Thank you for choosing us for your spine care. The doctors and staff at the Washington University, Barnes-Jewish Hospital, and Barnes-Jewish West County Hospital will serve as your care team. Our highly specialized health care team will work with you to provide excellent care. We are committed to making a correct diagnosis and developing your treatment plan to ensure that you receive the highest quality and safest care possible.

You have talked with your doctor and decided to have spine surgery. Please read your entire Journey Guide. It will help you prepare for surgery.

Each part of this guide will help you live a healthy and more active life. During your hospital stay, we will help you recover from your spine surgery in a healthy way. By reading this guide, you are already on a journey back to enjoying your favorite activities.

Since 1992, U.S. News & World Report has placed Barnes-Jewish Hospital and its partners, Washington University Physicians, on the elite Honor Roll of America’s Best Hospitals. Experience the best — you deserve it!
If you have any questions at any point in your journey, contact:

Name: ______________________________________

Phone Number: ______________________________________
YOUR JOURNEY TIMELINE

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Getting healthy for surgery ................................................................. 5
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1-2 weeks before surgery ................................................................. 9
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GETTING TO KNOW YOUR CARE TEAM

Your care team is here to provide excellent world-class health care. We are committed to helping you during your entire journey.

<table>
<thead>
<tr>
<th>Spine Doctor and Surgical Care Team</th>
<th>Registered Nurse (RN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your doctor and surgical care team will perform your surgery and guide your care during your hospital stay. After surgery, you will see them in the office for follow-up care.</td>
<td>Your nurses are trained in spine care and will follow your doctor’s plan for your recovery. They will teach you how to stay safe and healthy during every step of your recovery.</td>
</tr>
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<table>
<thead>
<tr>
<th>Anesthesia Team</th>
<th>Physical Therapist (PT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>An anesthesia doctor, certified nurse anesthetist, or nurse practitioner will review and care for your surgery needs. This team is trained to keep you safe during surgery and in recovery. They will also help you manage your pain. You will meet a member of this team at your surgical evaluation at the Center for Preoperative Assessment and Planning (CPAP).</td>
<td>Your physical therapy team will work with you to increase your strength after surgery. This team has special training to help you return to a healthy and active lifestyle.</td>
</tr>
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<tr>
<th>Nurse Practitioner (NP)</th>
<th>Occupational Therapist (OT)</th>
</tr>
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<tbody>
<tr>
<td>Your nurse practitioner will work with your spine doctor to manage your care. They will see you after your surgery and be your main contact during your hospital stay.</td>
<td>Your occupational therapy team will teach you how to be independent at home. They will help you learn how to safely complete daily activities, like dressing and bathing.</td>
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<table>
<thead>
<tr>
<th>Case Manager</th>
<th>Concierge-available at Barnes-Jewish Hospital</th>
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<tr>
<td>Your case manager is trained as a registered nurse or social worker. They will work with your care team to best meet your needs for going home. They will also help you with insurance questions and home equipment.</td>
<td>The concierge helps to ensure that you and your loved-ones have an excellent experience during your hospital stay. They will visit during your stay and explain the available hospital services. These include computer use, notaries, local restaurants/attractions, transportation, and navigating the medical campus. If needed, they will help find lodging for your loved ones during or after your stay.</td>
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GETTING HEALTHY FOR SURGERY

Take steps to feel good about your health – starting now! This checklist will help you to be healthy before, during, and after surgery. Please check off each box when complete.

☐ Choose a “coach” for your care journey

Your coach will play an important role in your recovery. Select a spouse, family member, or friend who can be by your side during your entire care journey.

Please choose your coach based on the following:

• Your coach must:
  - Be in good physical condition.
  - Come to your office visits, especially the visit right before your surgery.
  - Stay with you 24 hours a day after you are discharged from the hospital for up to 1-4 weeks, depending on your surgery.
  - Provide transportation to and from surgery and doctor visits.
  - Communicate clearly with your doctor’s team as needed.

