
Fusion Discharge Instructions

Patient: _____

Procedure: _____

First Follow-up Appointment: _____ / _____ / _____

Time: _____ : _____ a.m. p.m.

Appointment Location: _____

A lumbar spine fusion is performed to prevent motion between adjacent lumbar vertebrae. This may be performed posteriorly, anteriorly or laterally by exposing the underlying spine and connecting the adjacent vertebrae with donor bone. In time, this donor bone heals together with the vertebrae fusing it. It normally takes three to six months for this to occur.

Pain and Pain Medications:

- Marcaine was injected prior to closing your incision and will have worn off within ten hours. This helps for "incisional" pain only.
- You will be provided a prescription for the oral pain medication that works for you, which may be obtained on the way home from the hospital.
- Your pain medication may contain an ingredient called acetaminophen or APAP. That is the generic name for Tylenol. Do not exceed 4,000 mg of acetaminophen in a 24-hour period. Excessive use of Tylenol can cause liver damage.
- After your surgery, **do not take non-steroidal medications**, such as, Motrin, Aleve, aspirin, ibuprofen, Relafen, Indocin and Naprosyn for three to six months, unless approved by your physician. These medications inhibit bone fusion healing.

Wound Care:

- Leave your dressings on for the first 48 hours. After this you do not need to replace dressings.
- You will likely have two sutures, one at the top and one at the base of your incision; those will be removed at your first post-op visit.
- Skin glue is used in addition to sutures. This will dissolve on its own in two to three weeks.
- Do not apply any ointments, peroxide or betadine to the incision. Keep incision dry and clean.
- **Call the office if your incision becomes red, begins to drain, becomes more painful or if you develop a fever that is greater than 101.5°.**

Bathing:

- You may shower 48 to 72 hours after surgery. For the first two weeks keep the incision away from the full force of the stream, pat the incision dry and then let it air dry.
- No tub bathing, swimming or hot tubs for six weeks.

Nutrition:

Drink a can of Boost or Ensure nutritional supplement at each meal until you are back to eating three regular, nutritious meals per day. Proteins are the building blocks of healing.

Constipation:

This can occur with the use of Narcotics. Using over the counter Miralax, Milk of Magnesia or Dulcolax may be used to help this. Also, increasing your activity (walking) and fluid intake will help.

Exercise:

Walking is the most important type of exercise for you. Walk short amounts each day and try to reach the goals listed below. Take frequent breaks as needed. Physical therapy may be prescribed for later in your recovery.

Goals for at Home:

- No bending, twisting, stooping or lifting over five to ten pounds for at least eight weeks after surgery.
- **First week:** Walk short amounts in the house every 10 to 15 minutes. Stairs are okay with help.
- **Second week:** Repeat first week but outside, weather permitting.
- **Third week:** Walk up to a half mile per day, divided doses.
- **Fourth week:** Walk up to one mile per day, divided doses.
- **Third month:** Walk up to three miles per day.
- No driving for the first two weeks and must be off narcotic pain medicine before driving.
- Use good body mechanics (always bend with your knees to lift or to pick something up from the floor).

Follow-up:

Your first post-op appointment will be about two weeks after surgery; however, if you have concerns prior to this date, please call the office. The tiny suture knots at each end of your incision will be painlessly removed and X-rays will be taken. Subsequent follow-up appointment intervals will be based on how you are progressing.

Return-to-Work:

Status is determined on each individual's progress, depending on the type of work you do and depending on the baseline of your health and activity level prior to the surgery. In general, you may expect to be off work for the first two weeks following your surgery. You may then qualify for light duty sit-down work depending on your progress. It may take three to six months before you can return to physically demanding work, such as construction or heavy lifting. You should not drive a car, operate heavy machinery or make important decisions while you are still taking narcotic medications.

What You Can do to Increase Your Chances of a Successful Outcome:

- Smoking cessation
- Weight loss
- Aerobic exercises

Call our office at 317.802.2000 if you develop any of the following:

- Leg swelling or calf pain
- Fever, chills, redness around or drainage from your incision
- Increasing back pain or numbness and tingling not relieved by rest and pain medication