

DR. JUSTIN SMITH'S POST-OP INSTRUCTIONS FOR MINIMALLY INVASIVE LUMBAR DISCECTOMY, FORAMINECTOMY OR OPEN LUMBAR DISCECTOMY

These instructions will help you take care of yourself at home.



DIET

Start with clear liquids after you reach home. Wait about 45 minutes and if you do not feel sick, try bland foods first and then progress to your usual diet.



ACTIVITY

Although you may feel better after surgery, use caution in resuming your previous activities particularly concerning body mechanics. Remember to start slowly and give your muscles time to warm up. Walking is an excellent form of exercise that does not require any special equipment.

- **Do NOT** lift anything greater than 10 pounds. for the first 6 weeks following surgery. Do not make any sudden movements and avoid twisting of the back.
- Plan rest periods for each day.
- You may sit and sleep in any position that is comfortable
- **Do NOT** drive for the first week following surgery or while taking narcotics for pain.
- You may resume sexual activity at any time
- The general rule for activity is: **IF IT HURTS, DON'T DO IT**
- If your job requires strenuous activity or heavy lifting, you should not return to work until you have been re-evaluated. If you have a sedentary (sitting) or less active job, you may return to work sooner. Please call (800) 362-2203 if your employer requires a release to return to work.



INCISION AND WOUND CARE:

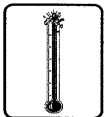
- Most incisions are closed with a sterile skin glue called Dermabond. This film will fall off naturally in 5-10 days. Do not scratch, rub or pick at the dermabond as this may loosen the film before the wound is healed. You may shower the day after your surgery. Dermabond should not be exposed to direct sunlight or tanning lamps.

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- Occasionally the incision is closed with external stitches or sutures and will need to be removed in 7-10 days. You will need to cover your incision with Tegaderm or saran wrap when taking a shower. If you live a long distance from Charlottesville, your sutures may be removed by your local physician.
- Do NOT apply creams, lotions, antibiotics or hydrogen peroxide to the incision.
- Do NOT swim or soak in a tub and avoid periods of heavy perspiration until the incision is healed (usually about 4 wk.)
- Inspect the area daily for signs of redness, swelling or drainage. A small amt. of blood tinged drainage is normal.

PAIN MANAGEMENT:

- Incisional pain, discomfort, and soreness are normal following surgery. Your pain should diminish a little each day.
- You will be given a prescription for medication to help control your pain and this will NOT be refilled.
- You may take Ibuprofen, Aleve or Naprosyn alternating with your prescription medication for additional pain relief.
- If you have severe or worsening pain call the Dept. of Neurosurgery at (434) 924-2203



INFECTION

Watch for any sign of infection after surgery: fever, chills, increased pain, redness, or swelling.



WHEN TO CALL YOUR DOCTOR

Please call (434) 924-2203 during office hr. OR (434) 924-0000 after hr. & ask for the resident on call for Dr. _____ IF:

- If you have continuous drainage (blood, pus, or clear fluid) from your incision area.
- If the incision is red or swollen
- If the incision breaks open
- If you have a temperature over 101.F (39.C)
- If you have severe pain or worsening of pain after 7 days
- No urine output eight (8) hours after surgery
- Call 911 for chest pain or shortness of breath