



(972) 817-7450

POST-OPERATIVE INSTRUCTIONS

PAIN

Pain is a normal part of surgery and the normal healing process. Expect muscle spasms and soreness at the operative site. It is not unusual to continue to have some degree of nerve pain or numbness and tingling. In some instances, these may be exacerbated in the immediate postoperative period and are expected to generally subside over the course of your recovery. Walking and staying active — but not overactive — will usually help these issues subside.

Please take pain medications as prescribed. If you are taking narcotics after surgery (e.g. hydrocodone, oxycodone), constipation is a common side effect. Take a stool softener or laxative such as Colace, Senna, MiraLax, or a suppository daily to avoid becoming constipated. You may also take Tylenol (acetaminophen) as directed; however, hydrocodone already contains acetaminophen — do not exceed 3,000 mg of acetaminophen per day.

You may begin anti-inflammatory medicines (Advil, Aleve, ibuprofen, naproxen, Celebrex, meloxicam, etc.) 5–7 days after surgery.

Please note: our office DOES NOT refill pain medications on Fridays or weekends. If you are close to running out and might not make it through the weekend, notify the office by Thursday to avoid waiting until Monday.

Dr. Choi prescribes pain medication for surgical pain for the first 30 days after surgery only. We do not prescribe narcotics for chronic pain or pain lasting longer than 30 days after surgery, by which time surgical pain should be improved. If you feel you need ongoing pain medication, please arrange for a pain management physician or your primary care provider beginning 30 days after surgery. If you need a referral, please call the office.

INCISION / WOUND CARE

Leave your surgical dressing in place for the first 2 days following surgery. Keep it clean and dry during this period. Sponge baths or an occlusive dressing are recommended if you want to shower. After 2 days you may remove the surgical dressing and shower — remove the dressing before showering. You may run soap and water over the incision, but do not pick at or scrub it. After showering, pat the wound dry gently and place a new, clean, dry bandage. Change the dressing daily after showering, or as needed if the incision continues to ooze. Keep the dressing clean and dry at all times. Do not place any ointments or creams on the incision unless instructed by Dr. Choi. Do not soak in still water (bath, hot tub, pool) for 4–6 weeks.

Check your incision (or have someone check for you) at least daily for signs of infection: foul-smelling drainage, opening of the incision, excessively increased redness or tenderness, flu-like symptoms, or fever over 101°F. If you have concerns, call the office.

Generally, sutures are under the skin and dissolve on their own. If external sutures or staples were placed, they will be removed at your postoperative follow-up visit once appropriately healed.

ACTIVITIES

No lifting greater than 10–15 pounds and no bending, lifting, or twisting for the first 6 weeks after surgery. You will be cleared to return to activities at your follow-up appointments depending on your procedure and progress.

Keep moving after surgery. Walk as much as possible — let discomfort be your guide. You may go up and down stairs as tolerated.

Some discomfort is normal throughout recovery. Vary your position and stay as active as you are able. You may sit or sleep in any position that is comfortable.

BRACING

If you were provided with a brace, use it as instructed. General guidelines (unless instructed otherwise):

Surgery	Brace guidance
Anterior Cervical Discectomy and Fusion (ACDF)	C-collar for 6 weeks at all times. Okay to remove for eating/showering.
Cervical Disc Replacement	C-collar for 2 weeks at all times. Okay to remove for eating/showering. Soft collar for 4 weeks for out-of-bed activities as needed.
Posterior Cervical Fusion	C-collar for 6 weeks at all times. Okay to remove for eating/showering.
Lumbar Laminectomy / Microdiscectomy	In general no brace. If provided, wear as instructed for out-of-bed activities.
Thoracic / Lumbar Posterior Spinal Fusion	In general no brace. If provided, wear as instructed for out-of-bed activities.

DRIVING

You may drive when you feel safe to do so and feel you can drive as you did before surgery. You may NOT drive under the influence of sedating medications (pain medications, muscle relaxers, etc.) — these impair you cognitively and make driving unsafe. If you are taking pain medications, you must be a passenger only. When you feel ready to drive, start somewhere away from cars and pedestrians (a quiet street or empty parking lot) to confirm you are safe in traffic.

You may be a passenger as soon as you feel able. On longer trips, make several stops to walk around and stretch your legs. Reclining the passenger seat is the most comfortable position for most patients.

FOLLOW-UP APPOINTMENTS

Your first post-operative visit should be 2–3 weeks after surgery, or as directed after discharge. You should already have a post-op appointment scheduled. If you do not, or have forgotten when it is, please call Dr. Choi's office.

QUESTIONS OR CONCERNS

If you have any additional questions or concerns, please contact the office at (972) 817-7450.