Care After a Lumbar Discectomy/Laminectomy

This sheet gives you general information about how to care for yourself after your procedure.

What can i expect after the procedure? it is common to have:

- 1. Pain in the lower back.
- 2. Numbness or tingling in the legs or lower back as the nerves "wake up" for 4-6 weeks.
- 3. Mild temperature <100.5 for 2-3 days is normal. After 1 week, this is not normal.
- 4. Mild drainage the first 2-3 days. Drainage after 1 week is unusual.
- 5. Pulled hamstrings sensation for 2-3 weeks.

Incision care:

- 1. Leave your dressing on a minimum of 48 hours. After 48 hours leave the incision open to air to promote healing.
- 2. Change the dressing if it gets wet or soaked with blood
- 3. Wash your hands with soap & water before changing your dressing
- 4. Do not put lotions or ointments on your incision
- 5. Check your incision every day for signs of infection. If you cannot see your incision, have someone check it for you. Most spine infections occur 7-9 days after surgery.
- 6. Check for: More redness, swelling or pain, fluid or blood, warmth, pus or bad smell, and/or a temperature over 101.5

Bathing:

- 1. Do not take baths, swim, or use a hot tub for 2 weeks. You may shower.
- 2. You may shower, but keep the dressing dry by covering it or avoiding direct spray from water. The covering over the incision (Tegaderm) is waterproof but still needs extra protection. If it gets wet, remove the dressing and leave the incision open to air.

Activity:

- 1. No "BLT": No bending, lifting over 10 lbs, or twisting the first 6 weeks. After 6 weeks, use common sense. Almost never lift greater than 50 lbs.
- 2. Avoid sitting or lying for a long time without moving. Get up to take short walks every 1-2 hours. This is important to improve blood flow and breathing. Ask for help if you feel weak or unsteady.
- 3. Try to walk 30 minutes a day. You may start by doing 10-15 minutes at a time.
- 4. Do not bend or twist at the waist. To lower yourself to pick things up, bend your knees instead of tipping your upper body forward. Use good body mechanics.
- 5. The risk of herniating your disc again is 1 in 13.
- 6. If provided with sequential compression devices, wear them as directed until your follow up appointment with your surgeon. Please wear sequential compression devices when sedentary for greater than one hour.

Managing pain, stiffness and swelling:

- 1. Put ice in a plastic bag.
- 2. Place a pillowcase between your skin and the bag.
- 3. Leave ice on for 20 minutes, 2-3 times a day.
- 4. No heat.

Driving:

- 1. Do not drive for 24 hours if you were given a medicine to relax (sedative/anesthesia) during your procedure. Most people wait 1-2 weeks before driving.
- 2. Do not drive or use heavy machinery while taking prescription pain medication.
- 3. YOU ARE RESPONSIBLE FOR SAFE DRIVING.

General instructions:

- 1. You may take over-the-counter medications such as Tylenol or Ibuprofen/Naprosyn/Mobic.
- 2. <u>Avoid</u> anti-inflammatory medication (Ibuprofen/Naprosyn/Mobic) <u>if</u> you are on blood thinners. Common blood thinners include: aspirin, warfarin (coumadin), clopidgrel (Plavix), rivaroxaban (Xarelto), apixaban (Eliquis), and Brillinta.
- 3. Please resume any blood thinners 96 hours after procedure/surgery unless otherwise directed.
- 4. If you are taking prescription pain medicine, take actions to treat constipation. Take an over-the-counter or prescription medicine for constipation such as MiraLAX once per

day. If that does not work, use a Dulcolax suppository. Senekot can also be taken twice a day for constipation that is not relived by MiraLAX alone.

Contact a health care provider if:

- 1 You have a fever over 100.5 after the first 3 days.
- 2 You have pain or weakness that lasts longer than 3 weeks after surgery.
- 3 You have more redness, swelling, or pain in your incision area.
- 4 You have fluid or blood coming from your incision after 3-4 days.
- 5 You have pus or a bad smell coming from your incision after 3-4 days.
- 6 Your incision feels warm to touch after the first week.

You may need to go to the emergency room if:

- 1. You have weakness or leg pain that keeps you from walking
- 2. You lose sensation & control of your urine and bowels (incontinence)
- 3. You have chest pain
- 4. You have trouble breathing
- 5. You have mental confusion or are difficult to wake up

Summary:

- After a lumbar discectomy/laminotomy, it is common to have numbness or tingling in the legs as the nerves "wake up". Be patient, this will slowly go away over time.
- Be sure to check your incision every day for signs of infection.
- Avoid twisting & bending for the first 6-8 weeks. Do not lift more than 10 lbs the first 6 weeks. Six weeks and beyond, use your common sense.
- Try to walk 30 minutes a day.
- Physical therapy is not prescribed until 8 weeks after surgery.
- Not all patients need physical therapy.