



## DELAWARE ORTHOPAEDIC SPECIALISTS

### **Symptoms**

1. You may have persistent or recurrent symptoms even after surgery. This is common during the healing process and is usually due to nerve swelling and irritation. **Pain** usually goes away quicker than **numbness and tingling**. **Weakness** (if you have any) usually takes a longer time to improve. It is also normal for symptoms to abate for the first few days after surgery and then to return again after a period of time. Again, this is usually just from nerve irritation and is part of the healing process.
2. It is very common for people to experience muscular pain in their low back for a few weeks following surgery. This is due to the surgery itself and is to be expected. Ice, massage and continued movement are the best treatments. Even if you have some pain, it is very important to **stay as active as possible**. Activity not only helps with your surgical recovery but also prevents post-operative complications, such as blood clots and pneumonia.
3. Post-operatively, it is not uncommon to feel more tired than usual. **Nausea** and **lack of appetite** are also very common. This may last for several weeks.

### **Activities and Restrictions**

1. You are encouraged to take short **walks** multiple times a day during your recovery. You may **climb stairs** and **ride** in the car for short distances in the beginning of your recovery.
2. You are not allowed to **drive** until cleared by your surgeon.
3. Wear your brace as needed for comfort or as directed by your surgeon.
4. **Light duty activities**, such as preparing meals, washing clothes or dishes, can be resumed almost immediately, but using an upright **vacuum** should not be attempted for six weeks.
5. **Lifting** should be restricted to 10 pounds until your follow up visit, at which time the gradual lifting of these restrictions will be discussed on an individual basis. Any lifting should be done as instructed by Dr Eskander and **proper body mechanics** should always apply.
6. **Physical Therapy**: depending upon your condition and the type of surgery performed, your physician may recommend physical therapy. Please note, prescriptions for physical therapy may not be provided until your six week postoperative visit. This is to allow your body an adequate amount of time to heal from surgery.

### **Medication**



## DELAWARE ORTHOPAEDIC SPECIALISTS

1. **PLEASE NOTE:** If you currently have active narcotic prescriptions from another provider, we will NOT be able to prescribe any pain medications for you after your surgery. You must contact your current prescribing physician to establish a plan for your post-operative care.
2. When you were discharged from the hospital, you were given a **prescription** for pain medicine. If your pain is not severe enough to warrant its use, you may use Extra Strength Tylenol.
3. Post operative constipation is an issue for many people. Prior to surgery, please purchase Senekot, Colace, and Metamucil at the drug store to take as needed **after** surgery. **If you are taking narcotics on a daily basis**, you should be taking daily stool softeners and laxatives to prevent any issues. If these do not work after 2-3 days, you must increase your regimen by adding Dulcolax orally or as a suppository, a fleets enema, or by drinking 30ml of mineral oil once or twice a day. All of these supplements are available over the counter at your pharmacy.
4. **Prescription refills** on narcotics can be requested over the phone. Please make sure you **call during business hours** (8:00 am – 4:00 pm) and **plan ahead**. If you call our office on **Friday after 12:00 pm**, please be aware your request will not be completed until the following **Monday**.
5. **State law** allows us to refill your prescription only **one** time following surgery. If you request an additional refill, you will need to be seen in the office to discuss your medication usage.
6. Prescriptions will not be filled after hours, on weekends or holidays.
7. You may only obtain narcotics from one physician. If you have chosen our office to be your prescriber, you have already read and signed the narcotics policy stating this fact.
8. The use of **nicotine** and **anti-inflammatories** around the time of your surgery will significantly reduce your chances of fusion (bone growth) and is strictly prohibited. If your fusion were to fail, a second surgery may be necessary which means a higher risk of complications.
  - If you are a **smoker**, you may also be given a bone growth stimulator. This device is to be as instructed for the first three months post-operatively to attempt to counteract the effects of nicotine on bone growth. It is imperative that you stop smoking, ideally two weeks prior to your surgery, in order to allow the nicotine to leave your system. After surgery, you should refrain from smoking at least until fusion is complete which may take up to a year. We suggest never returning to smoking following your surgery.



## DELAWARE ORTHOPAEDIC SPECIALISTS

9. If you take **anti-inflammatories**, you should stop 10 days prior to your surgery and should not restart them post-operatively until cleared by Dr Eskander. This decision will be based on how quickly your bone fuses and is followed by xrays. Some **examples of anti-inflammatories** are ibuprofen, Advil, Motrin, naprosyn and Aleve.
10. If you were taking any **daily medications** prior to surgery, such as blood pressure medications, etc., you should resume them after surgery unless Dr Eskander or your primary care physician tells you otherwise.
11. If you are on any **blood thinners** or take **aspirin** on a daily basis, your physician will tell you when to stop and restart these medications. Communication with your cardiologist may be necessary to come to a mutual decision that will be most beneficial to your health.

### **Wound Care**

1. By the time you are discharged, you should have only fine pieces of paper tape across your incision. These are called **steri-strips** and they should fall off on their own. If they have not done so after **seven days, carefully peel them off**. This is done easiest after showering. Having the wound open to air will promote proper healing.
2. You may **shower** the day after going home, but do not soak in a tub, pool, Jacuzzi, etc for at least three weeks or until your incision is completely healed. This is to ensure your wound will heal properly and it will help prevent bacteria from entering the wound.
3. **Mild swelling and redness** around the incision is normal. You may even have some spotty discharge. If you have any concerns about infection, please give us a call early in the day in case we need to see you.
4. Do not put any **lotions or ointments** on the incision for 6 weeks.

We are devoted to giving you the best care possible and if you have any problems, every effort will be made to address them in a timely fashion. Thank you for allowing us to be involved in your care.

Sincerely,

Dr Mark S Eskander

Crystal DiMauro, PA-C