

Instructions after Micro-laminectomy and Discectomy

First Night after Surgery:

1. Depending on your condition, some of you will be able to go home the day of surgery, and some will need to stay overnight. Also if you have problems with nausea or voiding (urinating) because of anesthesia, then you may need to stay overnight as well.
2. Regardless of where you are, the night of surgery will be roughest. You can take short walks and go to the bathroom. Limit going up and down stair to once a day.
3. The next day after surgery, I want you up and walking. It will be slow at first, and you will need assistance to get up. Remember, you can sit up on the side of bed to put on your back brace, then stand. The first time you may only walk for a few minutes, but each time I want you to increase your walking.

First two weeks:

1. For the first two weeks at home, I want you to limit going up and down stairs to once a day. Climbing stairs will not effect the surgery but may aggravate the muscles.
2. Continue to do walking exercises. The more the better. Be sure to walk in safe, clean, and dry surface.
3. You may walk 1/4 to 1/2 mile per day.
4. Have someone change the dressing on the second day after the surgery. The designated person should wash hands before and after the dressing change. Steri-strips will be covering the wound. **DO NOT REMOVE THE STERI-STRIPS.** Put new sterile gauze over the steri-strips then apply the clear sticky dressing over the gauze. Keep the sticky dressing above the buttocks but low enough to securely cover and hold the gauze.
5. You can shower on the third day after the surgery. Keep the dressing from the previous day in place. The clear dressing is water-tight. Take quick shower (5 minutes) without bending back or legs too much. After drying-off, remove old dressing and apply new gauze and sticky dressing. Wait two days (the fifth day after surgery) before the next shower and next dressing change. So you can shower every other day after the first one, change dressing right after the shower. Keep this schedule until you return to see me in the office.
6. Avoid long sitting. You can sit for 30 minutes, up to four times a day. So you can sit for meals, toilet, and short rest periods throughout the day. The rest of the time, your body should be straight, such as standing/ walking or lying down. You do not need to be totally flat when lying down. You may have up to two pillows behind your head and one under your knees.
7. No driving a car unless there is an emergency. You can ride in a car, but recline the seat back halfway to decrease the angle of sitting and the pressure on the lower back.
8. Wear back brace when out of bed. You do not have to wear it if you are going to be up for a short period, such as making a quick trip to the bathroom.
9. No sexual relations.
10. No hottubs or tub bath..
11. No bending, twisting, or lifting objects over ten pounds.

Signs and Symptoms to Watch for:

1. Any increase in swelling or redness around the wound.
2. Any cloudy, foul-smelling, or reddish drainage from the wound.
3. Any new numbness, tingling, or weakness in the leg, foot, or toes.
4. Any temperature over 100 degrees F.

If any of these conditions occur or if you have any question, contact my office at: 708-799-2911 or 219-836-4955.

Miscellaneous:

1. Some pain in the back and leg is expected. Usually the back pain is worse the first two days, and then it gradually goes down. The leg pain should be mild and usually is noticeably better than before surgery. Depending on your condition, some decreasing sensation may last since sensation nerve fibers are the most delicate and vulnerable to damage. Some occasional tinges of pain may occur in the back or leg which does not last long during the first three to six weeks after the surgery.
2. Do not do any exercise program right after surgery unless prescribed by me. Depending on your condition, you may or may not need physical therapy after the surgery.
3. As you heal and recover, your activity restrictions will gradually lessen. Do not try to do too much within the first few weeks of surgery. When appropriate, we will discuss your return to work and if restrictions are needed.
4. As the surgical pain decreases, I recommend you cut down the use of pain pills. These medications have side-effects and are meant only for short-term use. Usually the pain decreases enough by fifth day after surgery so that no narcotic pain medication is necessary.

If you have any question or problem, please call my office: **708-799-2911 or 219-836-4955 and ask for Joann.**