

PREPARING FOR SPINE SURGERY

1. Preparing Your Home Before Surgery

Here are some things you can do to your home to make your recovery from surgery much easier:

- Place the telephone in a convenient area, such as near the bed or chair.
- Prepare food or purchase easy-to-prepare foods.
- Identify a person who will be able to help you with shopping and other chores.
- Move food and cooking utensils to easily reachable counter tops to avoid bending.
- Place shoes, clothing and toiletries at a height where you can reach them without excessive bending.
- Remove or secure any throw rugs so you won't trip on them.
- If your doctor has asked that you stay on one floor of your home for a period of time after surgery, make appropriate arrangements.

2. Equipment Needs

Bracing

Patients having a fusion procedure will be fitted with a cervical collar or lumbar brace while in the hospital. Cervical braces may include a soft foam collar or a more supportive plastic brace. In some cases braces are worn only as needed for comfort and in other cases are recommended at all times after surgery. Your surgeon will discuss the proper use of your brace with you in the hospital. Lumbar braces are provided for all lumbar fusion operations and will be given to you prior to discharge. Lumbar corsets are to be used for comfort and may be worn as desired. For some patients, a more supportive plastic brace may be prescribed. If this is the case

then instructions for usage will be discussed with you prior to your discharge from the hospital.

Medical Equipment

While you are hospitalized, your surgeon may choose to order certain equipment for you to use at home. In the hospital, you may be seen by therapists and nurse case managers who will arrange for canes, walkers, bedside commodes, hospital beds, and crutches as needed. Insurance coverage for such equipment may vary depending upon your insurance provider and may also be associated with specific time limitations. The case managers at the hospital will check your benefits and discuss specific coverage at that time. It is wise to check with your insurance company to see if they cover durable medical equipment (DME) prior to your surgery. For patients having a lumbar fusion surgery, a walker with wheels and 3 in 1 commodes are commonly recommended. Patients having neck surgery rarely need any additional assistive devices. If medical equipment is needed, it will be ordered and delivered to you prior to discharge or directly to your home. Again, if needed, this will be discussed with you by the nurse case manager during your hospitalization.

3. Transportation Home

You may travel home safely from the hospital by car. Patients who have recently had surgery are not allowed to drive because of the use of anesthesia and pain medications. Once you are home, we recommend that you do not drive until you are fully

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recovered from your procedure. You may ride as a passenger in the car, but avoid driving for at least two weeks and until you feel that you can do so safely. If you have been given a cervical collar, it is important that you use extra caution when driving. If you are traveling for over an hour, it is recommended that you take frequent breaks to stand, walk, and stretch. This can help to eliminate the stiffness and pain which may occur from sitting in one position for too long. If you have any specific questions about driving, please ask your doctor prior to doing so.

4. Medication

In general, blood thinning medications, including aspirin, should be stopped seven days prior to your surgery. Non-steroidal anti-inflammatory medicines (NSAIDs) such as Ibuprofen, Voltaren, Celebrex, or Indocin, should also be stopped at least five days before your surgery. If you take vitamin E capsules, you should also discontinue this five days before surgery. Patients with cardiac or vascular disease who take blood thinning medications such as Coumadin, Warfin, or Plavix will also need to discontinue for surgery, please speak with your doctor directly to find out when to stop these medications prior to surgery. If you are not sure which of your medications need to be stopped, check with your doctor. You may take extra strength Tylenol for pain relief or any prescription pain pill up until the day before surgery. On the day of surgery, please bring with you a list of your routine medications with doses and when you take them.

5. Smoking Cessation

We strongly advise complete nicotine cessation prior to any surgery. Health risks of nicotine include

cancer, pulmonary disease, stroke, cardiovascular disease, and myocardial infarction (heart attack.) Many studies have shown that nicotine interferes with the healing of your skin, muscles, and bones. It also makes healthy discs degenerate at a faster rate. Nicotine can increase your perception of pain and decrease the chances of successful treatment for your spine. If you do smoke or use nicotine products, it is important that you do not use the products for at least three months prior to your surgery, and remain off of them for at least three months after surgery. If you are interested in additional information regarding nicotine cessation, please talk to your health care provider at The Virginia Spine Institute.

