down. **Do not** use on your face or groin area. Doing so can cause permanent damage to these areas.
- Wash my body carefully for 5 minutes. Pay special attention to the area where I am having surgery. **Do not** scrub my skin too hard.
- Turn water back on and rinse all of the special soap off of my body.
- I may wash my hair and scalp using normal shampoo. I may also use my regular soap or cleanser on my face.
- Pat myself dry with a clean, soft towel and put on a set of **clean** clothes.
- **Do not** use lotion, cream or powder.

Important things I should remember

- Do not shave the area of my body where I will have surgery.
- Do not use this special soap more than I need to. It should only be used as I am told to by my surgeon.

Day Before Surgery

I will:

- Sleep on clean bed sheets the night before surgery.
- Review this packet to prepare for coming home safely.

I will not:

- Drink any alcohol such as beer, wine or liquor at least 24 hours before surgery.
 - Stop drinking (all liquids such as water, tea, coffee, soda, juice, alcohol) after midnight.
 - I will not drink after (date)_____ at (time) _____
- Eat after midnight
 - Stop eating (all food, breath mints, candy, gum) after midnight.
 - I will not eat after (date)_____ at (time) _____

Morning of Surgery

Getting my body ready for surgery

I will:

- Shower or bathe – I will be given special soap if needed.
- Brush my teeth, but I will not swallow toothpaste or water.
- Wear loose clothing.
- Allow enough time for heavy traffic. Arriving on time is important.

I will not:

- Wear any oils, lotion, nail polish, acrylic nails, gel polish or make-up.
- Eat or drink, chew gum or tobacco, eat candy or use Chap Stick®. If I do, I will tell the nurse as soon as I get to the hospital. If I eat or drink, my surgery may have to change to another day.
- Wear jewelry or body piercings because it could interfere with the equipment used on me during surgery.

When I get to the hospital

I should talk to my surgery scheduler about any questions I have about my hospital.

Where to park

- Park in the visitor's parking area and check in at the main lobby.

Visitors

- My family will go to the waiting room.

Pre-Op

- I will go to pre-op before surgery. I will be given directions on where to go.
- I will sign paperwork needed for surgery. This includes consent (permission) to have surgery and consent to get blood if I need it.

During Your Surgery

Anesthesia

- I will have anesthesia.
- Anesthesia is a medicine that puts me to sleep and blocks pain during surgery.
- While I am asleep with this medicine, I will not feel, hear or see anything.
- My anesthesia team and I will choose the one that is best for me.
- My family will be in the waiting room. They should sign in with the receptionist.
- After surgery, I will spend 1 to 3 hours in the Post Anesthesia Care Unit (PACU).

After Surgery

Recovery goals

My nursing team will check on me often.

- They may:
 - Ask about my pain level
 - Help me stay in a comfortable position
 - Help me with bathroom needs
 - Help me get out of bed starting on the day of surgery
 - Offer me snacks/drinks
- My recovery goals while in the hospital:
 - My pain is controlled by taking pain medicine by mouth.
 - My pain is controlled by using comfort measures (ice packs, relaxation, activity, etc.).
 - I can sit in the chair for my meals and take short walks.
 - I can eat and drink without feeling sick.
 - I can pee.
 - I can pass gas and poop.



After Surgery - Continued

Preventing problems after surgery

- **Prevent constipation (not able to poop)**
 - Take stool softeners or laxatives if needed. I may need them if I am taking narcotic pain medicine.
 - Drink plenty of water.
 - Walk often.
 - Sit in a chair for my meals.
- **Prevent blood clots**
 - Wear my sequential compression devices (SCDs) when in bed in the hospital. These are sleeves that go on my legs or thighs to help blood flow.
 - Walk often.
 - Sit in a chair for my meals.
 - My surgeon may prescribe me medicine to help thin my blood.
- **Prevent a surgical site infection**
 - I will be given a CHG bath daily in the hospital.
 - My surgeon may prescribe antibiotics to prevent an infection.
 - Keep my incision (surgical cut) clean and dry.
 - Shower when allowed by my surgeon.
- **Prevent a urine infection**
 - My urinary catheter will be removed if I have one.
- **Prevent pneumonia (a lung infection)**
 - Use my incentive spirometer (a device that helps me take deep breaths). Use it 10 times every hour while awake.
 - Walk often.
 - Sit in a chair for my meals.
- **Prevent falls**
 - I will be at high risk for falling because of:
 - » side-effects from medicine
 - » pain
 - » weakness
 - » dizziness
 - » being connected to medical equipment
 - » being in a new place
 - I will ask for help when moving around.
- **Prevent injury**
 - Limit bending, lifting or twisting until my surgeon says I can.
 - No lifting more than 5 to 10 pounds (about as much as ½ a gallon to 1 gallon of milk).
 - My surgical team will give me more information about this.

