

Pain Medications:

As you recover and feel better, you should start weaning yourself off the narcotic pain medication. A good way to do this is to lengthen the time between doses and decrease the dose until you are no longer taking narcotic medication. You may then use regular or extra strength acetaminophen (Tylenol®) for pain control.

- If you take a daily aspirin tablet for heart attack or stroke prevention, you may continue to do so. One baby aspirin (81 mg) should be sufficient. If you have questions, check with your primary care doctor.
- Be aware that some prescribed pain medications may contain acetaminophen; talk with your pharmacist before taking additional over-the-counter Tylenol® or acetaminophen.

Fusion Patients: Anti-inflammatory medications may delay bone healing. Avoid using anti-inflammatories such as Ibuprofen, Motrin, Advil, Orudis, Aleve, and Celebrex during the first 12 months after surgery, or talk with your surgeon.



Your Pharmacist:

If you need a refill on medication prescribed by St. Croix Orthopaedics (SCO), please call your pharmacy. **Allow a full business day for refill processing.

Please Note:

A possible complication after any surgery is tiny blood clots that can form in leg veins. This is called deep vein thrombosis (DVT). Contact your physician immediately if you develop swelling, redness, and pain in the calf or thigh that does not go away. In some cases these clots can travel to your lungs and cause a pulmonary embolism (PE). Call 911 if you develop shortness of breath or chest pain.

Spine Patients



Post-operation Reference Guide

The Spine Center

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ORTHOPAEDICS

CARE uniquely focused on you.™

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During Recovery:

Nerve Pain— Swelling or tightness during the healing process can cause persistent nerve pain, numbness or a tingling sensation that can last several months. This is normal. Keep walking, as the pain usually subsides before your first post-op visit.

Incision— Use ice over the incision site(s) to help decrease pain and swelling. For at least 5 days post-operatively, inspect each incision and make sure it is clean and dry.

Nausea— You may experience nausea. Over-the-counter antacids may help.

Constipation— Narcotic pain medication may cause constipation. Try over-the-counter laxatives and drink plenty of water. Avoid taking supplements that contain iron, unless specifically instructed to do so.

When to Call:

If you have ...

- A temperature over 101° F,
- Incision drainage persists and/or increases,
- Increasingly painful, red swelling at the incision site,
- Significant calf or thigh pain that doesn't go away,
- **Call 911 if experiencing chest pain or shortness of breath.**



Activity:

- Up and out of bed! The first few days following surgery, you should get up and walk around several times a day.
- Resume normal, daily living activities as soon as you are comfortable. Avoid bending or twisting at the waist until approved by your physician.

- Do not lift more than 10 pounds until you are cleared by your physician to do so.
- Transitional movements (lying to sitting, sitting to standing) may be more painful. This is normal. Regular movements will not hurt your surgery outcome.
- You may resume sexual activity when comfortable.
- Do not drive until you are off narcotic pain medicine and have discussed driving with your surgeon.
- You may return to work if you are able to do so within the restrictions provided by your surgeon.
- If you've had neck surgery, be sure to maintain a full range of motion with your arms and shoulders.



Self-Care:

- Showering— You can shower everyday. Make sure the wounds are covered during the shower for the first 5 days after surgery. Change the dressing after you shower, but first be sure to dry the skin thoroughly. Do not soak in tubs, pools or hot tubs.
- Leave steristrips on until they fall off.
- Eat a well-balanced, high calcium diet. If you cannot tolerate dairy, you may use a calcium citrate supplement (1500 mg).
- Vitamin D is important for calcium metabolism. If you cannot tolerate dairy, you may try cod liver oil (800 UI daily) or vitamin D3 (1000 UI daily).
- A single daily multivitamin is recommended.
- Smokers have a 33% higher chance of fusion failure. Do not smoke for 6-12 months after surgery.
- You may have alcoholic beverages in moderation when you are no longer taking narcotic medication.