6. Medical Doctor

Your spine surgeon may ask you to visit a medical doctor prior to your surgery in order to ensure that they feel you are healthy enough to under-go the proposed surgery. This medical doctor may be your family physician, an internist, or a specialist. It is important to evaluate your health status prior to surgery. After surgery, you should schedule an appointment with your medical doctor to review your health and current medication list.

7. Preadmission Testing and Evaluation

As part of the routine preparation for surgery, you will schedule an appointment to have a preadmission evaluation at the hospital, which may include some or all of the following:

- Pre-registration for surgery **
- Anesthesia interview
- Blood and urine tests
- Electrocardiogram (EKG)
- Additional patient education
- Blood donation

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If blood donation is recommended by your surgeon, information will be provided to you when you schedule surgery as to how to arrange this. Blood can be donated in the weeks prior to your surgery at Reston Hospital. If blood donation is recommended by your surgeon, information will be provided to you when you schedule surgery as to how to arrange this. It is recommended that patients donating blood take iron tablets. This is typically started one week before your first blood donation and continued until surgery. Iron tablets may cause constipation and it is recommended that you use an over the counter stool softener while taking iron supplements.

8. Before Your Surgery

It is important that you do not eat or drink anything after midnight the night before your surgery. You are allowed to take your usual medication on the morning of surgery with a small sip of water. It is recommended that you remove your rings, including wedding bands, the night before surgery, as your fingers may be swollen in the morning, making them difficult to remove.

9. What to Bring to the Hospital

For your comfort, you will want to bring your own toiletries to the hospital. Also pack underwear and comfortable, loose pajamas or a nightgown. You may also want to bring a robe (not floor length), and slippers or soft, low-heeled shoes with closed backs, such as sneakers, walking shoes or loafers. Please do not bring any valuables to the hospital. If you have equipment such as a walker, commode or long handled grabbers, you may want to have someone bring them in for you after surgery. If you do bring your own equipment to the hospital, please label the items with your name.

10. The Day of Your Surgery

The day of surgery you are asked to report to the patient registration area 1 ½ hours prior to the time of your surgery. One visitor may accompany you while you are in the holding area. To prepare for surgery, the nurse will ask you to remove your clothing (including underwear and socks) and to put on a hospital gown. In addition, you should remove any contact lenses, dentures, wigs, hairpins, jewelry, or artificial limbs. Please give these and other personal belongings to your visitor to hold while you are in surgery and until you are in your assigned room. If you are by yourself, you will be given a bag for your belongings and your personal belongings will stay with you on your stretcher. You may be asked to go to the bathroom to empty your bladder prior to surgery, however if you are having a fusion procedure, a catheter will be inserted once you are asleep in the operating room. Before entering the operating room, you will be seen by the anesthesiologist and a nurse will begin an intravenous (IV) line in your arm. Antibiotics will be started intravenously and continued after the operation to help decrease the risk of infection. You will be seen by your surgeon and he will place a mark over the area which will be operated on. A sedative medication will then be given and we will transport you to the operating room on a stretcher. At that time, the nurse will direct your visitor to the surgical waiting area where they can sit during your surgery. When the surgery is over, your doctor will speak with your visitors there.

Once you are in the operating room, you will be given the anesthesia that you and the anesthesiologist have discussed. The sights and sounds which seem unfamiliar to you are just part of the routine. If you have specific questions, the nursing staff there will be happy to answer them. Your surgery may take several

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hours. This period includes the skin preparation, positioning and anesthesia time, in addition to the surgery itself. After your surgery is complete, you will be taken to the post-anesthesia care unit (PACU) or recovery room to awaken from your anesthesia. Patients are typically in the PACU 1-2 hours. In the PACU, a nurse will check your vital signs (heart rate, blood pressure, temperature and respiratory rate). A surgical team member will tell your family when the surgery is over and the doctor will sit with them to discuss the findings. Your surgeon will also see you and explain the operation to you, however patients commonly do not remember this initial conversation as the anesthesia medicines can make it difficult to remember what is said.

Remember our pledge to you: Surgery does not have to be an emotionally trying experience. Trust in the professionals at The Virginia Spine Institute and we will get you back to a healthy and functional lifestyle!

*** If your surgery is at Reston Hospital Center, the registration desk is located through the revolving doors of the Pavilion Building. Free valet parking is available. After you go through the doors, go straight and the registration desk is on the right hand side with a sign in sheet.*