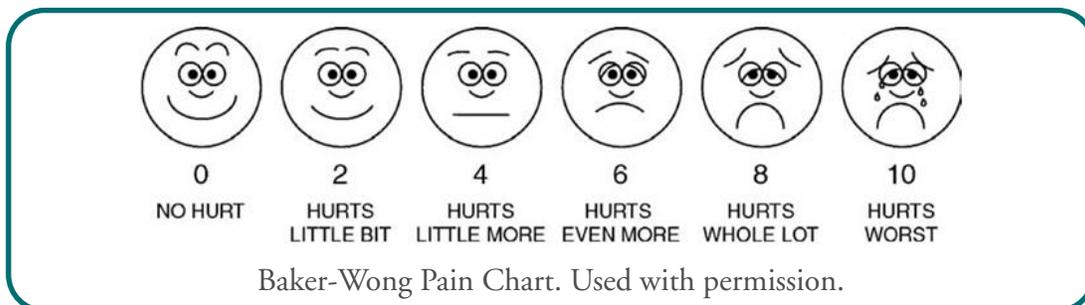


Pain control

I will have pain after surgery. My healthcare team will work with me to help control it.

Rating my pain:

They will ask me to rate my pain using a scale of 0 to 10. I can use this pain chart to help rate my pain.



What kind of pain I have:

My healthcare team will also ask me to describe where my pain is and what it feels like. Words used to describe pain include:

- Achy
- Sharp
- Shooting
- Sore
- Tense
- Throbbing
- Radiating (starts in one area and spreads to another area)
- Burning

My goals for pain control are:

- To be comfortable enough to walk, eat, complete my personal needs and rest
- To help control my pain with medicine (pills) I take by mouth
- To find other ways that give me comfort

Pain medicine I take by mouth:

- My surgeon may give me narcotic and/or non-narcotic pain medicine.
- These medicines are usually given on an “as needed” basis.
- Do not take on an empty stomach.
- Constipation (not being able to poop) and sleepiness are common side-effects of narcotic pain medicine. Narcotic pain medicine can also be habit-forming. It is important to stop taking narcotic pain medicine as soon as possible.

Pain medicine by IV:

- An IV (intravenous tube) is a thin tube. It may be placed through the top part of my skin into a vein to give me medicine. I will only have this while I am in the hospital.
- I should only take IV pain medicine if my pain is very bad.
- It is important to stop taking IV pain medicine as soon as possible.

Other ways to find comfort:

- Ice packs
- Music
- Laying on a different side or repositioning in bed
- Light activity such as reclining in chair or short walk
- Pet therapy
- Aromatherapy
- Visitors
- Activity such as reading, knitting, puzzles

Simple tips for moving at home

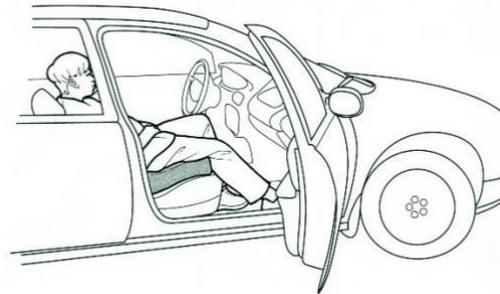
Getting into a car:

Backup towards the seat. Sit onto the seat. Scoot my bottom all the way back. Swing the leg closest to the door inside and then bring the other leg inside.



