

## What to Expect After Your Child's Spinal Fusion

### **Day of Surgery: Pre-Op**

Go to the American Family Children's Hospital on the 3<sup>rd</sup> floor. You will be guided to a room to get ready for surgery. Your orthopedic surgeon and a pediatric anesthesiologist will meet with you before surgery to answer any questions.

Your child will have blood drawn and take pain medicine while waiting in this room.

Talk with the anesthesiologist if you want to go into the OR until your child falls asleep.

### **Day of Surgery: Post-Op**

Your child will wake up in the recovery room. Your child will have a urinary catheter, IVs, and drains that are placed while your child is asleep in the OR.

Pain medicine is given through the IV. It is managed by a pediatric anesthesiologist.

Your child is moved to Care Unit P7 and will be closely watched until discharge.

Your child starts with ice chips and sips of clear liquids. We urge chewing gum to promote normal bowel function.

Your child should begin rolling from side to side (log rolling) every 2 hours. At first, they will get help learning how to do this by a physical therapist (PT). A few hours after surgery your child will sit at the side of the bed and stand if able. Nurses will help you.

Your child receives antibiotics while tubes and IVs are in place to prevent infections.

Your nurse will teach you how to do incentive spirometry (IS). This is done every hour to help your child take deep breaths. Sometimes children have a fever after surgery. Using IS can help prevent this.

Your child will get IV fluids until able to drink enough fluids.

### **Post-Op: Day 1**

The IV medicine is stopped when your child can eat a regular diet. This is about 24 hours after surgery. Keep chewing gum.

After the IV medicine is removed, your child will take scheduled oral acetaminophen (Tylenol), and as needed oral oxycodone. Your child will also be able to take valium if needed for muscle spasms and an IV medicine ketorolac that works like ibuprofen to decrease swelling. Gabapentin is another medicine that helps with pain control.

A physical therapist keeps working with your child to walk in the room and halls. If your child can do this, the urinary catheter is removed. A bedside commode is brought into your child's room. An occupational therapist (OT) works with your child to learn to dress without help.

Lab tests are drawn in the morning to check for anemia. We will let you know the results.

Opiate pain medicine can be constipating. Your child is given stool softeners such as Miralax or senna to prevent constipation. Your child does not need to have a bowel movement before discharge. If your child is taking oxycodone, your child will need to take the stool softeners at home.

Your child's drain is removed.

A discharge planner meets with you to talk about your home and travel needs.

### **Post-Op: Day 2 Through Discharge**

Your child's pain is controlled with oral medicine.

PT and OT will keep working with your child and teach your child to climb stairs. Try to have your child sit in a chair 2-3 times a day and walk in the halls 2-3 times a day if able. Movement can help your child heal and prevent problems.

### **Discharge Day**

Your child's pain will still be controlled with oral medicines. You are given prescriptions for pain medicine and stool softeners. A pharmacist reviews these with you at the time of discharge. Your child will need pain medicine for 3-5 weeks after surgery. Please refer to the packet called Caring for Your Child After Orthopedic Surgery to learn about weaning off pain medicines.

Keep having your child sit in a chair 2-3 times a day and walk 2-3 times a day.

Your child goes to the 2<sup>nd</sup> floor for a standing scoliosis x-ray before discharge.

Your child's dressing is changed. We will teach you how to change it and give you supplies at discharge. The dressing is changed 5 days after discharge. If it has drainage and is wet change it sooner. After 2 weeks wearing a clean t-shirt is fine instead of a dressing. Leave the steri-strips on and let them to fall off on their own.

Your child's nurse will remove all IVs right before discharge.

A final discharge time is set to help with your travel time.

Discharge instructions are reviewed by your nurse. A follow up visit is scheduled in 6 weeks with your surgeon. If there are any concerns before this visit, please call the clinic, **(608) 263-6420**.

### **First Day at Home**

Keep taking pain medicines and stool softeners as ordered.

Your child does not need a special bed and mattress at home. Your child is able to climb stairs so you do not need to create a special bedroom downstairs.

Make sure that your child is getting out of bed and walking around the house. This can prevent problems. Increase the amount of walking your child does every day. This is very important to help your child heal and regain strength. Your child should be able to walk with very little pain. No bending, twisting or lifting until approved by your child's surgeon. Please refer to the packet: Home Care After Scoliosis Surgery for further guidelines about activities.

Your child should not get the incision wet until 3 weeks after surgery. At 4 weeks, soaking in a tub is ok.

When changing the dressing, call the clinic if there is tenderness, redness or green yellowish drainage.

Offer healthy foods and higher calorie foods to help as your child heals.

Please contact your surgeon if your child has:

- A constant fever >100.5 F
- Pain not controlled with pain medicines
- Abnormal sense or weakness of the legs
- Large amounts and constant drainage
- Any other concerns.

Please call the clinic, **(608) 263-6420**. If you are calling in the evening or on the weekend, you will be connected with the orthopedic doctor on call.

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 © 11/2019. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7854