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DISCHARGE INSTRUCTIONS FOLLOWING A REPAIR OF CHIARI MALFORMATION

You had a surgical procedure called repair of Chiari Malformation. You received general anesthesia and had a breathing tube in place. During this procedure Dr. Maughan made an incision on the back of your head/neck. Next, a small piece of bone was removed from the first level of your neck and the base of your skull so that your malformation could be decompressed. These instructions provide additional information regarding your care at home.

Incision Care:

- You may shower with mild soap and shampoo daily, gently wash your incision and pat dry. This is the only time you may touch your incision.
- 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.
- Do not use a hot tub, go swimming or take a bath until your incision is completely healed (about 4 weeks for most people)
- Stop smoking as this delays healing and may cause a wound infection.

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 6 weeks.
- You may <u>not</u> drive when taking pain medications and until cleared by Dr. Maughan.
- Avoid lifting, pushing or pulling heavy objects (more than 10 lbs) for 6-12 weeks.
- Gentle shoulder shrugs may help relieve some of the neck/shoulder tension you feel
- You may wear a soft collar as needed for comfort.

Nutrition:

Eat plenty of fruits and vegetables to prevent constipation.

Medications:

- 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 bowl 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:

- Unless an appointment has already been scheduled, call Dr. Maughan's office when you get home to schedule your follow-up appointment for suture removal 10 to 14 days after surgery.
- Follow up with your Primary Care Physician for all medical issues.

Call your doctor if you experience any of the following:

- Constipation- no bowel movement for more than 3 days.
- Difficulty moving or weakness of your face, arms or legs.
- Your pain is not well controlled on your pain medications.
- A fever above 100 F.
- Redness, swelling, odor or drainage at your incision site.
- Loss of bowel or bladder control.
- Headaches in an upright position which resolve with lying down.
- Difficulty feeling your legs and arms.
- · Difficulty walking.

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

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