

POSTERIOR CERVICAL SURGERY (LAMINOPLASTY, LAMINECTOMY WITH FUSION)

NOTE: PLEASE DO NOT TAKE ANY NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs, advil, celebrex, ibuprofen, motrin, vioxx, etc) OR ASPIRIN PRODUCTS FOR 2 WEEKS BEFORE SURGERY. These medications can increase bleeding during surgery. If you absolutely need to be on these medications until the date of surgery, check with your surgeon.

Your Problem Spine

The cervical spine (“neck”) is made up of seven bones called vertebrae. These vertebrae are separated by discs, which act as “shock absorbers” for the spine. The nerve roots that go into your arms, as well as the spinal cord, are encased within this bony framework of the spine.

Nerve roots and the spinal cord can be “pinched” by herniated discs or by bone spurs which arise from arthritis (“wear and tear”, or “degeneration”) of the spine. Pinching of nerve roots can result in pain, weakness, or numbness/tingling of your neck, shoulder, upper back, arm, or fingers. Pinching of the spinal cord can additionally result in difficulty with walking or coordination.

You have decided to have surgery to address these problems. In general, the goal of the surgery is to relieve the compression on your nerves and/or spinal cord by creating more space for them. Plates, rods, and/ or screws may be used in some circumstances as discussed with you by your surgeon.

Incision

An incision will be made in the back of the neck in order to obtain access to the spine. There will usually be no stitches to remove, because all of the stitches will be placed inside.

Brace (Collar)

Your surgeon will tell you whether a brace (collar) will be needed after surgery. How long the collar is worn depends on the nature of the surgery you have. For laminoplasty, a collar is optional and should generally not be worn while in bed or for more than 2 weeks. If you had a fusion, a collar is generally worn for 6 weeks (according to what is written in the “Instructions after surgery” sheet attached).

Hospitalization

After surgery, you will be taken to the anesthesia recovery room. When you have satisfactorily awakened from anesthesia, usually about 2-3 hours later, you will then go to your patient suite. In most cases, your family may be able to see you once you have sufficiently awakened from anesthesia in the recovery room, as well as once you arrive in your suite.

Activity

You can get out of bed with assistance as early as the evening after surgery if you are able. You will be encouraged to walk during your recovery period.

Diet

You will be given liquids at first, then progress to solid food when you tolerate the liquids well.

Pain control

You will be given a PCA (patient controlled anesthesia) pump after surgery. This is a device that allows you to administer your own pain medication when you need it by simply pushing a button. Don't worry – as long as you are the only one pushing the button, it is very unlikely that you will overdose. As soon as you are ready (usually the day after surgery), you will be switched over from the PCA to oral pain pills. Pills are advantageous in that they provide a more constant level of pain control. You will be given several prescriptions for pain pills to take home after surgery. Instructions on how and when to take these pills are on the following pages.

Drains/ Wound care

There will most likely be a small drain in your wound that is placed during surgery to prevent blood clots from pooling in the wound. Generally, it is removed on the first day or two after surgery, depending on how much comes out of it. Your dressing will be removed at that time. The wound is then left open to air. No bandages are usually necessary.

POSTERIOR CERVICAL SURGERY – INSTRUCTIONS AFTER SURGERY

Wound care

- Keep your incision dry and clean.
- If you have them, let the steri-strips (tapes on your wound) fall off by themselves. If some remain attached 2 weeks after surgery, you may gently peel them off
- Do NOT put any ointments/lotions/antibiotic solutions on the incision
- If the wound is dry, no further dressings are needed and the incision can be left open to air. If there is some drainage, the wound can be covered with a clean dressing as needed.
- If you notice drainage, redness, swelling or increased pain at the incision, call the office

Showering

- You may shower when the wound has been clean and dry for 24 hours without drainage. Do not scrub the incision or soap it. Just let water run over it.
- Make sure you pat the incision completely dry after showering. Be gentle – do not scrub the incision.
- Do not immerse the incision in a pool or bath until 6 weeks after surgery

