SURGERY CHECKLIST CERVICAL FUSION

Dr. Chang has suggested surgery. In order to make sure things go as planned, there are a few steps that need to be taken before surgery.

- 1. Call your primary care physician to let him/her know that you are having surgery and that you will need a history and physical/medical clearance be fore surgery. If you have cardiac or pulmonary issues, we will need clearance from those doctors as well.
- 2. You will need to be given a cervical collar prior to surgery. The collar is to be picked up in our office. You **MUST MUST** have the collar prior to surgery. No appointment is necessary, however we ask that you come on a Monday Wednesday or Friday since we do not see patients on those days. Most insurances need to approve first.
- 3. If you brought MRI films/CD to our office, Dr. Chang will need them for the surgical procedure. If you took the films/CD with you, please return them to the office at least one week before your surgery. IF WE DO NOT HAVE THEM HE CANNOT PERFORM THE SURGERY.
- 4. The hospital will call you to schedule an appointment for all pre-op testing approximately one week before surgery. The admissions office will also call you the night before surgery to let you now what time to be at the hospital the day of surgery, and give you your eating and drinking instructions as well as what medications you can take the morning of if any.
- 5. I suggest that all patients call their own insurance companies. You may have to notify them of admission prior to surgery. I also call to do any precertification that may need to be done.
- 6. If you are taking any blood thinning medications or anti-inflammatory meds (i.e. Aspirin, Advil, Ibuprofen, Aleve, Coumadin, Plavix). These medications need to be stopped 7 days prior to surgery. **TYLENOL IS OK TO TAKE UP UNTIL SURGERY.**

If you have any questions regarding your surgery, please do not hesitate to call.

JOANN,RN 219-836-4955 ext 4 F-219-865-2377

Instructions after Cervical Decompression and Fusion

<u>First two weeks:</u> Keep collar on at all times until morning of third day after the surgery. Now, you can shower without the collar, but keep your head level. Leave the dressing in place. Take quick 5-minute shower without moving your head. Have someone gently pat dry your hair and towel-off the rest of your body. Once you are dry, sit straight on a firm chair. Someone else can now peel off the dressing on your neck. Steri-strips will be covering the wound. **DO NOT REMOVE THE STERI-STRIPS**. Put new gauze over the steri-strips and apply a new sticky, clear dressing to hold the gauze. Then, put the collar back on. Wait two days before changing dressing and showering again. Repeat this schedule until you see back in the office.

First four weeks:

- 1. Minimize riding in a car, travel during non-busy times and routes to decrease risk of being in a car accident. Absolutely no driving while wearing a collar.
- 2. No sexual relations.
- 3 No tub baths.
- 4. Wear cervical collar.

First three months:

- 1. Take it easy. You can walk around as much as you like. You can do simple things for yourself, such as feeding yourself, preparing simple meals, and dressing yourself. Wear the collar at all times. The collar is reminder for you to keep your head still, level, and looking straight. The collar will not keep your head absolutely still; you must do that.
- 2. Keep collar on at all times, except for brief moments to clean your neck. Usually we will be able to discontinue use of collar after four weeks, depending on bony healing.
- 3. Remember not to bend your head down when you are doing simple activities. You can look down with your eyes, but not with your head. Turn by turning your body, not your head.
- 4. Use only one small pillow behind your head when lying down.

Signs and Symptoms to Watch for:

- 1. Any increase in swelling or redness around the wound.
- 2. Any cloudy, foul-smelling, or reddish drainage from the wound.
- 3. Any new numbness, tingling, or weakness in the arm, hand, or fingers.
- 4. Any temperature over 100 degrees F.

If any of these conditions occur or if you have any question, contact my office at: 708-799-2911 or 219-836-4955.

Miscellaneous:

- 1. Some pain in neck is expected. If you had bone graft surgery, the pelvis will hurt more, but gradually it will get better. You should note gradual improvement in the pain and sensation in the arms and hands.
- 2. Do not do any exercise program right after surgery unless prescribed by me. Depending on your condition, you may or may not need physical therapy after the surgery.
- 3. As you heal and recover, your activity restrictions will gradually lessen. Do not try to do too much within the first few weeks of surgery. When appropriate, we will discuss your return to work and if restrictions are needed.
- 4. As the surgical pain decreases, I recommend you cut down the use of pain pills. These medications have side-effects and are meant only for short-term use. Usually the pain decreases enough by fourth day after surgery so that no narcotic pain medication is necessary.

If you have any question or problem, please call my office: 708-799-2911 in Illinois or 219-836-4955 in Indiana and ask for Joann.