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Lumbar Fusion Post-operative Information

What to Expect

Some discomfort and muscle spasms immediately after surgery is common. This pain will be temporary and usually resolves in a few days or weeks. Nerve pain in the leg(s) is usually immediately improved, but may "flare up" for a few days after surgery as a result of manipulation of the nerve during surgery. Most of the time, any remaining nerve pain in the leg(s) after surgery will improve over the course of four to six weeks as inflammation of the nerve and surrounding tissues resolves. Pain in the back will ease as the muscles and tissues adapt.

When to Call

Call Ortholndy at **317.802.2000** if you have any of these symptoms or concerns. It is best to call during business hours for matters that are not urgent. If you have a pressing concern, there is always someone to answer the phone and a physician/PA on call.

- Fever greater than 101 degrees Fahrenheit
- Headaches that worsen while sitting upright
- Wound drainage that is increasing not decreasing
- Worsening numbness or weakness in the legs
- One to two days before any anticipated prescription refills
- With any questions

Can I Start Smoking?

Smoking has a large and negative impact on spine fusions. The chance of obtaining a successful fusion while smoking drops to 50 percent. If you are smoking, it is likely better to delay surgery until you can stop smoking for at least two weeks prior to surgery and 12 weeks afterwards.

When Can I Start Taking Anti-Inflammatory Medications?

These medications inhibit the healing of a fusion and should not be taken for six weeks following surgery.

When Can I Start Taking Medication for Osteoporosis?

Fosamax and Boniva are two common medications taken to reduce bone loss. They may reduce your ability to heal a fusion. We ask that you not take these for one month prior to surgery until two months after surgery. If you have taken medication more recently than one month with an upcoming surgery, do not take additional doses of your medication until two months after surgery. Other newer drugs are coming on the market. If you take these, such as Forteo, mention it to us at your preoperative visit.

Medications

You will be prescribed medications to ease the pain and muscle spasms after surgery. We ask that you refrain from taking **any** anti-inflammatory medications (Advil, Motrin, Aleve, ibuprofen, naproxen, indomethacin, etc.) for six to eight weeks post-operatively. These medications will adversely affect your fusion by inhibiting bone growth at the fusion site. Regular strength Tylenol, or anything we prescribe, may only be used for pain.

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The following are common medications prescribed. They are to be taken on an "as needed" basis. If you have no pain or discomfort, you should not take them.

- Norco/Dilaudid/Oxycodone/Oxycontin These are narcotic pain medications. Do not drive while taking these medications. In addition to drowsiness, they commonly cause nausea and itching. If these side effects are bothersome, over the counter anti-histamines (Benadryl, Claritin, Allegra, etc.) typically ease the nausea and itching. Constipation is also common with these medications, so we recommend over the counter Colace to be taken per the package directions.
- **Zanaflex/Flexeril** These medications are for muscle spasms. They will not be prescribed in every case. These medications can also be sedating. Do not drive while taking these medications.

Wound Care, Dressings and Post-Operative Stockings (TED Hose)

In most cases, your surgical wounds will be closed with sutures that dissolve below the skin and does not require removal. There will also be a layer of "glue" over the incision to make it waterproof. The dressing that is placed at the time of discharge from the hospital is also waterproof and you may shower, but not bathe, with that dressing. This dressing should be removed in 24 to 48 hours. Showering without a dressing is allowed, but no soaking the incision in a bath tub/hot tub/pool until you are given the okay. A Band-Aid or gauze with tape may be used to cover the incisions once the hospital dressing is removed. The white stockings should be worn for at least two weeks. After this time and once you have returned to normal walking, they may be removed.

Back Brace

A back brace is typically not needed for this procedure.

Activity Recommendations

We have developed specific physical therapy protocols with our local physical therapists. This is a summation of our clinical experience and the latest research. If you will be having therapy away from Indianapolis, we can make our protocols available to your therapist.

- You may drive once you are no longer requiring prescription pain medications.
- Two to four weeks after surgery Please limit lifting to less than 15 pounds. Walking is encouraged. No vigorous activities or sports are recommended.
- Six to 12 weeks after surgery Physical therapy may be prescribed to help strengthen the muscles in and around the neck.
- Eight to 12 weeks after surgery Usual release to full activities without restrictions.

Follow-up Appointments

- Two weeks after surgery Please call 317.802.2049 to schedule this appointment if it was not made at the time you scheduled your surgery. This visit with Dr. Poulter will be used to answer all the questions that come up once you are home from surgery. At each visit we will check an X-ray and review your progress.
- **Six weeks after surgery** This visit will be with Mike Skonieczka, PA-C. It is to ensure that you are progressing. We may discontinue your brace at this visit if you are healing well.
- Twelve weeks after surgery This visit will be with Dr. Poulter. This is when we are likely to free you from most of your activity restriction and discuss physical therapy.
- Six months after surgery This visit will be with Mike Skonieczka, PA-C. It is to check that your fusion is maturing.
- One year after surgery This visit will be with Dr. Poulter. Often this is your final scheduled appointment. We often refer to it as your "graduation."