



OHSU Spine Center

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www.ohsuhealth.com/spine

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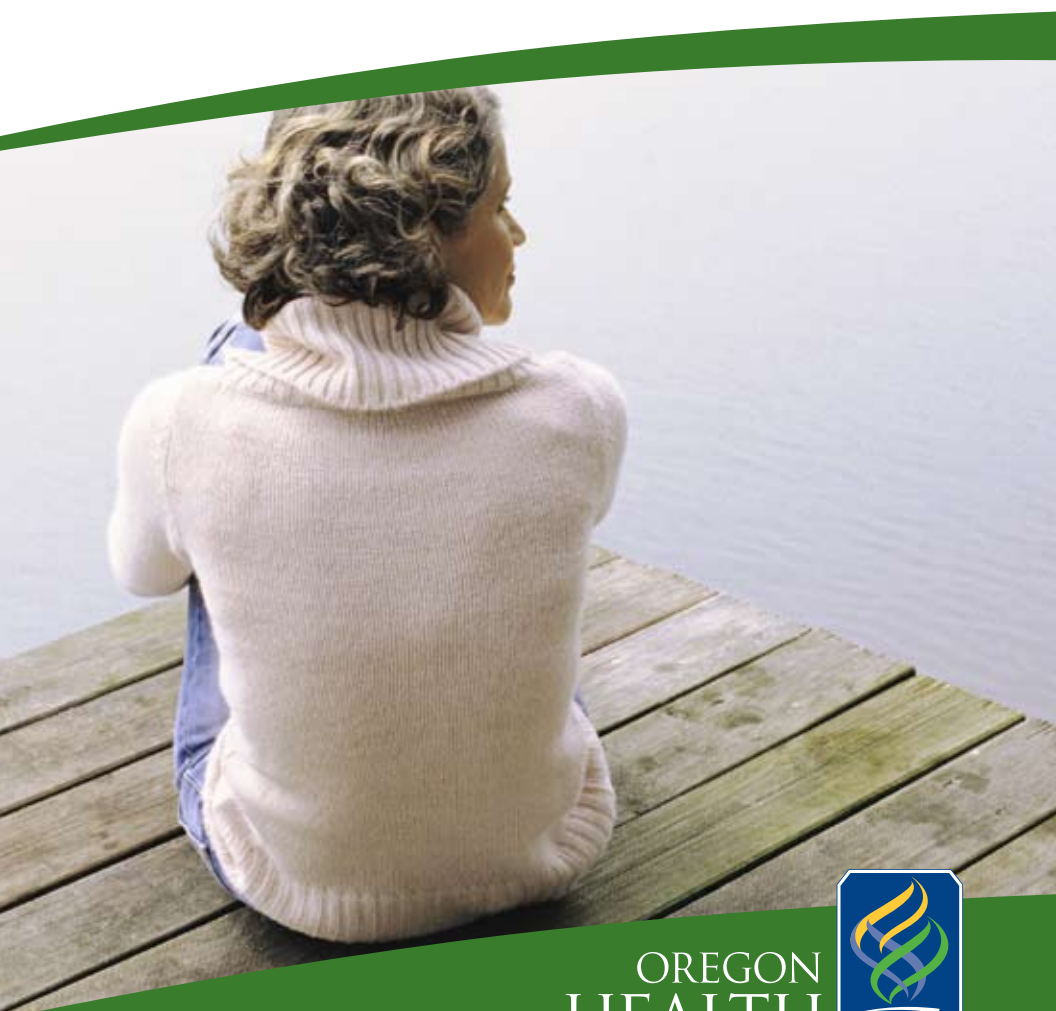
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OHSU Spine Center

Spine Surgery Guide

For patients having Discectomy, Laminectomy, Kyphoplasty, Vertebroplasty or Fusion Surgery



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Thank you for choosing the OHSU Spine Center for your spine treatment.

We want your stay with us to be as comfortable as possible. Please take a few moments to read this *Spine Surgery Guide* so you will have a better idea of what you can expect before, during and after your surgery. And, let your care team know if you have questions or concerns.

