

NEUROSURGICAL ASSOCIATES, L.L.C

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DISCHARGE INSTRUCTIONS FOLLOWING AN ANTERIOR CERVICAL DISCECTOMY WITH FUSION AND PLATING

You had a surgical procedure called anterior cervical discectomy with fusion and plating. During this procedure Dr. Wilkerson made an incision on the front of your neck and removed your damaged disc(s), replaced them with a bone graft, titanium, or PEEK (poly-ether-ether-ketone) interbody device and then applied a plate and screws to hold this in place. As your neck heals your bone grows. Over the next 12-24 weeks your neck bones at the level of surgery will fuse together. These instructions provide additional information regarding your care at home.

Incision Care:

- Starting 3 days after surgery, you may shower with mild soap or shampoo daily, gently washing your incision and pat dry. This is the only time you may touch your incision. Your incision was closed with absorbable sutures. Steri-strips were placed over the skin. They should remain in place for 1-2 weeks. The Steri-strips should be removed after 2 weeks if they are still in place.
- Do not apply ointments, lotions or creams to your incision.
- Apply an ice pack or a clean bag of frozen peas to your incision every 30 minutes to help reduce the swelling and discomfort, as needed.
- Occasional episodes of neck pain and arm pain are not unusual immediately after surgery.
- You may have discomfort in between your shoulder blades which is common after this surgery.
- Wear a neck collar if instructed to do so by your neurosurgeon.

Activity:

- Start with light activity around the house for the first 3 days you are home.
- Gradually increase your activity starting with a short walk 1-2 times a day.
- Allow your body time to heal by resting for short periods during the day.
- Avoid contact sports, skating, bike riding or other activities for 12 weeks.
- You may **not** drive until instructed to do so by Dr. Wilkerson, which is usually 4 weeks after surgery. You may not drive until you are off any sedating medications, such as opioid pain medications or muscle relaxers.
- Avoid lifting, pushing or pulling heavy objects (more than 10 lbs) for 4 weeks.
- Avoid bending over to pick things up, or repetitively turning your head side to side or nodding.
- Avoid sitting in soft chairs or slumping while you are sitting.
- Be sure to get up and move around/stretch every 30 minutes while sitting.

Nutrition:

- Eat plenty of fruits and vegetables to prevent constipation.
- Warm liquids and soft foods are usually easiest to swallow after this surgery.
- A soft diet including: shakes, eggs, soup, pasta, and soft vegetables will be easier to swallow for the first few days after surgery.

- A sore throat and softer voice is common for about 2-3 weeks after surgery. You should be able to swallow food and liquids and not choke or cough while eating or drinking.

Medications:

- **Do not take any NSAIDS such as ibuprofen (Advil), Naprosyn (naproxen, Aleve), meloxicam, Toradol, etc. for 3 months as this will inhibit your bones from fusing.**
- Eat some food with your pain medications and use these medications sparingly to avoid nausea, vomiting or constipation.
- Take your pain medications as prescribed and gradually decrease these as your pain improves.
- You may need to take a stool softener (Colace) or a laxative (Dulcolax) that you can buy at a pharmacy until your bowels return to normal.
- You may need to use a suppository (Dulcolax or glycerin) or an enema if you have not had a bowel movement in 3 days.
- **Notes about pain medications and opioids (Norco, hydrocodone, oxycodone, Percocet, Dilaudid):** These medications can be habit forming and addicting, and can lead to overdose and possibly death. Do not combine these medications with alcohol, and if you take other sedating medications (muscle relaxers, antianxiety meds, for example) or have sleep apnea, take extra care while using these medicines. We will start decreasing your dose after a week or so, and will only be able to prescribe pain medications for a maximum of three months after surgery. After that time, you will need to contact your prior provider for assistance.

Follow Up:

- Call Dr. Wilkerson's office when you get home to schedule your follow-up appointment, unless this has already been scheduled.
- Follow up with your Primary Care Physician for all medical issues.

Call your doctor if you experience any of the following:

- Difficulty breathing or swallowing.
- Constipation- no bowel movement for more than 3 days.
- Difficulty moving or weakness of your face, arms or legs.
- Nausea or vomiting that won't stop.
- Your pain is not well controlled on your pain medications.
- **A fever above 100 F.**
- Redness, swelling, odor or drainage at your incision site.

If you are unable to reach the doctor and you have an emergency, go to the emergency room.