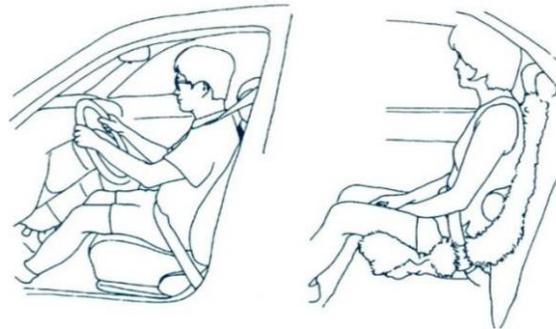
Getting out of a car:

Lift leg closest to the door out of car and place it on the ground. Swing the other leg out. Scoot my bottom forward and then stand up.



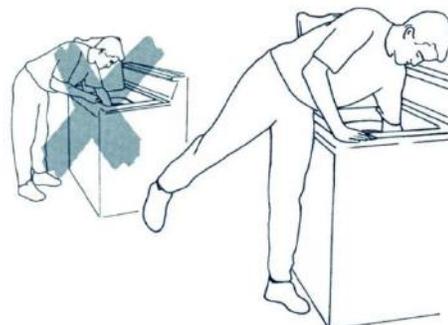
Sitting in a car:

Before driving, move the seat and steering wheel to a comfortable position. A rolled towel can be used to support my lower back when driving or riding.



Laundry:

To unload small items at the bottom of washer, lift my leg. Make sure I lift the leg opposite to the arm I am using.



Work height and reach:

When standing, the best height for a table is no more than 2-4 inches below my elbow. When sitting, only work at elbow level. Do not reach past my arm's length.



Shaving and brushing teeth:

Stand up straight with one foot on the ledge of the cabinet under the sink. If I do not have a cabinet, place one foot on a step stool.



Showering:

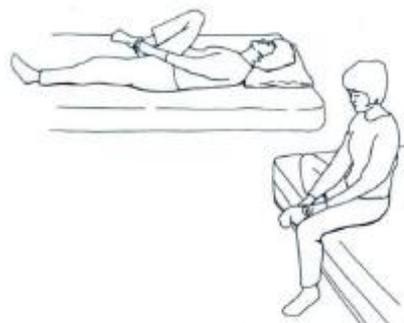
Standing to shower is better than sitting in a tub. Use a long-handled bath brush, hand-held shower and rack to hold toiletries. This will keep me from bending over and twisting my back. Use a rubber mat to keep from slipping.



Dressing

Lying down: Lie on my back to place socks or pants over my feet.

Sitting: Bend my leg up, while keeping my back straight.



How to care for my spine after surgery

- Limit twisting, bending, lifting or straining until my surgeon says I can do more.
- After surgery, I should not lift anything heavier than 5 to 10 pounds (about as heavy as a 1/2 to 1 gallon of milk).
- If I get a brace in the hospital, I need to wear it when I am out of bed. I will need to do this unless my surgeon tells me something different.
- Walk as much as I can. If I feel a lot of pain when walking, it is okay to stop and rest.
- Limit climbing stairs where possible. Use handrails and ask for help if needed.
- I can use a sponge with a long handle to bathe the lower part of my body.
- I can use a grabber with a long handle to help me get dressed.
- It is okay to recline (lean back and relax) in a recliner.
- I may not drive a motor vehicle until I am cleared by my surgeon.
- Do not bend. It is better to squat down and lift with my legs, not my back.

Other things that can give you comfort:

Ice	
Aromatherapy	
Music	
Guided meditation	

Discharge Planning

Discharge planning starts before I come to the hospital. By reading and completing this booklet, I have already started the planning process.

Date of my surgery: _____

Date I should be leaving the hospital: _____



Person giving me a ride at discharge:

Name _____

Number _____



Person helping me for the first week after I leave the hospital:

Name _____

Number _____



Pharmacy where I want my prescriptions to be sent.

Name _____

Number _____

(I may want to choose a 24-hour pharmacy for hospital prescriptions)

My appointment after surgery:

- I will be given a follow-up visit date and time when I go home.
- I will call my surgeon if I need to be seen before my scheduled visit.
- I will call my surgeon with any questions that myself and my family have had since surgery. My surgeon will talk about any pathology or lab results.
- I will ask any questions that myself and my family have had since surgery.
- I will ask about any medicine refills that I need.
- My surgeon will talk about any other treatment that I need.



Equipment and services I may need after surgery

Durable Medical Equipment (DME)

Some patients may need this equipment when they leave the hospital.