General Information

Your surgery

Each surgery is different depending on the type of surgery and the patient's condition. Generally, spine surgeries last 1½ to 3 hours. In some cases, surgery will take longer. If the surgery requires a bone graft, your surgeon might make a second incision into your hip. Metal plates, screws or wire will hold your spine in place while it heals.

For more information about your specific surgery, please visit our spine Web site at www.OHSUhealth.com/spine/treatments or talk to a member of your care team during your pre-surgery appointment.

Appointments before your surgery

You will have three appointments to prepare for your surgery

- Pre-surgery appointment with a member of your care team
- Pre-anesthesia Testing Clinic (PAT) appointment
- Physical therapy pre-op

Preparing for your appointments

- Please complete the *Medication Form* on page 9 and the *Pre-anesthesia Questionnaire* on pages 10 and 11 of this guide.
- Bring the medicines you are currently taking with you to your pre-surgery appointment
- Bring this guide (with your completed forms) with you to both appointments.

Pre-surgery appointment

Your pre-surgery appointment is important to the success of your surgery. During this appointment:

- We will ask you about your medical history.
- You will have a physical exam.

- You will meet the members of your care team who will work closely with your spine surgeon. Your team may include a physician assistant, a nurse practitioner, and/or a surgical resident.
- We will talk with you about managing your pain after your surgery.

Your pre-surgery appointment is also a good time for you to ask questions you may have about your surgery, hospital stay and recovery. You may want to ask how long you will be in the hospital and what you can do to improve your recovery. It may be helpful to write down your questions and bring them with you to your appointment.

Please remember: Bring any medicine you are taking with you to your pre-surgery appointment.

Pre-anesthesia Testing Clinic appointment (PAT)

We will schedule a separate appointment for you in the Pre-anesthesia Testing Clinic. This appointment is scheduled 1 to 30 days before your surgery. During your PAT appointment:

- You will have final blood work and last minute tests done.
- Your anesthesiology representative will review your *Pre-anesthesia Questionnaire*.

Preparing for your surgery

Planning for your home recovery

Planning for your first few days at home can make your homecoming easier and more comfortable. For example:

- If you have children or pets, arrange for someone to care for them for a few days.
- Place a table next to your bed for books, water and handy phone numbers.
- If you do not have a full-time caregiver to cook for you, plan easy-to-cook foods.

Smoking

Studies show non-smokers heal easier than do smokers. If you smoke, we strongly encourage you to stop smoking before having surgery. Many products are available to help you quit smoking. Please do not use nicotine patch or gum. Nicotine slows bone healing. Please contact your primary care provider to talk about your best option.

- Have Milk of Magnesia or other stool softener on hand. The pain medicine may make you constipated.
- Place a cell or portable phone beside your bed so you can carry it with you when you move to another room.
- Place a stool in your shower to make showering safer and easier.
- Check your hallways. Remove items that might make you trip or fall.

Things to do one or two days before your surgery

- Call your surgeon's office to confirm the time you should arrive at the hospital the day of your surgery.
- Arrange to have someone bring you to the hospital the day of your surgery.
- Ask a friend or family member to be available to bring you home from the hospital.
- Collect the things you will bring to the hospital (see the list on page 4).
- Plan for your return from the hospital (see page 7).

The night before your surgery

- Do not eat or drink after midnight the night before your surgery unless your surgeon gave you other instructions. This is important to avoid problems during your surgery.

The day of your surgery

Before leaving home

- Take your morning medications with sips of water as you were told during your pre-surgery appointment.
- Shower or bathe before you come to the hospital. Scrub your surgical area with soap.
- Men: Shave or trim your beard or mustache, as you normally would do in the morning.
- Do not wear makeup or nail polish to the hospital. Nail polish can block the sensor that we will attach to your finger to measure your blood oxygen.
- Brush your teeth, but do not swallow any liquid.
- Remove any body jewelry and contact lenses.

Transportation and parking

- Parking: Your driver may park free in long-term parking in the Sam Jackson Garage, which is across from OHSU Hospital, or may use the valet parking in the Physicians Pavilion Garage.
- TriMet stops in front of OHSU Hospital.
- Local cabs provide service to Marquam Hill. Tell your driver to bring you to the main entrance of OHSU Hospital.