• Your coach will assist you with:
  - Medication and pain management.
  - Personal care such as bathing and using the bathroom.
  - Household chores, meal prep, etc.
  - Position changes, including getting in and out of bed.
  - Following all instructions from your doctor’s office including exercises and restrictions.

• Your coach will:
  - Motivate you to be your best during your journey.
  - Help you stay on track and reach your recovery goals.
  - Be a second set of ears to learn with you.
  - Help you become independent faster.
  - Learn the proper exercises from PT/OT and encourage these exercises.

☐ Other doctors involved in your care

See all doctors involved in your care and tell them about your spine surgery. Your spine doctor may require that you get medical clearance for surgery. They may also need you to see other doctors such as a heart or lung doctor. Please tell your spine doctor if you are being treated by any other doctors.

☐ Activity

It is important that you stay active before your surgery. Walking, swimming, and deep breathing exercises are key for a faster recovery.

☐ Teeth

Visit the dentist. Dental problems need to be addressed before surgery. Let your spine doctor know if you have any dental problems or concerns.

☐ Nutrition

It is important to eat well-balanced meals during your journey. Seeing a registered dietician will help you reach and maintain a healthy lifestyle. For more information, call the BJC WellAware Center at 314-286-0525. This is a self-pay service, and there is a charge for the consult.

☐ Diabetes

It is important to control your blood sugars during your journey. This will help you heal faster and prevent wound problems and infection. For more information, call the Washington University Diabetes Center at 314-TOPDOCS (314-867-3627) or toll-free at 866-867-3627.

☐ Stop smoking

You must stop smoking. Smoking increases your chance of having a failed back surgery. When you quit smoking, your body will recover faster and the risk of infection is less. Talk with your doctor or nurse if you are finding it hard to quit. They will be able to help you with resources.

☐ Going back to work

Ask your spine doctor’s office when you are likely to return to work. Your care team will help you prepare to go back to work safely.

Being prepared for surgery will improve your surgical journey!
GETTING READY FOR SURGERY

The surgical evaluation visit is an important part of your journey.

SURGICAL EVALUATION VISIT AT THE CENTER FOR PREOPERATIVE ASSESSMENT AND PLANNING (CPAP)

☐ You and your coach will meet with the Anesthesia team at your CPAP visit.

☐ We will schedule your visit for 1-4 weeks before surgery.

WHAT TO BRING

☐ Spine Journey Guide

☐ Insurance card

☐ Advanced Directive (if you have one)

☐ Complete list of your health history and past surgeries

☐ Complete list of your current medicines including prescriptions, over-the-counter, vitamins, and herbal supplements

☐ Copy of your pacemaker card including make/model and settings (if you have one)

WHAT TO EXPECT

☐ Health Review
  • We will talk about your health history and past surgeries.
  • Please tell us if you have ever had a problem with anesthesia.
  • You will receive a health exam that includes blood tests, EKG, and other tests.

☐ Medicines
  • We will talk about your current medicines.
  • You will be given instructions about which medicines to take and which ones to stop before surgery (It is important that you follow these instructions).
  • You will be given surgical soap to shower with before surgery.

MAPS AND PATIENT INFORMATION

Barnes-Jewish Hospital-South Campus, barnesjewish.org/Patients-Visitors/Directions-and-Maps
Barnes-Jewish West County Hospital, barnesjewishwestcounty.org/Patient-VisitorInformation/Directions-Maps
YOUR MEDICATIONS (Medicines or medicine)

Please list all of your medicines below. Please include all prescriptions, over-the-counter, vitamins, and herbal supplements. Bring this list with you to your CPAP visit.