- DME is equipment like a brace, walker, adjustable toilet seat, shower chair, bedside toilet and grabber.
- If I have a brace, I will need to wear it as I am taught. Call my surgeon's office if I have any problems with how it fits or with it irritating my skin.

Therapy services

My need for therapy after discharge will be decided by how I do with therapy and my insurance. Some patients may need:

- Home health therapies: A therapist comes to a patient's home
- Outpatient therapies: Patients will go to a rehabilitation gym or therapy center
- Acute rehabilitation: Patients will have about 3 hours of therapy a day
- Subacute rehabilitation or Skilled Nursing Facility (SNF): Patients will get less therapy but will have 24-hour nursing care

Leaving the Hospital

Important appointments to be completed:

Appointment Type	Time and Date	Location	Phone Number

New medicines to take after my surgery

Name	How to take it	How often to take it	Why I take it	Side effects
Dose _____		_____ _____ _____		
Dose _____		_____ _____ _____		
Dose _____		_____ _____ _____		
Dose _____		_____ _____ _____		
Dose _____		_____ _____ _____		
Dose _____		_____ _____ _____		

Medicines to start taking again after surgery

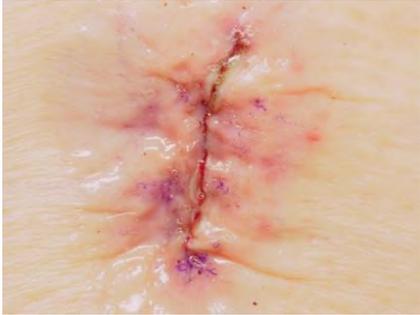
Name	How to take it	How often to take it	Why I take it	Side effects
Date to restart _____ Dose _____		_____ _____ _____		
Date to restart _____ Dose _____		_____ _____ _____		
Date to restart _____ Dose _____		_____ _____ _____		
Date to restart _____ Dose _____		_____ _____ _____		
Date to restart _____ Dose _____		_____ _____ _____		
Date to restart _____ Dose _____		_____ _____ _____		

Healing at Home

What I can expect after I leave the hospital	What I can do to help	Call the surgeon if
Pain – some is normal	Take my medicine as needed. <ul style="list-style-type: none"> • Use ice for no more than 20 minutes at a time each hour. • Use heat on areas of muscle spasms. I should not use heat on or around my cut. 	<ul style="list-style-type: none"> • Pain is getting worse • Pain that is terrible after taking medicine
To have a bowel movement (poop) 3 days after surgery – pain medicine can cause this	<ul style="list-style-type: none"> • Use stool softeners like Senokot® or laxatives such as Milk of Magnesia® if needed while using narcotics. 	<ul style="list-style-type: none"> • It has been longer than 3 days (if this is not normal for me)
Numbness and weakness, if any, that gets better over time	<ul style="list-style-type: none"> • Walking can help prevent problems after surgery. • Change my position often throughout the day so my muscles will not get stiff. • Follow my take home instructions from therapy. 	<ul style="list-style-type: none"> • I have new numbness • I have new weakness • I cannot feel my arms or legs • I cannot control my bowels or pee
Very little bleeding or drainage	<ul style="list-style-type: none"> • Follow my take home instructions that tell me how to care for my bandage 	<ul style="list-style-type: none"> • Any bleeding or drainage concerns
No infection	<ul style="list-style-type: none"> • Keep my bandage clean and dry. • No bath or swimming until my surgeon says it is okay • Wash my hands before touching my cut or bandage. • Make sure my caregiver washes their hands when caring for me. 	<ul style="list-style-type: none"> • Redness, drainage or swelling around my cut • Fever of 101.5 or higher

Incisions

Incisions (a cut the surgeon made) can be closed in different ways.

<p>Dermabond® or Prineo® a glue-like material that can peel off 10 to 14 days after my surgery</p>	
<p>Steri-strips™ a paper-like bandage that can be peeled off 10 to 14 days after my surgery if not already fallen off</p>	
<p>Sutures or staples will need to be removed by my nurse in the surgeon's office 14 days after my surgery</p>	

All incisions need to be kept clean and dry. If I have a dressing, my healthcare team will show me how to care for it. I may shower when my nurse or surgeon says it's okay. Do not let water beat on my incision. No sitting in bathtubs, hot tubs, swimming pools or whirlpools.