Checking in at the hospital

- Arrive at OHSU Hospital at the time your surgeon's office told you.
- Check in with Patient Access Services, which is located immediately to the left as you enter the lobby of OHSU Hospital. If you need more information, please call 503 494-8111.
- The Patient Access representative will direct you to a waiting area.

Preparations for your surgery

- A member of your surgery team will escort you to another waiting area.
- One of our staff members will take your blood pressure, temperature and heart rate.
- You will change into a hospital gown. We will store your personal clothing.
- We will start an IV in your arm, which is how you will receive medicine during your surgery.
- A member of your anesthesia team will take you into the operating room and give you medicine to help you relax and fall asleep.

What to bring with you

- ✓ *Insurance billing information*
- ✓ *Money for any insurance co-pay or deductible that your plan requires*
- ✓ *Personal toiletries, if desired*
- ✓ *Robe and slippers, if desired*
- ✓ *Comfortable or loose clothing for the trip home*
- ✓ *Copy of your Advance Directive, or durable power of attorney (if you have one)*

What to leave at home

- ✗ *Valuables — such as jewelry, watch, wallet*
- ✗ *Electrical appliances*
- ✗ *Medications (unless your doctor asks you to bring them)*

- While you are sleeping, we may insert a small tube, called a Foley catheter, into your bladder to collect urine during your surgery. This catheter usually remains in place until the day following surgery or until you are regularly up and out of bed.

Information for your family and friends

- During your surgery, family members and friends can wait in the main surgery waiting room, which is located near Treasures Gift Shop on the ninth floor of OHSU Hospital.
- There are several coffee bars and cafes in the hospital should they get hungry while they are waiting. The café on the third floor of OHSU Hospital is open 24 hours a day every day of the week.
- An ATM and public restrooms are located in the hallway next to Treasures Gift Shop.
- The hospital volunteer in the surgery waiting area can provide directions to various services.
- After your surgery, a member of your surgery team will talk with your family members about the surgery and tell them the approximate time we will move you from the recovery room to your hospital room.

After your surgery

Moving from the recovery room to your hospital room

Patients who have laminectomies, discectomies, or anterior or posterior spinal fusions usually spend one to two hours in the recovery room.

When they are ready, we transfer them to our Orthopaedic Unit on the 10th floor of OHSU Hospital or our Neurosurgery Unit on the 10th floor of Kohler Pavilion.

Monitoring your progress

After your surgery, the nursing and surgery teams will closely monitor you. They will:

- Check your breathing, heart rate, blood pressure and pain level.
- Help you change positions every two hours until you are able to move on your own.
- Ask you to take deep breaths regularly using a special device to help keep your lungs clear.

During your hospital stay

Caring for your incision

Your care team will regularly check the bandage or dressing covering your incision and will change it when needed. You may have a drain in your incision to help remove fluid and blood from the site and reduce the chance of developing an infection. Normally, we remove the drain 24 to 48 hours after your surgery.

Controlling your pain

Usually oral or intravenous pain medications will relieve pain for patients who have had spine procedures. Some patients who have had more complex or extensive spinal surgery may have a special pain medication pump. If you have this type of pump, you will be able to administer pain medication when you need it in doses prescribed by your physician.

Eating and drinking

Eating and drinking might be difficult at first. We will give you the nutrition and liquid you need through your IV until your stomach can properly digest food. Your normal appetite should return one to four days after your surgery.

Moving speeds recovery

Getting out of bed as soon as possible will speed your recovery. On your first day in the hospital, your nurse and physical therapist team may help you get out of bed so you can begin taking care of yourself. Sometimes spine patients wear a brace or corset to provide extra support while healing. Your team will show you how to put it on and take it off. Please be certain you always wear the brace when you are out of bed, even if you are only getting up for a short time.

Avoiding blood clots

Lying down for long periods can increase your risk of developing a blood clot. Getting out of bed and walking helps reduce this risk. Your nurse also might give you special elastic socks to wear. In addition, your doctor might have you wear special plastic sleeves on your legs, which will automatically squeeze your legs to help circulate your blood.

