

## Home Care Instructions After Lumbar Laminectomy, Decompression or Discectomy Surgery

This handout will review the care you need to follow once you are home after lumbar laminectomy, decompression or discectomy. If you have any questions or concerns, please ask your nurse or doctor.

### Incision Care

Your incision will be closed with sutures that should dissolve in 2-3 weeks. Proper incision care helps to decrease risk of infection.

### Dressing Changes

Follow the guidelines below to properly care for your surgical dressing and incision.

- Keep the surgical dressing in place for 5 days. Inspect dressing daily to ensure it is clean, dry and secure.
- After the first 5 days, change the dressing every other day as needed.
- You may leave the incision uncovered if there is no drainage.
- **Do not** use any creams, lotions, ointments or alcohol near or on incision.

### Signs of Infection

It is normal to have some redness and swelling around the incision. It is important to know the signs of infection. Once you can remove the dressing, check the incision for:

- Increased redness and swelling
- Swelling
- Drainage
- Warmth

### Bathing

- Keep the incision dry and covered for the first 5 days. You can bathe if you keep the dressing covered to keep it clean, dry and secure.
- After 5 days, you may gently remove the dressing and shower with the incision uncovered.
- **Do not** scrub the incision. Just let the water gently run over it. Carefully pat incision dry.
- **No** hot tubs, swimming pools, and lakes for at least 6 weeks.

### Compression Stockings

Please wear your compression stockings until you are walking three times a day. This is most often 2-3 days after going home. If you notice swelling in your legs, please elevate and put on compression stockings. If swelling does not improve, please call the clinic.

### Activity Guidelines

Being active is important for your recovery. Doing too little may delay the return of your strength and stamina. Make sure you increase your activity slowly. In most cases, your body will tell you when you are doing too much.

### Exercise

- Begin walking 3 times a day once you go home. Increase the distance as you can.
- You may walk anywhere your footing is safe such as stairs, treadmills, walking tracks, or inclines.

### **Sitting or Lying Down**

- Change your position every 45-60 minutes while awake.

### **Restrictions**

Follow these guidelines until your post-op visit:

- No lifting over 10 pounds.
- No sports, aerobic or cardio activities.
- No strenuous and jarring activities.
- No bending or twisting at the waist.

### **Sleeping**

Sleep on either your back or side. Use pillows to help support your back.

- **Sleeping on back:** Place pillows behind your knees.
- **Sleeping on side:** Place pillows behind your back and between your legs.

### **Driving**

- **Do not** drive while taking narcotic pain medicine.
- **Do not** drive until your reflexes return to normal and you feel safe to do so.

### **Return to Work**

The length of time off work will depend on your recovery and type of work you do. If you plan to return to work before your first post-op visit you will have restrictions. Please talk about this with your doctor or nurse.

### **Sex**

- No sex for 2 weeks.
- After 2 weeks, you may resume sex if comfortable.

### **Smoking/Nicotine Products**

You should stop using nicotine before and after surgery. You should avoid nicotine for at least 4-6 months after surgery. Forms of nicotine include:

- Cigarettes
- Cigars
- Pipe
- Chewing tobacco
- Nicotine patches
- E-cigarettes/vapes
- Nicotine gum
- Second-hand smoke

### **Pain**

As you heal, you may have some pain, numbness, tingling and weakness in your legs. Call the Spine Clinic if you notice a major change in your symptoms.

### **Pain Control**

To manage pain after surgery:

- Ice the incision area for 20-30 minutes several times a day or after increased activity. Use a towel between the ice pack and skin to avoid harming your skin.
- Reduce overall activity for 48 hours.
- Take opioid (narcotic) pain medicine as prescribed. If the medicine is not helping control your pain, call the clinic. **Do not** increase this pain medicine without talking to your doctor.
- You can take anti-inflammatory medicine (ibuprofen, Aleve<sup>®</sup>, aspirin, Diclofenac, etc) right away.
- You can take Tylenol<sup>®</sup> (acetaminophen) right away. **Do not** take over 3000mg within 24 hours.
- If you were taking Gabapentin/Neurontin before surgery, you should keep taking it unless you were told to stop.

**Refills**

You should be able to taper off all narcotic pain medicine within 4-6 weeks. If you need a refill, please call the clinic 2-3 business days before you need the refill. Please tell us the pharmacy where you want to pick it up.

**Constipation**

Please read the *Health Facts for You* on constipation found in the Postoperative Spine Surgery Packet.

**Follow-Up****Future Clinic Visits**

Your first clinic visit will be 2-3 weeks after surgery to remove sutures or staples. A 6-week post-op visit will be scheduled to check healing and symptoms. All other clinic visits will be determined by your doctor.

**When to Call**

- Increased pain, redness or swelling around the incision
- A change in the amount, color, or odor of drainage
- Redness, warmth, or pain in your calf
- A fever over 100.5 F for 24 hours
- A constant headache that changes between sitting, standing and lying down
- New chest pain or new problems breathing
- Problems urinating or losing control of your bladder or bowel movements

**Who to Call**

Spine Clinic

Monday through Friday, 8 am and 5 pm  
**(608) 265-3207**

Nights, weekends and holidays, call the paging operator at **(608) 262-0486**. Ask for the “spine resident on call.” Leave your name and phone number with the area code. The doctor will call you back.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

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 © 12/2021 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#4466