



## **HOSPITAL STAY**

### **SURGERY/RECOVERY ROOM**

Spine surgery usually takes between one and six hours, depending upon the procedure. You will be in the recovery room approximately two hours afterward. Several tubes will be connected to you. A urinary catheter is used to drain your bladder, and another tube may be placed near the incision to allow drainage from the surgical site. An IV will be in place to maintain your body fluid balance. These lines and tubes are carefully monitored by your nurses, as are any dressings. You will most likely have compression boots on your legs after surgery. These are used to help your circulation and to help prevent blood clots in your legs. They are removed for physical therapy. After your activity has increased you will no longer need the boots. During your stay in the PACU/Recovery Room, the nurses will encourage you to take slow deep breaths and move your feet. If you have pain while in the recovery room, tell the nurse and you will be able to receive medication through your IV.

### **RETURNING TO YOUR ROOM**

Once you return to your room and are as comfortable as possible, your family may visit two at a time. However, we ask that they wait for about a half hour so that your nurses have time to arrange your room appropriately. Do not expect to be the life of the party. You will probably still be drowsy until the next day.

Pain following surgery is normal. Muscles and nerves take time to heal and pain from simple things, such as change of position, can occur. A patient-controlled analgesia (PCA) infuser may be connected to your IV in order to allow you to administer your own pain medication when needed. The medication is released into your blood stream. Your nurses will instruct you thoroughly prior to its use. If you have a PCA infuser, your blood oxygen level is monitored by a pulse oximeter. If your oxygen level diminishes to a certain point due to decreased aspirations, the monitor alarm will activate. This may disturb your sleep, but the alarm signals the nurse to check you. The PCA infuser is designed to control your pain. Abdominal bracing for all movement will help minimize your pain. Please inform your nurse if the pain medication that has been ordered is not controlling your pain.



## **24-48 HOURS AFTER SURGERY**

You will be reminded to use the incentive spirometer (deep breathing apparatus), 10 breaths every hour while awake and will be assisted as necessary. The nurse will also “log roll” you from side to side approximately every two hours with the aid of a “pull sheet”. You must bend your knees and brace your abdominal muscles for turning. Your nurse places a pillow between your knees for turning and supports your back with pillows when you are on your side. The surgical site drain(s) is removed either the first or second day after surgery. Intravenous (IV) feeding continues until you are passing gas (24-72 hours after surgery). At that time, you are started on a liquid diet and as this is tolerated, the IV is then discontinued. You will then be started on oral pain medication. Your therapist will stand you at the bedside and walk with you a short distance on the first day after surgery if you are able; if not you most likely will get out of bed with help on the second day. This initial attempt to get up and move about can be tiring and frustrating, but remembering to brace with your abdominal muscles and applying good body mechanics will help. Wearing a body jacket or corset and using a walker are not substitutes for tightening your abdominal muscles and using good body mechanics.

## **THREE – TEN DAYS AFTER SURGERY**

“Surgery is just one step in your rehabilitation.”

Under the direction of your physician, the therapist increases your activity each day. When you are able to walk with assistance to the bathroom, your urinary catheter is removed. Let pain be your guide as you progress with walking. Every day following surgery, you will find it easier to get in and out of bed and walk further on your own.

You will receive instruction for getting dressed, and also will begin your exercise program. These exercises are the basis for the program which you will continue to follow at home. When permitted by your physician, you may shower and wash your hair with instruction and assistance from your occupational therapist or nurse. This will depend upon incisional healing and the length of time you can tolerate standing.

Although the length of your hospital stay may vary, it is usually between one and seven days. Depending on the type of surgery you have, we expect you to be as independent and active as your pain will allow. Upon discharge we expect you to walk a block and be able to climb one or two flights of stairs. If you require medication at home it will be prescribed by your physician. The hospital nurses & therapists will provide you with postoperative discharge information.



If you are going to require help getting to or being at home, the Discharge Planner is available to assist you in this transition. She/he can arrange rental of assistive devices such as raised toilet seats and shower stools.

It is important that your family or friends have a car available to take you home. A car with a reclining seat may be helpful. If your journey is more than an hour, it is helpful to stop every 45-60 minutes, get out of the car and walk to prevent stiffness and excessive discomfort. You will be taught good, painless body mechanics for sitting. Several pillows for additional support may also be helpful. If you must recline or lie down, make sure to maintain neutral position and “don’t bend your back”.

In your home recovery, increasing walking activities is advisable, as well as continuing with the exercise program given to you at the hospital. You may sit reclining or with support, as long as you maintain neutral position with abdominal bracing techniques. If wearing a brace, continue to do so until your physician advises otherwise.

You can care for yourself at home but must not be responsible for the care of anyone else for several weeks. Avoid bending over, lifting, twisting, pushing or pulling. In short, no shopping, cleaning, yard work or driving until after we see you postoperatively. You will need to have someone available at home who can do these things for you for the first week. If you live alone, consider asking a friend or family member to stay with you, or at least have someone available to help you for several hours a day. If there is no one available, good preoperative planning and arranging will be necessary.

It is important to walk, and use good body mechanics with neutral positioning. If you flare up, you need to look at how or what you did for the answer. Stay within your limits of pain as you get stronger, smarter, more flexible and more active.

A good guide for increasing activity: If you feel 100% better, do only 10% more. This will reduce the thoughts of trying to do more too soon.

If you have questions or problems, be sure to call 840-5100.