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>DOSE (STRENGTH)</th>
<th>HOW MANY TIMES A DAY</th>
<th>WHY DO YOU TAKE THIS MEDICATION</th>
<th>PRESCRIBING DOCTOR</th>
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## SET UP YOUR HOME CHECKLIST

- Make meals ahead of time that can be reheated.
- Put items that you use often in places that can be easily reached.
- Stop your mail or have someone take care of your mail.
- Set up someone to take care of your children and pets.
- Set up someone to help you with household chores such as yard work, laundry, and housecleaning.
- Make sure all stairs at your home have a sturdy railing.
- Make clear pathways. Remove anything in the way of your walking. This includes loose rugs, uneven surfaces, wires, and cords. These items could cause you to slip or trip.
- Make sure all walking areas are well lit. If needed, add extra light to see.
- Have a chair with armrests to help you get up from a sitting position. Make sure the chair is sturdy and not too low.
- Make sure your bed is not too low, no waterbeds.
- Check your bathroom — consider a shower chair, raised toilet seat, and hand-held shower head.
- Plan to be independent after surgery. Borrow or buy items to help you. To review equipment go to page 17.
Special Alert: It may be time for you to stop taking certain medicines before surgery. Please review your instructions.

2 WEEKS BEFORE SURGERY

☐ What medicines do you stop taking?
  • Non-steroidal anti-inflammatory medicines (NSAIDs)/arthritis medicines such as: Advil®, Aleve®, Ibuprofen®, Motrin®, Indocin®, Naprosyn®, Celebrex®, Meloxicam®, etc.
  • Please check with your nurse about the exact time frame for stopping aspirin products and blood thinners such as: Coumadin®, Xarelto®, Plavix®, etc.

☐ Do you have an infection?
  • Call your spine doctor’s office if you feel sick or think you have an infection of any kind.
  • Signs of infection are:
    - Chills and sweats.
    - A change in cough or new cough.
    - Sore throat or new mouth sore.
    - Redness, soreness, or swelling in any area including teeth.
    - New onset of pain.
    - Any changes in skin, urination, or mental status.

☐ Do you have any open wounds?
  • Call your spine doctor’s office if you have any open wounds, sores, rashes, or acne.

☐ Complete the “set up your home” checklist on page 8.

1 WEEK BEFORE SURGERY

☐ Pick up your nasal ointment prescription from your pharmacy.

☐ Call your spine doctor’s office if you have any open wounds or think you have an infection.

5 DAYS BEFORE SURGERY

☐ Start the surgical soap showers. The last shower will be on the day of surgery.

☐ Start the nasal ointment and apply 2 times a day. The last treatment will be the night before surgery.

2-3 DAYS BEFORE SURGERY

☐ Continue the surgical soap showers and using the nasal ointment.

☐ Call your spine doctor’s office if you have any open wounds or think you have an infection.

☐ If you have a walker, pack it in your car to bring to the hospital. Your therapist will check this equipment and see what else you may need at home.

☐ Follow any special instructions from your spine doctor’s office or your CPAP visit.

☐ If you are not sure if you were given any special instructions, call your spine doctor’s office.

☐ Pack your bags.

☐ Complete the “what to bring” checklist on page 11.
THE DAY BEFORE SURGERY

☐ A central line IV may be placed, if your spine doctor feels it is needed.
   - The nurse will schedule this.
   - Please note: If your surgery is on a Monday, it may be placed on the Friday before surgery.

☐ Follow the instruction sheet given to you at your CPAP visit.

☐ No solid food. Only clear liquids unless your doctor has given you other instructions.

☐ Nothing to eat or drink after midnight, including chewing gum, lozenges, or water.

☐ Remove all nail polish and artificial nails.

☐ Take a surgical soap shower and sleep in clean sheets and pajamas.

☐ Do not use any lotions, powders, perfumes, or makeup.

☐ Use your last nasal ointment treatment.

☐ Complete the “What to bring” checklist on page 11.

Your spine care team is here to help whenever you have a question. Important phone numbers are included in your guide.
WHAT TO BRING TO THE HOSPITAL

- An attitude of success!
- This Spine Journey Guide.
- List of your health history and current medicines.
- Your insurance card.
- Your photo ID.
- A prescription card (if you have one).
- A credit card to pay for discharge medicines and co-pays (leave this with your coach).
- Loose-fitting clothes for discharge, such as t-shirts and drawstring or elastic-band pants.
- Comfortable non-skid shoes and socks (No flip-flops, sandals, or Crocs).
- Personal toiletry items.
- If you sleep with a breathing machine for obstructive sleep apnea, you must bring it with you.
- Phone numbers of people you may want to call during your stay.
- A walker if you have one.
- A spine kit if already bought.