General Questions

1. When can I drink alcohol?

My surgeon will tell me when I can drink alcohol.

2. When can I smoke after surgery?

Use of tobacco products is not advised after surgery. They may cause poor healing after surgery.

3. When can I travel long distances in a car or plane?

My surgeon will tell me when I can travel and how far.

4. When can I go back to work?

This depends on what I do for work. This can be from 2 weeks to 3 months. I should talk with my surgeon about what I will need to do.

5. Will I set off the security monitors at the airport?

I am not likely to set off the alarm at the security checkpoint. However, if needed, I will let security know that I have had spinal surgery.

6. When can I have sex?

I can have sex when I feel I am ready, and my surgeon will tell me when it is safe.

7. Are there any activities I should do?

I will walk often and be active but with low intensity.

8. Are there any activities I should not do?

My surgeon or physical therapist will tell me when it is safe to:

- Increase bending, lifting or twisting
- Dance
- Golf
- Tennis
- Hike
- Swim
- Bowl
- Work in the garden

Words to Know

Anesthesiologist [an-uh s-thee-zee-ol-uh-jist] – doctor who works with medicines that put me to sleep

Anesthesia – medicine that makes me stay asleep during surgery. While asleep with this medicine, I will not feel, hear or see anything.

Antibiotics – medicine used to stop, treat and/or prevent infections

Constipation – unable to poop

Dehydrated – loss of body fluid

Discharge planner – helps me with plans for leaving the hospital

Incentive spirometer – a device that helps me take slow, deep breaths. These breaths fill the air sacs in my lungs and lower the risk of getting a lung infection like pneumonia.

Narcotic pain medicine – a strong pain medicine that works by dulling the senses and sometimes causing sleep. I need a prescription for this type of pain medicine.

Non-narcotic pain medicine – a pain medicine that usually works by reducing swelling. It can be purchased over the counter.

Physical therapy – helps me to walk and move safely

Occupational therapy – helps me dress, bathe, go to the bathroom, feed myself and walk

Sequential compression device (SCD) – sleeves on my legs that pump air to help blood flow and prevent clots

Spinal cord – bundle of nerve fibers that connect nearly all the body to the brain

Spinal fusion – surgery to connect 2 or more vertebrae in my spine

Urinary catheter – soft tube in my bladder that helps me pee

Vertebrae – the bones of my back that protect the spinal cord

Notice of Non-Discrimination and Accessibility

Atrium Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, religion, national origin, age, sex, sexual orientation, gender identity, gender expression, disability or source of payment. Atrium Health does not exclude people or treat them differently because of race, color, religion, national origin, age, sex, sexual orientation, gender identity, gender expression, disability or source of payment.

Atrium Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic and other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages
- If you need these services, call 1-800-821-1535

If you believe that Atrium Health has failed to provide these services or discriminated in another way on the basis of race, color, religion, national origin, age, sex, sexual orientation, gender identity, gender expression, disability or source of payment, you can file a grievance with:

Steven B. Martin
Vice President
Atrium Health
720 East Morehead Street
Charlotte, NC 28204
Email: Steven.Martin@AtriumHealth.org
Phone: 704-355-3777
Fax: 704-355-7449

You can file a grievance in person, by mail, fax or email. If you need help filing a grievance, Steven B. Martin, Vice President, is available to help you.

You can also file a civil rights complaint with the US Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal or by mail or phone at:

US Department of Health and Human Services
200 Independence Avenue SW
Room 509E, HHH Building
Washington, DC 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <https://www.hhs.gov/ocr/complaints>

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-821-1535.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-821-1535。

CHÚ Y: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1- 800-821-1535.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-821-1535번으로 전화해 주십시오.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-821-1535.

(رقم هاتف الصم 800-821-1535 ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1- واليكم:

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-821-1535.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-821-1535.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-821-1535.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-821-1535.

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-821-1535.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-821-1535まで、お電話にてご連絡ください。

ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតថ្លៃ គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 1-800-821-1535 ។

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-821-1535 पर कॉल करें।

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-800-821-1535.



Atrium Health
Musculoskeletal Institute