



NEUROSURGICAL ASSOCIATES, LTD.

PEDIATRIC SPINE SURGERY POST-OPERATIVE INSTRUCTIONS AND RECOMMENDATIONS

General Information:

Our telephone hours are 9:00 a.m. to 5:00 p.m. If your child is experiencing difficulties or if you have questions, please call during business hours.

Mild redness or swelling around the incision may be normal. Call our office if your child has increased redness, swelling, persistent drainage, your child's incision becomes more painful or if your child should develop a fever greater than 101.0 that lasts longer than two hours.

It is also common to experience temporary increase or return of limb pain and/or altered sensation during the first two weeks of recovery.

If your child has not scheduled their post-operative appointment yet, please call our office to schedule it.

Pain and pain medications:

Pain is to be expected after surgery. Following surgery, your child will be sent home with pain medication to keep them comfortable. Your child may also be given a medication for muscle spasms or tightness. It is important to take prescriptions as prescribed. If you feel that your child's pain is not well controlled, call our office during business hours to talk to our providers. Do not take medication more often than prescribed.

Your child can use ice to areas of pain as needed, 20 minutes at a time. Changing positions periodically may also help (i.e., sit/stand/walk/recline).

Some narcotics may be phoned to your pharmacy and some cannot. Those narcotic prescriptions that cannot be phoned will either be given to you in clinic, mailed to your pharmacy or you may pick up the written prescription at our office. We will not mail any prescriptions to your home. Please plan appropriately if you choose to have your child's prescription mailed to the pharmacy. We require at least two business days' notice to refill any prescription. If someone will be picking up your child prescriptions, we must be informed who will be coming in advance. In addition, that person must present photo I.D. before picking up your child written prescription. **We do not refill or prescribe any medications after hours or on the weekends.**

Nausea is a common side effect of pain medications. We recommend that your child take pain medication with food.

Some medications need to be avoided for three months following a fusion, i.e., Advil, Motrin, ibuprofen, Celebrex, Aleve and Naprosyn. Please check with the neurosurgical provider before resuming these medications.

Bowel care:

Constipation is common following a surgery due to decreased fluid intake, pain medications and inactivity. Drink plenty of water or fluid and eat high fiber foods during your child recovery. Excessive milk products such as cheese, yogurt and milk may contribute to constipation. Getting up and moving after surgery will help keep your child bowels moving. If it has been several days since your child had a bowel movement after surgery, we recommend prune juice, over-the-counter stool softeners or suppositories until your child bowels become more regular.

Driving:

If applicable, your child may not drive while taking narcotic pain medications or medications that may cause increased drowsiness. Driving under the influence of controlled substances renders your child incapable of driving safely. Please check with your child's provider when your child would be able to start driving.

If your child had a cervical fusion, your child will be restricted from twisting their neck which will prevent your child from driving safely. Ask your child's provider when your child can drive.

Your child may take short trips but stop frequently to walk and change positions. Avoid prolonged sitting.

Activity

Resume activities gradually. Do not over exert your child.

Your child is encouraged to walk. Start with short walks 5-10 minutes at a time 4-5 times per day and increase as tolerated. Some days your child will have more energy than others. This is normal. Your child may climb stairs as tolerated; we recommend your child uses the railing.

After surgery, your child may be limited in regard to flexing or extending your child back or neck. Further directions will come at discharge if necessary.

Do not lift or carry anything heavier than 10 pounds, which is approximately equal to one gallon of milk. No housework, vacuuming, laundry, leaf raking, lawn mowing or snow shoveling.

Shower/Bathing:

If your child's incision was closed with glue, your child may get the incision wet but do not rub on the incision or soak in a tub or whirlpool until seen in clinic.

If your child's incision was closed with staples or sutures, your child may shower at three (3) days post-operatively if no drainage or open areas are present. Do not rub on the incision or soak in a tub or whirlpool until seen in clinic. You may pat the incision dry.

If your child's incision was closed with Steri-Strips, keep your child's incision dry for three days. If your child showers, your child may cover the incision with plastic wrap such as Press and Seal or Saran Wrap and tape. Once your child is done showering, remove the plastic, pat dry and leave the incision open to air. Your child may remove the Steri-Strips in two weeks if they have not fallen off. Do not rub on the incision or soak in a tub or whirlpool until seen in clinic.

Do not use lotions, gels or ointments on the incision until your child incision is fully healed.

Nutrition:

Diet restrictions will not change with your child's surgery. Eat plenty of high fiber foods and drink plenty of fluids. We recommend drinking six to eight glasses of water per day, unless your child has a fluid restriction.

School/Daycare

Your child may not attend school or daycare until cleared by their provider.

Call our office during business hours if the following occurs:

- Persistent drainage from your child's incision
- Increased pain, redness or swelling of your child's incision
- Temperature greater than 101.0 lasting longer than two hours
- New leg or arm pain and/or swelling
- New unrelieved headaches

If your child experiences any of the following, please proceed to Minneapolis Children's Emergency Room or the nearest Emergency Room:

- Respiratory distress
- Worsening swallowing problems or difficulty breathing.
- Increased swelling of the neck or back
- Uncontrollable pain warranting further evaluation