WHAT NOT TO BRING TO THE HOSPITAL

- Jewelry
- Valuables such as a purse, wallet, and large amounts of money.
- Cell phone – It is best that you leave your cell phone at home or give to your coach.
- Medicines from home – your care team will give you all medicines you will need during your stay.
- You will need your home medicines after you are discharged.
THE DAY OF SURGERY

Please check off each box when complete.

Before you arrive
- Take a surgical soap shower in the morning.
- Do not use any nail polish, lotions, deodorant, makeup, perfume, or body sprays. Come “natural”.
- Take any medicines that you were instructed to take the morning of your surgery with a small sip of water.
- Follow any special instructions given to you for the morning of surgery.

Before going into surgery
- We will review your medicines and health history with you.
- We will start an IV in your arm.
- Your anesthesia doctor will talk about your anesthetic and the plan to control your pain after surgery.
- A member of your surgical care team will meet with you to review the surgical plan. They will mark on your body where the surgery will occur.
- Give your coach any last minute items such as: glasses, dentures, hearing aids, etc. for safekeeping.
- You will be given medicine for comfort before going to the operating room.

During your surgery
- Throughout your surgery, your surgical care team will take excellent care of you. They will monitor your breathing, heart rate, and blood pressure.
- A catheter to drain urine from your bladder may be placed.
- Updates about your progress will be given to your coach and loved-ones.

Right after surgery
- You will wake up in the recovery room after surgery.
- Some patients may wake up in the intensive care unit instead.
- Highly trained nurses and an anesthesia doctor will monitor you. They will keep you safe and comfortable.
YOUR HOSPITAL STAY

Have your coach at your side to learn how to help you at home. The best time to visit is from 11 a.m.-9 p.m.

What to expect:

- When you arrive to the hospital floor, your care team will stop by to meet you and answer any of your questions.

- You will be able to call your care team at all times by using your hand-held call light. Your nurse will show you how this works by pushing one button.

- Your blood pressure, heart rate, temperature, oxygen levels, IV fluids, and progress will be checked often.

- You will have a dressing covering the incision where you had surgery. You may have a drain coming out of your incision that will be connected to a container. This will help with swelling and lower the risk of infection.

- Your catheter, used to drain urine from your bladder, will be checked often.

- Swelling is common. You may have elastic stockings and/or leg pumps to help blood flow.

- Your nurse, physical therapist, and/or occupational therapist will help you get out of bed.

- Your safety is our biggest concern. If you are alone and want to get up, please contact us with the call light.

- **DO NOT** get out of bed on your own!

- Your surgical care team and nurse practitioner will visit you often to monitor your overall health and recovery.
It is important that you are active in your own care!

Pain management
It is normal to have pain after surgery. We will ask you to rate your pain on a scale of 0 to 10 (see chart below). We will work with you to control your pain. Please let us know when your pain starts so we can adjust your medicines to make you more comfortable. Please contact us with the call light any time you need help.

PAIN SCALE

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No Pain</td>
</tr>
<tr>
<td>1</td>
<td>Mild Pain</td>
</tr>
<tr>
<td>2</td>
<td>Moderate Pain</td>
</tr>
<tr>
<td>3</td>
<td>Severe Pain</td>
</tr>
<tr>
<td>4</td>
<td>Very Severe Pain</td>
</tr>
<tr>
<td>5</td>
<td>Worst Possible Pain</td>
</tr>
</tbody>
</table>

* Activities of Daily Living (ADL) such as: sleeping, eating, mood, walking, enjoyment of life relationships

PCA Information
Your spine doctor may order a PCA (Patient-Controlled Analgesia). This special pump will give you your pain medicine.