When it is time to go home

As soon as we know when you will leave the hospital, your nurse will ask you to tell the family member or friend who has agreed to drive you home so they can arrive at the hospital on time. When it is time for you to leave, your driver can park temporarily in front of the entrance to OHSU Hospital.

One of our staff members will help you into a wheelchair and escort you to the entrance of OHSU Hospital.

Tips for a safe trip home

- Be careful getting into and out of the car.
- Do not make sudden movements.
- Be certain you are sitting in a comfortable position. You may want to recline your seat until you are in a comfortable position.
- Wear your seat belt.
- If you are going to be in the car for several hours, plan to stop every hour to stretch for a few minutes.

Continuing to recover at home

Moving around

The single most important thing you can do to regain your strength is to walk. Walking every day will help you recover the strength and physical condition you had before surgery. Do not worry if you tire more easily – that's normal. Try to work up to walking one or two miles per day before you come in for your first follow-up appointment.

When to call the doctor

- *Redness or heat around the incision*
- *Drainage from the incision*
- *Increasing pain*
- *Fever, chills or night sweats*
- *New weakness or lack of sensation in your arms or legs*
- *Shortness of breath*
- *Swelling of your calves*
- *Bowel or bladder incontinence*
- *Postural headache (one that is worse when you are sitting or standing upright and better when you are lying down flat)*

Pain medicine

Your doctor will give you a prescription for pain medicine when you are ready to go home from the hospital. You will have instructions to reduce gradually the amount of pain medication you take.

Physical therapy

Your surgeon might prescribe physical activity supervised by a physical therapist. The therapy will depend on the type of spine surgery you had. It is important to work with your physical therapist to ensure you are doing the back exercises correctly.

Follow-up appointments

You will have regular check ups with your doctor for up to two years after your spine surgery. During these appointments we will check to be certain you are making good progress with your recovery.

Notes

Important phone numbers

OHSU Spine Center – 503 418-9888

Medication Form

Please complete this medication form with all medication names, dosages and frequency. Include prescription and herbal medications. Bring your *Surgery Guide*, with your completed form, and your medication bottles to your pre-surgery appointment.

Medication Name	Dosage	How Often	Reason for Medication

Pre-anesthesia Questionnaire

When you come in for your Pre-anesthesia appointment, your doctor will be asking you these questions. Please take the time to review these before you come in.

Please Answer the Following Questions:

Do you have a history of or currently have:	Yes	No	Don't Know
1. Lung disease or history of abnormal chest x-ray?			
2. Breathing problems, such as asthma, emphysema or sleep apnea?			
3. Recent pneumonia, cold or flu?			
4. Heart problems, such as abnormal heartbeats, abnormal EKG, chest pain or pressure, rheumatic fever, murmur or presence of pacemaker?			
5. High blood pressure? If yes, has it ever been treated?			
6. Stomach ulcer, hiatal hernia, esophageal reflux or heart burn?			
7. Liver disease, including jaundice or hepatitis?			
8. Kidney disease?			
9. Diabetes requiring pills or insulin? If yes, for how long? _____ years.			
10. Thyroid problems?			
11. Do you bleed or bruise easily or have other blood diseases?			
12. Fainting spells, convulsions/seizures or stroke?			
13. Paralysis or weakness in any part of your body?			
14. Anxiety, claustrophobia or psychological problems?			
15. Arthritis or other difficulty with any joints?			
16. Problems with your jaw or neck?			

