



Spine Surgery: Instructions for After Surgery

Diet

Your child may resume the same diet as before surgery. Encourage fluids, fiber and fruit intake to reduce problems with constipation. Protein is also important to help with wound healing.

Incision Care

Your child may shower with the bandage on, but do make an effort to keep it relatively dry. Remove the bandage 5 days after surgery. One week after surgery, it is OK to get the incision wet, but do NOT scrub the incision or allow it to be directly sprayed by the showerhead. In addition, do NOT allow your child to sit in a bathtub or pool with the incision submerged for four weeks. Do not scratch the incision or apply any lotions, ointments or creams such as Mederma, Aquaphor, shea butter, silicone strips, or vitamin E creams to the area until one month after surgery.

Pain Medication

Your child will be given prescriptions for pain and muscle spasms. Your child may gradually decrease the number of pain tablets being taken and increase the time between doses as soon as he or she is comfortable doing so. Your child may transition to acetaminophen/Tylenol as soon as tolerated. Do not give Tylenol at the same time as Percocet (or other narcotics which contain Tylenol such as Hycet, Norco, or Vicodin) as too much Tylenol can be harmful. Ibuprofen/Motrin/Advil and naproxen/Aleve do not contain Tylenol and may be taken in combination with the other medications.

Constipation

Constipation following surgery is common due to poor appetite, narcotic usage, and a temporary decrease in activity of the stomach and intestines. Fruit juices, prunes, fluids and high-fiber foods also are helpful. You should give your child Colace (50-100 mg up to four times daily) until your child is off of the narcotic pain medication completely. If there has not been a bowel movement in five days, you may give your child a suppository such as Dulcolax. If this is not successful, an enema may be required, but this is not common.

Activity

There are no restrictions on positioning for sitting or sleeping. Encourage progressive, daily activity to avoid stiffness. Start with small tasks such as sitting at the kitchen table for a meal or walking to the mailbox, and work up to walking around the neighborhood. Walking, sitting, standing and stair climbing are fine. As your child becomes more active, he or she may have an increase in back pain that will subside with ongoing increased strength.

School

Your child may attend school when he or she is comfortable sitting for long periods of time. Initially, you may want your child to attend school for half days and leave each class early to navigate the hallways before they become crowded. On average, most patients will return to school 2-3 weeks after surgery.

Follow-Up Appointment

Please schedule an appointment for four-six weeks after surgery. Plan on regularly scheduled after surgery with x-rays of the spine to check the rods and the unfused areas at every visit.

Sincerely,

The Orthopaedic Spine Team