- The pump will be at your bedside.
- The medicine is controlled by the push of a button.
- The button is only for your use. It is not to be pushed by the nurse, your coach, or loved-ones.
- The medicine goes into your IV line. It has settings that prevent you from getting too much medicine.

Preventing blood clots
- Your care team will decide what treatments will be used to help prevent blood clots. This may include elastic stockings, leg pumps, or medicines.
- Your care team will encourage out of bed activities. While in bed, move your legs, feet, and ankles to keep your blood flowing. These activities will help prevent blood clots from forming in your legs.

Preventing pneumonia
- You will be given an incentive spirometer (IS). This device will help keep your lungs healthy by encouraging air movement and airflow. Your nurse will show you how to use it. Your IS should be used 10 times every hour while you are awake. You need to continue using it at home. Please bring it home with you!
- It is important to be out of bed and moving. Movement helps you take deeper breaths and creates better airflow to your lungs.
Your nutritional needs

- Your stomach may be upset due to anesthesia or pain medicine. Your nurse will help you decide how quickly you can start eating and drinking.
- It may be a few days before you have a bowel movement. Anesthesia, pain medicines, and less activity can slow the digestive system and cause constipation. Your doctor will order a stool softener and/or laxative.
- Once you are able, drink plenty of fluids (water is always best). Eat whole grains, fruits, and vegetables.
- Cervical patients may find it hard to swallow for the first few days or weeks. This is normal and will go away. Soft foods are easier to swallow. Avoid dry foods. Please let your care team know if you cannot swallow your pills or have a hard time swallowing liquids.

Healing by movement

- Your care team will help you start moving after surgery. This helps your breathing (airflow), circulation (blood flow), and digestion.
- Right after surgery, it may hurt to move. Movement will help decrease your pain, help you heal faster, and reduce the risk of problems. It is proven that when you move as soon as possible after surgery, your recovery will be better.
- Your care team will help you sit up and/or get out of bed. This occurs soon after your surgery.
- Please use your call light any time you need help. Your safety is our biggest concern.

Physical and Occupational Therapy

- After surgery, you may meet with a therapist. They will teach you how to get in and out of bed, walk, climb stairs, and how to do certain exercises safely. The occupational therapist will work with you on your activities of daily living.
- When you leave the hospital, you should be able to SAFELY do the following:
  - Follow Spine Precautions.
  - Get dressed.
  - Get in and out of bed.
  - Get in and out of a chair.
  - Get in and out of a car.
  - Do exercises from your OT/PT to increase strength.
  - Have balance and be mobile.
  - Climb up and down stairs.

The use of a walker or other equipment may be needed. You may also need help from your coach with some activities. Safety is Key!

Remember: Follow the spine precautions given to you by your care team!
Planning your discharge
It is important to us that your journey is successful. Our goal is to get you back to your active lifestyle safely. As you recover, your care team will discuss when it is safe for you to leave the hospital.

Together your care team will talk about:
- Your progress.
- Your strength and endurance.
- Your support resources.
- Your needs after discharge.

Your care team will work with you to determine your needs at home for a safe recovery. They may suggest an inpatient rehabilitation center. Your care team may also suggest equipment such as a spine kit, walker, brace, etc.

At discharge
- Your nurse will give you discharge instructions from your spine doctor. They will review them with you and your coach. **If you do not understand any of the instructions, please ask questions so you are sure about what to do when you get home.**
- Your nurse will also give you discharge prescriptions. You can get these filled at your regular pharmacy. BJH has a mobile pharmacy as well. The mobile pharmacy can bring the prescription medicines to your hospital room before you leave. You will need to pay for these with a credit card.
- Physical or occupational therapy will give you copies of your home exercises.
- You will be taken in a wheelchair to the patient pick-up area. Your coach or loved-one may pick you up there.
- If you are going to a rehabilitation center, your social worker or case coordinator will arrange your transportation.
SAFETY ITEMS AND EQUIPMENT
The following is a checklist of safety items and equipment you may need to be independent at home.

