
Single Level Anterior Cervical Discectomy and Fusion Post-operative Information

What to Expect

Some discomfort immediately after surgery is common. It is normal to have some neck and shoulder pain and muscle spasms. This pain will be temporary and usually resolves in a few days or weeks. Most patients do not need pain medication after 10 to 14 days. Nerve pain in the arm(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. Nerve pain that is significantly worse is uncommon, and if occurs, should be brought to our attention immediately. Most of the time, any remaining nerve pain in the arm(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 neck will ease as the muscles and tissues adapt.

Difficulties swallowing after neck surgery are normal as well. This is usually at its worst three to five days after surgery. Eating and drinking anything cold will help with this. We encourage consuming ice water, ice chips, ice cream, popsicles or whatever is cold. If swallowing food or medications becomes problematic, please notify us at once. If breathing difficulties are encountered, please call 911 or head immediately to the nearest emergency department.

When to Call

Call OrthoIndy 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 with a doctor/PA on call.

- Fever greater than 101° Fahrenheit
- Wound drainage that is increasing not decreasing
- Worsening numbness or weakness in the arms or legs
- One to two days before any anticipated prescription refills
- If you have any questions
- Call 911 if there is difficulty breathing

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.

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** – 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 antihistamines (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 surgical “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 that time and once you have returned to normal walking, they may be removed.

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 taking 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 **317.802.2000** 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 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 is when we are likely to free you from most of your activity restriction and discuss physical therapy.
- **Six months after surgery** – This visit is to check that your fusion is maturing.
- **One year after surgery** – Often this is your final scheduled appointment. We often refer to it as your “graduation.”