

After Spinal Hardware Removal

Surgery Date: _____
Doctor: _____

This handout explains how to care for yourself when you go home. If you have any questions or concerns, talk to your nurse or doctor. Our staff is here to help you. Please call the numbers at the end of this handout.

Activity

Be sure to walk. Set a time to walk at least 3-4 times each day. Let pain be your guide. If you are having pain, end the walk. Walking 3-4 times every day helps you get stronger. It is okay to gradually increase activity as pain allows. You can climb stairs.

Limits

- **No driving** while taking narcotic pain medicine.
- **No lifting** more than 10 pounds (about 1 gallon of milk) for the first 4 weeks.
- **No sports** except walking until your first clinic visit.

Sex

After 2 weeks, you may resume sex, if comfortable.

Smoking

We strongly suggest you quit smoking. Avoid nicotine products, and second-hand smoke. Smoking will delay bone healing. It is best not to smoke for at least 4-6 months after surgery.

Sitting

You may sit for any length of time based on your comfort level. You should change your position every 60 minutes.

Sleeping

Sleep in a position that is comfortable for you. Place pillows under your legs when lying on your back. Place pillows behind your back and between your knees when lying on your side.

Pain

You may have more pain and numbness in the low back and legs as you heal. This is caused by swelling of tissue in your low back. To reduce the pain, there are many things you can try.

- Ice the area for 15-30 minutes as often as needed. **Do not** put ice directly on the skin. Use a pre-made ice pack or put ice in a plastic bag, then wrap ice pack or bag in a towel.
- Heat may be used 72 hours after surgery. You may use heat, ice, or alternate between the two depending on what seems to work best for you.
- Reduce your activity for the first 48-72 hours during a pain flare-up. Be sure to walk several times a day to help prevent muscle irritation and blood clots. Shorter and more frequent walks can sometimes be better tolerated.
- Take the pain medicine as prescribed by your doctor.
- **Do not** take more than 3000 mg of acetaminophen (Tylenol[®]) per day. Percocet[®] and Vicodin[®] also contain Tylenol[®]. If you have liver disease, **do not** take Tylenol[®] without checking with your doctor first.
- **Do NOT** take non-steroid anti-inflammatory drugs (NSAIDs) for 3 months postop. These medicines can delay bone healing. Commonly used NSAIDs include ibuprofen, aspirin, meloxicam, diclofenac, and Aleve[®].

- **Gabapentin:** Take as prescribed. This is most helpful for nerve pain. This medicine should not be stopped abruptly, as one can experience withdrawal side effects including mood changes, agitation, dizziness.
- Straining activities such as coughing or going to the bathroom can increase the abdomen incision pain. Holding a pillow to the abdomen, also known as splinting, during these activities can help to decrease discomfort.

Compression Stockings (TEDS)

To improve blood flow and decrease the risk of getting a blood clot, you need to wear elastic stockings (TEDS) until you are walking three times a day. Make sure they are smooth and do not bunch up. Take them off two times each day for one hour at a time. You should sleep with them on. You should wash them with soap and water. Let air dry.

Incision Care

Taking care of the incision helps to prevent infection.

- Keep the incision clean and dry.
- The incision is closed with sutures that dissolve under the skin. The incision is then given extra support with Steri-Strips™ (small pieces of tape) on the skin. They will peel off as they get wet when you shower. You may gently remove them after 14 days.
- After 5 days, remove the surgical dressing. Check the incision daily to be sure it is clean and dry. If you do not have any drainage and the incision is clean, you may stop wearing a dressing.

- Every day, check for redness, swelling, or drainage. Some redness and swelling are normal. If you are unsure, contact the clinic.
- A small amount of clear or slightly blood tinged drainage from the incision is normal.

Bathing

You may shower 5 days after surgery.

Do not scrub the incision. Wash around the incision gently with soap and water and then let air dry. Let the water run over the incision but **do not** point water directly at the incision. After showering, look at incision for any signs of irritation/infection, including redness, open areas, and drainage.

Do not use any creams, lotions, ointments, or alcohol near or on the incision until your first postop visit.

Follow directions after the first post-op visit.

Constipation

It is common to have constipation after surgery. It can be caused by the surgery, narcotic pain medicine, decreased activity, and a change in your diet. Please see *Health Facts for You #4843: Constipation from Opioids (Narcotics)*.

Return to Work

Your return to work will depend on your recovery and the type of work you do. Talk to your doctor before you return to work.

Refills

The Spine Clinic staff will work with you to balance pain medicine, pain control, and activity. If you need to refill your pain medicine, call the Spine Clinic at: **(608) 265-3207**, Monday through Friday, 8:00 a.m. to 5:00 p.m. and ask for the nurse.

Please call when you have at least a **2-3 business day supply left** of your medicines. We cannot do refills on the weekend or after hours so plan accordingly. Be ready to give the name and phone number of the drugstore where you want to pick up a refill.

We do not expect you to require opioid medicines beyond 3-7 days after surgery. Our hope is that these medicines are not needed beyond that time. However, if these medicines were used preoperatively, and you feel you will need to continue taking them, please make plans with the previously prescribing provider to resume management of opioids if use is ongoing. We **do not** prescribe opioids beyond 6 weeks post-operatively.

Future Clinic Visits

The nursing staff will help you schedule your first clinic visit in 6 weeks. All other clinic visits will be as needed.

When to Call

- Increased pain, swelling or redness in or around the incision area.
- Any drainage beyond postop day 5.
- Sudden increase in pain or pain not relieved by medicine.

- Increased drainage, change in the color of drainage, or any odor from the incision. Be ready to describe what the drainage looks like, how it smells, and how much there is.
- A headache that is present when upright but resolved when lying flat.
- New weakness that was not present when leaving the hospital or before surgery.
- A fever above 100.5°F or 38.1°C for 24 hours.
- Problems urinating or having control of your bladder or bowel movements.
- Numbness or tingling to the genital area.
- Redness, warmth, or tenderness in the back of the calf of your leg(s).

Who to Call

Spine Clinic at:
Monday - Friday, 8:00 a.m. to 5:00 p.m.
(608) 265-3207.

For urgent concerns after hours, call the paging operator at: **(608) 262-0486**. Ask for the Orthopedic Resident on call. Leave your name and phone number with the area code. The doctor will call you back.

Toll-free number: **1-800-323-8942.**

If you have any trouble breathing or chest pain, go to the nearest Emergency Department or call 911.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 4/2023. University of Wisconsin Hospital and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5127