



VANCOUVER ISLAND  
NEUROSURGICAL FOUNDATION

# My Posterior Cervical Spine Surgery

The Surgery Team has prepared this insert containing discharge information to help you and your family after surgery. It has information about what you can do after your surgery.

Please visit the Vancouver Island Neurosurgical Foundation website for more health information: [www.vinf.ca](http://www.vinf.ca)

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## Discharge Instructions – Posterior Cervical Spine Surgery Patients

### How do I take care of my dressing (bandage) & wound?

- Typically, these wounds are closed with staples at the skin surface. These should usually be removed sometime around 7-10 days after surgery. You can book an appointment with your primary care provider for this.
- Keep your dressing on for 5 days, then remove it and leave it open to the air.
- Keep the dressing and incision clean and dry at all times.
- Do not be alarmed by the bruising or swelling around wound.
- Do not use lotions, powders or oils on the incision.

### When can I shower or bathe?

- You may shower or bathe tomorrow but do not wet your incision for 5 days.
- After 5 days, you may wet your incision, and lightly pat dry your wound.
- Keep your incision clean and dry after showering.
- DO NOT take a bath, swim or use a hot tub for 6 weeks.

### When do I have to wear my neck collar?

- You may have been provided or prescribed a collar, your care team will provide you with specific instructions for how long and under what conditions you must wear the collar. Please ask your nurse or doctor if this is unclear to you.

### What can I eat and drink after my operation?

- After your surgery you might not be hungry and a large meal may not sit well in your stomach. Try eating small meals until your appetite improves and then eat what you normally would eat.
- If you feel sick to your stomach you can get anti-nausea medication from your pharmacy without a prescription (i.e. Gravol). Take it as directed and drink fluids until the nausea is gone. If the nausea continues, see your family doctor.

### What activities can I do?

- Initially, avoid lifting more than about 4.5 kg (10 lb).
- You can start being active by walking. You may experience some mild incisional pain but this is normal and will gradually go away.



- During the day, avoid lying in bed or sitting for long periods of time by getting up every 30-60 minutes to walk.
- You may gradually increase your activity with time. I recommend using pain as a guide for what you should and should not be doing.

#### When can I drive?

- You may resume driving when it is safe to do so. To help know when it is safe to return to driving, consider the following:
  - Under most circumstances, if you have been prescribed a collar to be worn at all times, you may not drive until the collar has been removed. The restricts shoulder checking and is an impediment to safe driving.
  - Can I operate the wheel and pedals reliably?
  - Can I shoulder check without restriction?
  - Am I on new pain medications that could affect my judgement, response time, or level of fatigue?
  - If an accident occurred, would I be able to say with 100% confidence that my surgery (pain, mobility limitations, medications, etc.) were not a factor?
- You will not be able to drive yourself home after your surgery.

#### How do I cope with my pain?

- Pain is normal after posterior cervical surgery; you can take Tylenol Extra Strength 1 - 2 tablets every 4 - 6 hours as needed.
- If you are given a prescription, take it to a pharmacy to get it filled and follow the directions for taking the medication.
- Take a stool softener every day while you are taking opioid pain medications. If you have not had a bowel movement after 2 days, take a laxative which you can get from a pharmacy without a prescription.
- You may want to arrange a follow-up appointment with your family doctor if you are experiencing pain and continue to need pain medication beyond the prescription provided.
- You may feel some muscle spasms across your back and down your legs. If the nerves in your legs are inflamed or irritated, you may have some leg pain until the inflammation resolves after a week or two.

#### What about other medications?

- If you were on blood thinners and stopped taking them for your surgery, speak to your surgical team about when to restart them.
- Continue with any other medications you were on before surgery.



- If you have any questions about medications or dosages, have them answered by your nurse or surgical team before leaving the hospital.

#### What about physiotherapy?

- Physiotherapy is not typically required, but can be useful if you are uncertain how to increase your activity or would like some guidance with types of exercises/activities that could be useful. Physiotherapy is helpful to maximize recovery if you have specific weakness (a weak ankle or knee). Physiotherapy, generally should not be started before 6 weeks.

#### When will I be recovered?

- Recovery from surgery is a gradual process. There are many factors that influence the final outcome and the rate of recovery. Likewise, different people may have different definitions of what exactly “recovered” means.
- Typically, tissues and wounds heal rapidly at first but continue to change slowly over an extended period of time. We say that a wound will reach 60% strength by 6 weeks. By 3 months nearly all the early healing is done. If you have neurological deficits, these can continue to improve 1-2 years after surgery.

#### What about fusion?

- In the case of spine fusion surgery, bone healing is an important part of recovery. The bony fusion portion of the operation requires bone to heal across the fused space. This process takes many months.
- If you are a smoker, it is essential that you quit. Bone healing is reduced to 50% of normal in smokers.

#### When can I return to work?

- Return to work is different for different people. It will depend on the type of work you do, the nature of your employment (employee vs self-employed), the degree of pain and symptom you are experiencing.
- A typical rule of thumb is to leave about 6 weeks time to recover before returning to most types of employment, but this can be modified to suit your specific situation. If you have good employee benefits or your job is heavy labour, you might extend this. If you are self-employed or have a very light job, it could be shortened.
- Gradual return to work is sometimes a relevant consideration.



### When can I travel?

- There is no specific restriction on travel after surgery, however there may be some relevant considerations:
  - Can I sit for the required amount of time to complete my trip?
  - Can I walk the required distances?
  - How will I move my baggage?
  - If travelling out of the country, am I eligible for any travel health insurance? What are the relevant timeframes to consider from my insurer?
  - For non-urgent travel, 6 weeks to 3 months recovery is probably a good guide.

### When should I call my family doctor?

- Call your family doctor to make an appointment for your stitch or staple removal if necessary. If you have staples or external stitches I generally recommend 7-10 days prior to removal.
- It may be worth having a family doctor appointment within a couple weeks of surgery even if you do not require stitch/staple removal. It can be helpful to touch base with any ongoing symptoms, pain medication needs or other aspects of your recovery.

### What should I do if I develop a problem?

- Go to Victoria General Hospital's Emergency Department (preferred) or the nearest hospital emergency department, if you have:
  - Severe pain not helped by any medications
  - New or progressive weakness in your legs.
  - Fever (>38°C) or you notice any signs of infection in the incision.
  - Increased redness, swelling, leaking of pus or pain from the incision.
  - If you notice increased swelling with pain in your legs, or difficulty breathing.
  - Any trouble controlling your bowels or bladder.

### When is my follow-up appointment?

- Follow-up is on an as needed basis. If your recovery is going well, and you do not have any specific concerns, an appointment is not necessary.
- If you do have specific questions or significant symptoms, please contact our office to arrange a follow-up. Most of the time this follow-up occurs around 3 months after surgery.
- If you feel something is not right, or are experiencing increasing symptoms, please let us know.



Date: \_\_\_\_\_

Time: \_\_\_\_\_

Surgeon:

- Dr. Evan Frangou
- Dr. Stephen Hentschel
- Dr. Richard Reid

- Dr. Daniel Warren
- Dr. Oliver Ayling
- Dr. John Sun

Special instructions for me:

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