

Homegoing Instructions following Cervical Fusion

1. **Surgical Wound:** Your wound is to be kept clean and dry. You will be allowed to shower 5 days after surgery, if your wound has been dry without any drainage for the preceding 48 hours. The wound should not be exposed directly to the water (allow the water to hit your chest or back above the incision then rinse down to the wound- NO direct striking of the wound with the stream of water). The wound is to be cleansed with antibacterial soap using a patting motion over the incision. In order to keep the steri-strips in place, do not rub or scrub the incision. If the wound becomes wet, it should be pat dry after showering and even blow dried on a cool setting to ensure it is not moist. The wound is not to be submerged in water during activities such as bathing or swimming until after the 6-week follow-up appointment. Once cleansed and dried, the wound is to be covered by a sterile DRY dressing (unless otherwise notified) daily. Do not apply solutions or ointment to the wound prior to dressing it (unless you were advised otherwise by me or one of my nurse practitioners/PA's). The wound should be covered with a sterile dressing until the 2-week point at a minimum.

Your surgical wound has sutures that will absorb over time. The ends of the suture may extend out from either end of the incision and look like clear fishing line. These have been taped down with Steri-Strips. Two weeks after surgery, the ends should be cut off at skin level, using a clean pair of scissors. There are Steri-Strips over the rest of the wound, which may be removed six weeks after surgery. If the steri-strips come off before that, please make an appointment right away to have the wound checked and the steri-strips reapplied if necessary.

You will receive a scar cream if your insurance authorizes it. This is to be applied to the incision(s) twice daily beginning 6 weeks after surgery (when the incision is a scar, not a wound). You should apply it with a downward pressure using a circular massaging motion along the length of the scar. It will initially be tender but will eventually improve. If the wound becomes irritated or opens up, discontinue massage immediately.

If authorized, we will arrange a Home Health Nurse to visit you daily upon discharge from the hospital. They will assist with dressing changes and wound assessment. Please ensure they adhere to the activity and dressing restrictions contained on this handout. You should expect them daily for the first 2 weeks after arriving home. If they do not arrive as expected or you are concerned with the care being provided, please notify my office immediately.

2. **Brace:** You are to wear your brace at all times. The brace is to be worn for at least three months. At the follow-up appointment x-rays will be checked and you will be instructed when it is appropriate to begin weaning out of the brace.

O When showering, you must switch to the cream colored water resistant brace. When changing or removing your brace, do not turn your head or flex or extend your neck. It is important to get everything set up and get in the shower before removing the brace to limit bending and twisting as much as possible. Use the shower chair and sit with the brace on. You may then remove it to cleanse the wound only while keeping your head perfectly still.

Men: You may also remove your brace to shave but do not shave near the incision until it is completely healed.

3. **Activity:** Refrain from twisting, bending, or lifting, pushing, or pulling anything greater than 5 pounds (the weight of a half a gallon of milk). Driving is not permitted while in the brace.

Please walk several times daily for exercise. Start out with short walks and increase the distance as your endurance increases.

You are NOT to perform physical therapy or exercises that can compromise your fusion until the 6-month point at a minimum. This includes: No lifting > 5 lbs, No straight leg raises while flat, no stretching, no bending, and no weight resistance exercises. You may walk only for exercise until cleared for rehab at the 6-month point.

You may feel an occasional or rare painless "shift" of the muscle over the implants. This is usually of no concern but notify us immediately if your pain increases or if you fall during the healing process. Once rehab begins, please perform your exercises carefully and diligently. I recommend doing them 5x weekly until you have regained strength and flexibility. This should be followed by life long maintenance therapy a minimum of 3x/week.

You may have a decreased appetite for several weeks after surgery. I recommend taking a multi-vitamin, Calcium + Vitamin D, and drinking protein shakes during the healing process. Our office can provide those or give recommendations if necessary.

4. ***NO smoking and no nicotine intake!*** Smoking (1st and 2nd hand) and nicotine drastically decrease the chance of a solid fusion.
5. DO NOT take any anti-inflammatory medication, (i.e., Celebrex, Advil, aspirin, Naprosyn, Motrin, etc.) as these may inhibit the chance of a solid fusion. It is okay to take Tylenol and the medicines we have prescribed for pain.
6. PAIN MEDICINES to be taken after surgery will be called in to your pharmacy by one of the staff. If you have any medical questions, call our clinic nurse, Deborah at (210) 831-4780. If you have administrative/scheduling questions, call Kevin (210) 771-0634. If you are unable to reach anyone, please call the office number or enter a request on the website under the Request An Appointment tab. You should take your medicines on schedule for the 1st week for significant pain but then beginning weaning once your pain is controlled. You may have temporarily increased pain or nerve symptoms in response to the surgery: numbness, tingling, pain, and/or weakness. At times, you may experience new nerve symptoms, particularly numbness, as a response to realigning, stretching, or decompressing the nerve(s). This should be tolerable and should improve over time but may take months, if not a couple of years. If these symptoms are worsening or intolerable, please notify us.
7. Continue to wear the white TED stockings for the first 6 weeks after the surgery. The stockings can be removed (by someone else) at night when sleeping. The stockings can also be removed when sitting with the feet up.
8. At your 2 week follow up you will receive a bone stimulator. This device is intended to increase the chance of obtaining a solid fusion. It is to be worn 24 hrs/day for a minimum of 9 months or until I, or one of my providers, tells you to stop using it or you have been noted to have a solid fusion.
9. Complications are uncommon but please contact us immediately if you have any of the following signs or symptoms:
Wound infection (fever higher than 38°C or 101°F, redness or separation of wound, drainage, or increasing pain from the incision).
Lower extremity blood clots and pulmonary emboli which may cause increased lower extremity pain, swelling, warmth or redness, increased heart rate, shortness of breath, or chest pain.
Urinary tract infection which may cause fever higher than 38°C or 101°F, burning on urination, or increased frequency of urination.
Nerve problems which may cause new onset inability to walk on toes or heels, numbness, tingling or weakness, loss of bowel or bladder control or other symptoms of concern.

If you have a concern after hours that you need evaluated by a physician, please consider visiting EliteCare ER on 281 or Bandera. Alternatively, you may go to any nearby facility or the hospital in which you had surgery.

Any time you have a condition that you feel may be an emergency, please call 911

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For Questions Before and After Surgery:

Clinic Nurse- Deborah Villarreal (210) 831-4780

Surgical Scheduling Supervisor- Kevin Hoecke (210) 771-0634

Clinical Manager- Sharon Ross, APRN-BC (210) 788-9294