

What to expect at home

Pain management

Follow the instructions given to you by your healthcare team for taking medicine. Some people go home taking over-the-counter medicine to manage pain, and some people go home with prescription medicine to manage pain. Your healthcare team will talk with you about what is best for you. There are other things you can do to manage pain like moving around, using an ice pack, deep breathing, and finding a distraction like music, TV and games. What works best is different for each person.

Incision care

- Wash the area gently with warm, soapy water every day in the shower
- Pat the area dry with a clean towel
- If your incision is draining, cover it with a dry gauze pad and medical tape or with an adhesive bandage (e.g., Band-Aid®)
- Once the incision is not draining, leave it uncovered
- If you have strips of tape on the incision, leave the tape on until it falls off
- If you have clear surgical glue on your incision, it will fall off in 14 to 21 days

Do NOT:

- Use hydrogen peroxide or alcohol on the incision
- Soak in a bath or get in a pool until cleared by your surgeon
- Put ointments, creams or oils on the incision for six weeks

Who and when to call for problems

Call your surgeon's office for:

- Pain that is not getting better or gets worse
- Fever of 100.4° F or greater
- Incision opens up or is bleeding
- Incision becomes redder, hard or has pus in it
- Signs of dehydration that do not get better by drinking water
- Urine (pee) is cloudy or smells very bad
- Nausea or vomiting that does not stop
- Experiencing worsening numbness, tingling or weakness
- Having extreme pain one hour after taking pain medication

Call 911 for:

- Passing out
- Sudden chest pain
- Shortness of breath that is getting worse



Notes



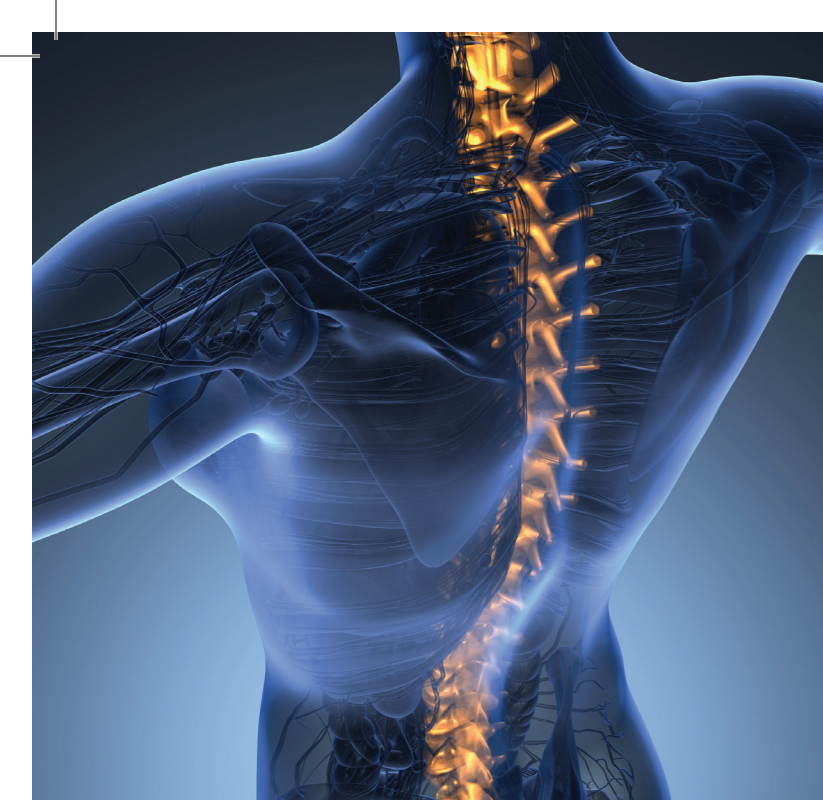
For more information, visit [BSWHealth.com/ERAS](https://www.BSWHealth.com/ERAS).

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Your spine surgery guide

Enhanced recovery after surgery (ERAS) plan





What does the spine do?

Your spine, or backbone, is your body's central support structure. It connects different parts of your musculoskeletal system. Your spine helps you sit, stand, walk, twist and bend. The spinal cord is a cord of nervous tissue that extends from the brain and passes through the spinal canal, which branches to different parts of your body.

Reasons to have spine surgery

Sometimes you may have weakness, numbness or tingling, or your back may have discomfort due to back pain, bone growth, traumatic injury, trauma or other reasons.

What is a laminectomy or spinal decompression?

A laminectomy/decompression/discectomy involves removing part of your disc, bone or vertebrae to relieve pressure on your nerves.

What is a fusion or instrumentation?

A fusion or instrumentation is a surgical technique that joins together two or more vertebrae. This procedure sometimes involves a bone graft or hardware such as screws or rods that are used to help stabilize the spine.

