

**Dr. Anuj Patel Discharge Instructions**

**OrthoAtlanta Spine Surgery**

**Phone # 770-445-5666**



**Pain Management:**

Please follow the plan below to help control your pain and reduce the amount of narcotics you require.

- **You were given a prescription for Oxycodone or Hydrocodone with Tylenol. Take 1-2 tabs every 4 hours as needed for breakthrough pain.**
- Narcotic pain medication can be habit forming and can also cause uncomfortable constipation, so it is important to consider the amount of pain you are in and the amount of pain medication you are taking.
- As your pain level decreases, you may begin to take over-the-counter Extra Strength Tylenol (acetaminophen) to help you wean off of your narcotic pain medication. You are able to take 1000 mg of Acetaminophen (Tylenol) three times a day if you are prescribed Oxycodone. Do not exceed more than 3,000 mg of Tylenol in a 24 hour period if you are taking it with Hydrocodone that already has Tylenol in it.
- If you need medication refills, please contact your Dr. office 2-3 days in advance.

***For Spasm type pain-***

- Additionally, you were given a prescription for Valium or Flexeril (muscle relaxant). You can take 1-2 tabs every 6 hours as needed for Spasms.
- You should continue to take this as directed and hold if you experience any sedation/excessive sleepiness.
- Do not drive while you are taking this medication, operate heavy machinery or consume alcohol
- The best thing for spasm relief is to keep walking and stay active post op.

**Principles of weaning narcotics:**

If you are taking the breakthrough pain medication, you need to reduce this by 1 pill per day until you are off.

- Avoid operating heavy machinery, driving, and drinking alcohol while taking narcotics. Inappropriate use of narcotics can lead to addiction, therefore it is strongly suggested to wean off narcotics as soon as possible.
- If you have any questions regarding how and when to wean off of your pain medications please contact Dr. Patel's office directly for instructions.
- You should return any unused narcotics to the pharmacy.
- As a reminder if you are running low on your narcotic pain medications you should call Dr. Patel's office for a refill.

**Constipation:**

- To prevent constipation you should take the Colace 1 tablet twice a day (stool softener) until you have regular bowel movements, then can take once a day.
- You may also take over-the-counter Sennakot 1-2 tablets twice a day (gentle laxative)
- Take these medications until you have regular daily bowel movements, then decrease to once a day.
- You should hold these medications if you experience loose stool or diarrhea. It is also best to stay well hydrated to avoid constipation.

**Blood sugars:**

Your blood sugars were monitored prior to meals and 2 hours after dinner. Ideally, post surgery your blood sugars should be less than 130 to help reduce the risk of infection. You can simply decrease your blood sugars by reducing the number of carbohydrate or sugars you eat. At your next PCP appointment, you should discuss your blood sugar. You do not need to continue to check them daily or take insulin at home.

**NSAIDs:**

Do not take any anti-inflammatory medications such as Motrin, Advil, Ibuprofen, Naproxen, Celebrex or meloxicam for 5 days after a decompression or for 3 months if you have had a fusion. Please discuss with Dr. Patel prior to taking any anti-inflammatories post op.

**Smoking:**

Failure of fusion is as high as 65% in smokers and nicotine users. Therefore, spine patients should not smoke or use nicotine for 6 months after surgery. This is your time to quit. Do not smoke, as this interferes with bone healing.

**Activity:**

You are encouraged to return to your normal activity. Walking is encouraged. You should not lift anything greater than 10 lbs for 2 weeks. Follow PT instructions that were given in the hospital for safe bending and twisting. You may not drive a car until cleared to do so by the spine team.

For ACDF: You may experience some difficulty with swallowing for a couple of weeks. We suggest that you drink thicker cold liquids such as milkshakes and eat soft foods.

For cervical fusions: Continue wearing the hard cervical for 6 weeks or until otherwise directly. You do not need to wear for eating or hygiene. It is OK to change collar in sitting or supine position.

**Dressing/Incision Care:**

You may remove your dressing 2 days after surgery and apply a new sterile gauze dressing. Before changing your dressing, wash your hands (or ask your helper to wash their hands). Do not apply creams, solutions, or ointments to the incision. Continue to change the dressing using a dry sterile dressing every other day for 1 week.

Continue to keep your incision covered with a dry sterile dressing for 1 week. You may remove your dressing after 1 week and leave open to air if the surgical incision is dry.

If you have Steri strips, please leave them on until they are so loose that they are no longer functional. In this case, you may then gently lift off the Steri strips.

If you have sutures, those will be removed at your first follow up appointment with Dr. Patel.

You may shower 7 days after surgery. Please use sponge bath prior to 7 days. Use mild soap and pat the incision dry with a clean towel. After the shower, keep your incision clean and dry. Please do not submerge your incision in tub baths, pools, lakes or oceans until cleared by Dr. Patel.

Please call Dr. Patel's office (phone:770-445-5666) with fevers > 101.4, increasing wound redness or swelling; foul smell or drainage from the incision; persistent calf pain; operative extremity pain not controlled by an increase in pain medications; if your dressing gets wet, soiled, or saturated underneath; or any other concerns.

Report to the local Emergency Department if you experience any chest pain, shortness of breath, difficulty breathing, or any other acute events.

**Follow up:**

You should have a follow up with Dr. Patel 10-14 days post surgery scheduled. Please call Dr. Patel's office at 770-445-566 to confirm this appointment or with any questions.

You should also schedule an appointment with your primary care physician in 2-4 weeks or as needed.

You may not drive until cleared by Dr. Patel.

**CALL IMMEDIATELY IF YOU EXPERIENCE ANY OF THE FOLLOWING:**

- ☐ Pain that is continually increasing or not relieved by pain medicine
- ☐ Any weakness, numbness, tingling in your extremities
- ☐ Any signs of infection at the wound site: redness, swelling, tenderness, drainage
- ☐ Fever greater than or equal to 101° F
- ☐ Any change in your bowel or bladder habits
- ☐ new tenderness in your calf, redness or discoloration of the leg, new shortness of breath, coughing up blood, or chest pain. These may be signs of a blood clot.

Report to the local Emergency Department with chest pain, shortness of breath, difficulty breathing, or any other acute events.

You may not drive while taking pain medications and/or muscle relaxants.