NEUROSURGICAL ASSOCIATES, L.L.C PETER H. MAUGHAN M.D., P.C.

5171 South Cottonwood Street, Suite 950 Murray, Utah 84157 Phone (801) 507-9555 Toll Free (866) 804-2193 Fax (801) 507-9550

DISCHARGE INSTRUCTIONS FOLLOWING A CRANIOTOMY

You had a surgical procedure called a craniotomy. During this procedure your skull was opened so that Dr. Maughan could remove or repair an abnormality within your head. These instructions provide additional information regarding your care at home.

Incision Care:

- Starting 2 days after surgery, 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 swelling and discomfort, as needed.
- You may have some itching at our incision site, some jaw tightness or trouble opening your mouth wide for a few days after surgery. This will improve as your incision begins to heal.
- Wear a hat outdoors to protect your incision until the staples or sutures are removed. This usually occurs 7 to 14
 days after surgery.
- Do not put anything in your ears and avoid putting your head under water.

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 to 2 times daily.
- Avoid contact sports, skating, bike riding or other activities for 6 weeks.
- You may not drive until instructed to do you by Dr. Maughan.
- Avoid straining to have a bowel movement.

Nutrition:

Eat plenty of fruits and vegetables to prevent constipation.

Medications:

- 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 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:

- If a follow up appointment has not yet been made, call Dr. Maughan's office when you get home to schedule your staple or suture removal.
- Follow up with your Primary Care Physician for all medical issues.

Call your doctor or return to the emergency room if you experience any of the following:

- Clear or bloody drainage from your ear or nose.
- Worsening headaches.
- Seizure activity or jerking twitching of face, arms or legs.
- Dizziness or ringing in your ears.
- Difficulty or discomfort moving your neck.
- Difficulty moving or weakness of your face, arms or legs.
- A fever above 100 F.
- Redness, swelling, odor or drainage at your incision site.

K: /Masters/Surgery PHM Craniotomy discharge instructions 08/07/17