Do you have a history of or currently have:	Yes	No	Don't Know
17. Any other medical problems not mentioned above? If yes, please comment:			
18. List all operations you have had, including approximate year and type of anesthesia.			
19. Have you ever had any problems with anesthesia?			
20. Has anyone in your family (blood relatives) ever had a problem with anesthetic?			
21. Have you ever smoked? If yes, how many packs per day? _____ For how many years? _____ Quit date: _____			
22. Do you drink alcohol? If yes, how many glasses a day? _____ How often? _____			
23. Do you currently use or have you used non-prescribed drugs (marijuana, cocaine, etc.)			
24. Have you ever had a blood transfusion?			
25. Do you have any allergies or allergic reactions to drugs, adhesive tape, etc. Please list:			
26. Are you currently taking any medication, including herbal medications, cortisone, blood thinners, aspirin, etc.? Please list all medications on the Medication Form on page 9 of this surgery guide.			
27. Is it possible you could be pregnant? Date of last menstrual period:			

ACTIVITY CHART

Following Discectomy or Laminectomy Surgery, Kyphoplasty or Vertebroplasty

Activities are guidelines only and may be modified for individual variations.

	7-10 days	3 weeks	6 weeks	3 months	6 months	1 year
Shower	Yes					
Lifting 10 - 15 pounds	Yes					
Walking outdoors	Yes					
Cooking, dusting, light chores	No	Varies	Yes			
Climbing stairs	Yes					
Car rides (short) 15 - 20 minutes	Yes					
Short outings (e.g., church, visits)	No	Yes				
Stationary bicycle	No	Varies	Yes			
Driving a car	No	Yes				
Air travel (short distance)	Varies	Yes				
School	No	Varies	Yes			
Light upper extremity exercises	No	Yes				
Air travel (long distance, frequently)	No	Varies	Yes			
Swimming, no diving	No	No	Yes			
Dancing, slow	No	No	Yes			
Light jogging	No	No	Varies	Yes		
Vacuuming, laundry, floors	No	No	Varies	Yes		
Aerobic dance exercise – low impact	No	No	Varies	Yes		
Non-contact sports (tennis, bowling)	No	No	Varies	Yes		
Lifting 15-50 pounds	No	No	Yes			
Road bicycle	No	No	Varies	Yes		
Cross country skiing	No	No	No	Yes		
Gardening, house repairs	No	No	No	Yes		
Downhill skiing (experienced)	No	No	Varies	Yes		
Downhill skiing (novice)	No	No	No	No	No	Yes
Horseback riding, riding a snowmobile, waterskiing	No	No	No	Varies	Yes	

The charts shown on these two pages describe activities patients may do after the various types of back surgery performed at the OHSU Spine Center. Please use the appropriate chart as a guide in determining what you may and may not do as you recover.

ACTIVITY CHART

Following a Fusion

Activities are guidelines only and may be modified for individual variations.

	7-10 days	3 weeks	6 weeks	3 months	6 months	1 year
Shower	Yes					
Lifting 10 - 15 pounds	Yes					
Walking outdoors	Yes					
Climbing upstairs	Yes					
Light upper extremity exercises	No	No	Yes			
Car rides (short) 15 - 20 minutes	Yes					
Cooking, dusting, light chores	No	Varies	Yes			
Short outings (e.g., church, visits)	No	Yes				
School	No	No	No	Varies	Yes	
Air travel (short distance)	No	No	Varies	Varies	Yes	
Stationary bicycle	No	No	Varies	Varies	Yes	
Driving a car	No	Varies	Yes			
Swimming, no diving	No	No	Varies	Yes		
Dancing, slow	No	No	Varies	Yes		
Vacuuming, laundry, floors	No	No	No	No	Yes	
Lifting 15-50 pounds	No	No	No	Varies	Yes	
Light jogging	No	No	No	Varies	Varies	Yes
Aerobic dance exercise – low impact	No	No	No	Varies	Varies	Yes
Non-contact sports (tennis, bowling)	No	No	No	Varies	Varies	Yes
Air travel (long distance, frequently)	No	No	No	Varies	Varies	Yes
Downhill skiing (experienced)	No	No	No	No	Varies	Yes
Road bicycle	No	No	No	Varies	Yes	
Cross country skiing	No	No	No	Varies	Yes	
Downhill skiing (novice)	No	No	No	No	No	Yes
Gardening, house repairs	No	No	No	Varies	Yes	
Horseback riding, riding a snowmobile, waterskiing	No	No	No	No	Varies	Yes

Adapted from: Laminectomy and Fusion: A Patient Handbook, The Spine Center, UCSD Medical Center.