

Office: 865-541-2835

POSTERIOR CERVICAL DISCECTOMY POST OP INSTRUCTIONS

Immediately after surgery you will be transferred to the recovery unit. After appropriate recovery time you will transfer to the ambulatory unit. There you will be observed for a short while, then given the option to be discharged home. However, if you are experiencing nausea/vomiting, uncontrolled pain, difficulty urinating or if you prefer to stay overnight, you will be transferred to a hospital room. The following morning a nurse will see you and discharge you home if you are clinically stable.

After discharge if you experience any problems or complications related to your surgery that you do not consider life threatening, please call our office before going to the Emergency Room.

LIMITATIONS:

1. Do not drive for the first week post-op.
2. No strenuous activities until so advised at your follow up appointment. This includes no lifting of more than 10 pounds, avoid pushing and pulling motions, no climbing ladders or riding bicycles.

WOUND CARE:

1. The incision is closed with sutures under the skin and steri strips or staples on the skin. The initial dressing is a gauze pad covered by tape. Remove the initial dressing at 48 hours post-op or sooner if it appears saturated with blood or fluid. It is not uncommon to have bloody drainage on the initial dressing. The drainage comes from small blood vessels in the subcutaneous or muscular layer under the incision and should resolve in 48 to 72 hours. It is not a concern in terms of volume of blood loss but it is important to change the dressings when saturated and clean around the margins of the incisions with alcohol or betadine to reduce the risk of secondary infection. Call the office if bloody drainage persists beyond 72 hours or if new drainage of any type develops in an initially dry incision.
2. After 48 hours you may cover the steri strips or staples with a Tegaderm when showering. Remove this Tegaderm after showering. You may stop using Tegaderms after 5 days and remove the steri strips at that time. Do not take tub baths for 2 weeks post-op. If skin irritation develops, discontinue the use of the Tegaderm and notify our office. Staples should be removed in our office 5 to 10 days post-op.
3. The incision commonly becomes slightly swollen the first week and may remain so for several weeks. If your incision becomes progressively swollen, call the office.
4. Please call the office with any signs of infections such as redness or drainage with increased pain at the incision site, or fever greater than 101.5 degrees.

PAIN:

1. Post-op neck pain and stiffness is normal for several weeks following surgery and is usually mild. There may be transient recurrence of arm pain, particularly at night, and this is normal. You will be given a prescription for pain medication when you are discharged.
2. You may experience some post-operative constipation related to the use of anesthetic in surgery and pain medications. A stool softener is given routinely post op and should be continued as long as you are using narcotic pain medication at home. Additional measures to treat constipation which are available over the counter include:
Bisacodyl 10mg, 1-2 tablets with a glass of water or 1 Bisacodyl suppository administered per rectum
Magnesium citrate can be taken if no relief with Bisacodyl
Fleets Enema
Notify the office if you are unable to achieve a bowel movement after these methods.