Prepare: Getting ready for your surgery

Today

- Drink six to eight glasses of fluids, especially water, every day before surgery
- Limit alcohol like beer, wine and liquor. Stop drinking alcohol 24 hours (one day) before surgery
- Stop using nicotine products
- Be active but know your body and your limitations. Walking or exercising at least 30 minutes per day can help your body be better prepared for healing
- Home preparation and safety: bring household items to between hip/shoulder height to decrease bending after surgery
- Clothing preparation: pack loose-fitting clothing that is easy to put on. Pack a button-up shirt if you are having neck surgery
- Pack closed-toed, slip-on, rubber-soled shoes
- Make a list of all the medications you are taking, including over-the-counter and herbal supplements. Do not bring medications to the hospital. Instead, bring your medication list
- Consider using stool softeners a week prior to surgery if you are not having regular bowel movements
- Visit [BSWHealth.com/SurgeryGuide](https://www.bswhealth.com/SurgeryGuide) for videos to get ready for surgery

Did you know?

Drinking fluids, especially water, and eating healthy foods before surgery will help your body heal after surgery.

Day before surgery

- Drink clear liquids starting at breakfast like water, coffee without creamer or sugar, sports drinks, Popsicles® or Jell-O®
- Take antibiotics as directed by your surgeon (if needed)
- Take your bowel prep as directed by your surgeon (if needed)
- Bathe with chlorhexidine (CHG or Hibiclens®). Wash your entire body except your face and genital area with chlorhexidine for three minutes
- Drink the pre-surgery drink before going to bed

Do NOT:

- Shave
- Use lotions
- Put on makeup or perfumes

Did you know?

Following instructions for bathing before surgery helps prevent infection after surgery.

Morning of surgery

- Bathe with chlorhexidine (CHG or Hibiclens®). Wash your entire body except your face and genital area with chlorhexidine for three minutes
- Drink clear liquids up to two hours before surgery. You may have a special pre-surgery drink ordered. If you are asked to have the drink, it should be the last thing that you have. Finish it at _____
- Arrive at the hospital at _____

Do NOT:

- Shave
- Use lotions
- Put on makeup or perfumes

Did you know?

Drinking clear liquids up to two hours before surgery is safe and good for your body. The pre-surgery drink has the right type and amount of energy your body needs for surgery.

Recover: What to expect as you start your recovery

Surgery day

- Manage pain with medicine taken by mouth
- Drink liquids
- Eat if able
- Use incentive spirometer every hour while awake
- Cough and deep breathe
- Spend time out of bed
- Start walking with nursing or therapy staff

Day AFTER surgery and beyond

- Manage pain with medicine taken by mouth
- Drink six to eight glasses of liquids
- Eat solid food
- Sit up for meals
- Use incentive spirometer every hour while awake
- Cough and deep breathe
- Spend at least four hours out of bed
- Walk in the halls at least four times

Before going home, you will need to:

- Walk safely in the halls and have a plan for walking around your home
- Eat and drink without nausea or vomiting
- Manage pain with medicine taken by mouth
- Know about new prescriptions
- Show signs your bowels are working
- Be able to urinate
- Know when your follow-up visit is scheduled

Resume: What to expect when going home

Pain management

- It is normal to have some pain while you are healing
- Follow medicine instructions given to you by your healthcare team
- Use ice packs, deep breathing, walking and distractions like music to help with pain management

Drinking

- Drink at least six to eight glasses of water every day to stay hydrated
- Watch for signs of dehydration, including being overly tired, having a dry mouth, feeling dizzy, having nausea, having dark-colored urine (pee) or urinating less than normal
- Drink water if you have any of these signs. If you are not getting better after drinking water, call your healthcare team

Eating

- Eat healthy foods like cooked vegetables, low-fat dairy products, and proteins like lean meats and chicken
- Talk to your healthcare team at your follow-up visit about advancing your diet
- Chew food well
- If your stomach gets upset after eating, eat bland, low-fat food like plain rice, boiled chicken, dry toast and yogurt

Activity

- Gradually increase what you do each day while maintaining your recommended precautions
- Sit up for all meals
- Spend at least six to eight hours out of bed each day
- Walk for 15 minutes four to six times during the day



- Rest when you feel tired
- Limit bending, lifting or twisting. Use pain as your guide
- Do NOT lift more than 10 pounds until your healthcare team says you can
- Ask your healthcare team when you can start activities like jogging, cycling and lifting weights
- Your therapy team will instruct you in performing activities of daily living safely and will recommend appropriate assistive equipment
- If prescribed, wear your brace as recommended by your surgeon

Driving

- Return to driving once cleared by your surgeon
- Do NOT drive if you are taking opioid medicine
- You must be able to wear a seatbelt and turn your body to see for safe driving

Returning to work

- Going back to work depends on the type of work you do. Talk to your healthcare team to decide what is best for you
- Slowly increase the hours you work