Collar

- If you had a FUSION and have been instructed to wear a collar *full time*, you can take the collar off 4-5 times per day for 15 minutes at a time. However, keep your head looking straight ahead during these times as much as possible.
- If your surgeon feels that you need a collar to wear while showering, it will be provided to you before you leave the hospital. If you have not been given a shower collar, you may shower without any collar.
- You can remove the collar to shave, but try not to flex or extend your neck while doing so. Keep looking straight ahead as you do these activities.
- If you had a LAMINOPLASTY (ie, no fusion), you should wear the collar for no more than 2 weeks. You should not wear the collar at all when in bed.

Skin abrasion from the collar

- If you have skin abrasion from the collar, you can lightly apply talc powder between the skin and brace
- Do not apply talc to open sores or the incision itself
- Alternatively, you can place a scarf or handkerchief between the area of skin abrasion and the collar

Activities

- Do not drive a car until you have seen your surgeon at follow up 6 weeks after surgery
- Walk as much as you like. Walking is good for you
- Use your common sense: no strenuous or sports activities until okayed by your surgeon
- If you had a FUSION: you may exercise your arms and legs with light weights if desired as soon as you feel like it -- as long as those activities do not cause you to put undue stress on your neck. However, avoid moving your neck as much as possible.
- If you had a LAMINOPLASTY: early neck extensor muscle strengthening is important to recovery. As soon as pain allows, do extension exercises in which you extend your neck gently (ie, look up at the sky) against resistance while holding your hands on the back of your head. Hold the resistance for 5 seconds, then repeat. Doing as many of these extension exercises as possible will improve your recovery.

Medications

- **PLEASE DO NOT TAKE ANY NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs, advil, celebrex, alleve, ibuprofen, motrin, vioxx, etc) FOR 3-6 MONTHS AFTER SURGERY.** These medications can adversely affect fusion. If you absolutely need to be on these medications sooner, please check with your surgeon first.
- **If you were on a baby aspirin prior to surgery, you may generally resume that 4 weeks after surgery.**
- **If you were on a blood thinner (like coumadin/ lovenox/ heparin products/ plavix), check with your surgeon as to when that may be resumed after surgery.**
- You may have been given prescriptions for several different pain medications, or your surgeon may have provided you with one type of pain medication. Take the *percocet* (oxycodone/ acetaminophen) for severe pain; *lortab* (hydrocodone/ acetaminophen) for moderate to severe pain; and *darvocet* (propoxyphene/ acetaminophen) for mild to moderate pain. Try to take the appropriate medication for the level of pain you are having. Take the pain medicine only when you need to.
- Pain medications are helpful around the time of surgery, but they can cause problems if taken for too long. The goal is to try to get you off of the medications by 4-6 weeks or earlier, if possible. Some people may need medications for longer than 4-6 weeks, and that's ok. But try to wean yourself off of them if you can.

- When your pain is really mild, try taking plain **extra strength tylenol** instead.
- You may take the **pericolace** to keep your bowels regular. The pain medicines may tend to make you somewhat constipated. Feel free to take any over the counter laxatives if you need to.

Diet

- Eat whatever you like. You may not feel like eating too much for a few days, and that's ok. Foods high in fiber (fruits, vegetables) are good in that they can help reduce constipation.
- Drink plenty of fluids.

Follow up

- If you have not already been given a postop follow up appointment, call your surgeon's secretary within the first few days after you get home. Tell her that you had surgery and need a six week follow up appointment.

Questions

- Feel free to call your surgeon's office with any questions.
- If you are having an emergency, call the Spine Center at 404-778-7000. Tell the operator it is an emergency. During business hours, you will be connected to your surgeon's nurse, who reports emergencies to your surgeon. After business hours, you will be connected to the surgeon on call who can help you.