You may want to call your insurance company about getting coverage for the following items before buying or renting.

- **Spine kit - needed for most fusions, thoracic and lumbar patients (cervical patients may not need this)**
  - You may buy a spine kit at your spine doctor’s office or any medical supply store. If your surgery is at BJH, you can buy a kit while you are in the hospital. You will need to pay for the kit.
  - The spine kit includes a sock aide, dressing stick, 32 inch reacher, elastic shoelaces (2 pairs), long-handled sponge, long-handled shoehorn, and a toilet tong.

- **Wheeled Walker - PT/OT will evaluate your need**
  - If you do not have a walker, do not buy one on your own. During your stay, your care team will help you get equipment fitted just for you.
  - If you own this equipment, bring it with you to the hospital. PT/OT will check it and make sure it is right for you.

- **Other Equipment - If you have spine precautions after surgery, you may need the following:**
  - **Elevated Toilet Seat**
    - Raised toilet seat with handrails and locking clips. Make sure it fits your style of toilet.
    - **OR**
      - Commode/bedside commode.
  - **Shower/Bench chair**
    - Fits in your tub/shower.
  - **Brace equipment**
    - This will depend on the type of surgery. Not all surgeries require a brace.
    - Your spine doctor’s office will provide the brace. It will be given to you during your spine doctor’s visit or while you are in the hospital. You will be given instructions on its use.
YOUR JOURNEY HOME

Call 911 immediately if:

- Chest pain/pressure or sharp pain with deep breaths.
- Shortness of breath.
- Rapid heart rate greater than 150 beats per minute.
- Sudden onset or long lasting, severe headache.
- Fainting spells.
- Blood that appears when vomiting, coughing, or with a bowel movement.

Do not drive yourself to the emergency room.

Call your spine doctor right away for the following:

- Temperature above 101°F, (38.5°C).
- Increased swelling in your legs or feet that won’t go away.
- Increased pain that is not well controlled by your pain medicine.
- Incision is red or warm.
- An opening in your incision.
- New or increased drainage from your incision.
- Drainage from the incision that has an odor.
- Increased numbness or tingling in your arms or legs.
- Pain, tenderness, warmth, or swelling in either calf.
- New nausea, vomiting, or diarrhea.
- Increased worry, anxiety, or concerns about any issue.
- Any problem that was treated by another doctor or in an Emergency Room.
OUR GOAL IS FOR YOU TO BE SUCCESSFUL AND READY TO RETURN TO THE ACTIVE LIFESTYLE YOU HAVE BEEN WISHING FOR.

Movement and Activity
Expect to feel weak and tired when you first get home. You should feel a little stronger each day.

- Keep moving as much as you can without increasing your pain.
- Continue to follow spine precautions given to you by your care team.
- Do not lift anything over 10 pounds (gallon of milk) until your spine doctor clears you.
- Walking is the best exercise. It is best to do shorter, more frequent walks. Take 6-8 walks a day that are at least 5 minutes long.
- Walking is the only exercise that you can do until cleared by your spine doctor. Use your walker until your spine doctor or therapist tells you that you no longer need it.
- Wear comfortable, non-skid shoes. Do not wear back-less or toe-less shoes. No flip-flops, sandals, or Crocs.
- Increased pain for more than 2 hours after an activity often means you have done too much, too soon. Pain is a warning sign to slow down and pay attention to your posture and movements.
- Do not sit for long periods of time (more than 1 hour at a time). Prevent stiffness by getting up, walking around, and changing positions often. If you are traveling distances, get out of the car every 2 hours and walk.
- Do not sit in low chairs that can make it hard to get up.
- Stand up slowly to prevent feeling faint or dizzy.
- You should not participate in a “formal” physical therapy program until cleared by your spine doctor.
- Pool exercise is encouraged after 6 weeks. You may walk in the pool or do gentle breaststrokes. No lakes, rivers, or oceans for 3 months after surgery.
- You may stop wearing your support stockings when you get home, unless you are having swelling in your legs. If swelling continues, call your spine doctor.
- Keep a diary to record your journey. This includes your activities, pain medicines, bowel movements, etc.
- If you have any questions about your recovery, please contact your spine doctor’s office. Your care team is here to help any time you have a question.

Caring for your Incision
- It is important to have someone check your incision 2 times a day. Call your spine doctor’s office if you have any redness, warmth, odor, increased drainage, or opening of the incision.
- You may have a bandage or dressing covering your incision. Change this bandage as instructed by your care team.
- Always wash your hands right before and right after you touch your dressing. Hand washing helps prevent infection and keeps you healthy.
- Your incision may have stitches, glue, or Steri-Strips (small tape strips). If you have Steri-Strips, allow them to fall off on their own. If they have not fallen off after 2 weeks, you may remove them.
- Do not apply any creams or lotions to your incision.
- Do not soak in a bath, hot tub, or pool until your spine doctor has cleared you.
YOUR FOLLOW-UP VISIT

After surgery, you will have a follow-up visit with your spine doctor or someone from your surgical care team. The purpose of this visit is to talk about your progress and the next steps of your treatment plan. During this visit, your care team will:

- Take an x-ray of your spine and talk about your progress.
- Do a physical exam.
- Ask you questions about how well you are following your discharge instructions and recovery plan.
- Review your medicines, pain management, and exercise program.
- Talk about your daily activities, which include returning to work.
- Discuss the next steps of your treatment plan.

Pain and medicines

Your care team will give you a plan to manage your pain when you go home.

- Start by taking your pain medicine as prescribed. As your pain lessens, take less pain medicine.
- If you were given pain medicine at discharge, do not take any pain medicine you may have at home.
- Try other ways to manage your pain:
  - **Activity:** movement and activity helps lessen pain.
  - **Distraction:** focus on something other than your pain.
  - **Relaxation:** find a quiet space, close your eyes, and concentrate on your breathing.

Constipation (trouble with bowel movements)

Pain medicine, along with decreased activity, can slow down normal bowel movements. Constipation is common. Your spine doctor will prescribe a stool softener and/or a laxative for you. Some patients may also lose their desire for food after surgery.

- Try to eat small and frequent healthy meals.
- Keep fluids in your body. Water is the best choice.

Sleeping

You may have trouble sleeping for a few months after surgery. Your sleep will improve over time. Avoid sleeping pills because they can have side effects. It is a good idea to take your pain medicine 1 hour before you go to bed. This will help you relax, control your pain, and help you go to sleep easier.

Cervical patients — for the first few days, you may need to sleep with your head elevated. You can do this in bed with pillows or upright in a recliner. Please check with your spine doctor’s office for time-frame.

Driving

Have your coach or loved-ones drive you until you are comfortable to drive on your own.

Please follow these guidelines:

- You may not be taking your prescribed pain medicines any longer.
- You must be able to walk without support.
- You must feel ready to safely drive.
- You need to be able to turn your head comfortably and safely (for cervical patients).
STAYING HEALTHY CHECKLIST

☐ Exercise
- Walking is the best exercise. Start with short frequent walks and increase as tolerated.
- Avoid high impact exercise such as running, weightlifting, etc. until your spine doctor clears you.

☐ Eat healthy
- Eat a balanced and healthy diet.
- Managing your weight will keep your spine healthy.

☐ Stay smoke-free
- Smoking affects your blood flow. This is harmful to your bones and soft tissues.
- Being smoke-free is preventive medicine.
- Try to avoid second-hand smoke.

☐ Live a healthy lifestyle
- Improve your overall health by getting regular check-ups.
- Know your blood pressure, blood sugar, cholesterol, and weight.
- It is important to stay healthy.

We hope you are able to use this journey guide as a tool for success. If you have suggestions to improve this guide, please share them with your spine doctor’s office. It is important to us that you have a well-planned and excellent journey!

Once again, THANK YOU for choosing us for your spine care!

The journey of a thousand miles begins with a single step.

Lao Tzu