



# **BRANKO PRPA M.D.**

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## *Spine Surgery*

### **POST OP INSTRUCTIONS – CERVICAL**

#### **Post-Op Pain**

It is not unusual to experience the following symptoms in the first few weeks after surgery:

1. Pain in and around the incision(s)
2. Some persistent neck or arm pain
3. Pain between the shoulder blades or across the shoulder area
4. Mild swelling or redness at the incision(s) that is decreasing.
5. Pain on moving from bed to chair or standing position. It is not unusual to be uncomfortable during the first few days following surgery, and especially at night. This will improve steadily.
6. A sore throat that feels like something is caught when you swallow
7. Pain will be present but should be around 3-6 range on a scale of 10 with medications.

#### **Incision Care**

1. You may shower 48 hours after surgery. If staples OR sutures are present, **DO NOT** get them wet. You can cover them with plastic and tape and then shower. Make sure to pat the area dry.
2. Change the dressing(s) daily for 10 days with 4x4 gauze and tape, or when the dressing is soiled. After that, if there is no drainage, you may remove the dressing. You may either let the incision air dry (**leave the steri-strips in place – they will fall off on their own**) or cover with an oversized Band-Aid. **Redness that is getting worse and/or persistent or cloudy drainage should be reported to our office ASAP.**
3. Sutures and staples usually come out at 2 to 3 weeks after surgery by our service. Then you may get the incision wet – pat dry.
4. Do not apply ointments or solutions to the incision. Mild soap and water are OK.
5. If you notice a small clear suture at the end of the incision, do not remove it. It will either dissolve or be removed in the office.
6. If you develop blisters, redness, or irritation from the tape, discontinue its use.
7. Watch wounds for any excessive swelling, redness, and pain after discharge from the hospital. Call the office (414) 939-5447 if you have any questions.

## **Do's and Don'ts**

You should think of the first week after surgery as an extension of your hospital stay. In general, if any activity increases discomfort, don't do it. It will get easier each day.

Your first post op visit will be scheduled (by my office) 10-14 days after surgery.

Your 2<sup>nd</sup> post-op appointment will be approximately 6 weeks after surgery. An x-ray will be ordered on the day of.

1. Avoid using aspirin products and **NSAIDs (Aspirin, Ibuprofen, Advil, Aleve)** until Dr. Prpa has instructed you to resume them or for at least 3 months after surgery. These products tend to interfere with growth and development of your recovery. However, if you are taking these products for treatment of other health conditions, it is important to discuss this with Dr. Prpa and your primary care provider.
2. Wear your collar when moving around, out of the home, etc. You may remove it to shower, wash, shave, etc., move your body as a unit while limiting excessive neck motions. Avoid big 'yes' or 'no' motions with your head. The collar is **not** there to restrict all neck movement. It is there to restrict excessive movement to allow the bone graft to heal.
3. Following a fusion, you will wear a cervical collar for approximately 6 weeks after your surgery.
4. Do not use time off after surgery to do projects at home.
5. Do not remain confined to bed during the day. Walk as much as you comfortably can.
6. Avoid lifting more than 10 lbs. for approximately 3 weeks.
7. **No exercise program** is allowed until you are released by your doctor to do so.
8. Sexual activity is permitted whenever comfort permits.
9. You should not drive with the hard cervical collar. You may ride in a car as a passenger. Do not ride for more than 2 hours without getting out and walking for a few minutes.
10. Decisions regarding returning to work and physical therapy needs will be made on an individual basis by our medical staff.
11. The pain medication and anesthesia can cause problems with constipation. Start a stool softener daily, increase your fluids, and walk as tolerated to help with constipation. It is ok to use an over the counter suppository (such as Dulcolax) or an oral laxative (such as Dulcolax tabs, Milk of Magnesia, Miralax), as needed, if you have had no bowel movement by 3 days after your surgery.
12. It is ok to sleep on your sides or your back.
13. **Hot tubs** - Patients who have had a fusion should not use a hot tub for at least 3 months post-op
14. **Contact your preferred pharmacy for pain medication refills during the week. We will not refill medications over the weekend.**

### **Calling the Office**

We are here to help you. Please call with any questions.

Call the office at 414-939-5447 if any of the following occur:

1. Sustained fever greater than 101.5 degrees Fahrenheit that does not respond to Tylenol. (Do not take Tylenol if you have any contraindications or allergies to Tylenol.)
2. Increasing drainage from the incision(s) (spotty drainage may be normal for the first few days)
3. Incision is very red or warm to the touch.
4. Arm or neck pain or swelling in excess of your pre-operative pain.
5. Difficulty swallowing, shortness of breath.

### **Calling 911**

**Please call 911 or go to the Emergency Room immediately if any of the following occur:**

- 1. Difficulty breathing, shortness of breath or pain with breathing**
- 2. Chest pain, severe headache.**
- 3. Leg pain – specifically calf tightness or swelling**
- 4. Bowel or Bladder loss**

## Common Spinal Questions

### **Q: I am worried about surgery. Is this normal?**

**A:** It is completely normal to be worried about surgery. Even the most prepared person still has some anxiety. Dr. Prpa and his staff are always available to answer any questions you may have concerning your surgery.

### **Q: How much pain can I expect after surgery?**

**A:** Everyone handles pain differently. We take a lot of effort to minimize post-operative pain. The first night is usually the most difficult and each day after that gets better.

- **Cervical (neck) Surgery:** It is normal for your neck pain to get worse after surgery. Your neck pain can radiate to the top of the shoulders and upper back. Please take your medications as instructed

### **Q: How long after surgery will my symptoms be gone?**

**A:** People usually fall into 3 categories:

1. When you wake up all your symptoms are gone and you just have post-operative pain.
2. Your symptoms are lessened and as time goes on they resolve.
3. You have the same symptoms and with time they resolve.

So, don't be alarmed if your symptoms are not resolved right away. Our nerves are one of the slowest healing parts of our bodies. Our bodies can never completely heal a nerve. So therefore you may always have some symptoms. It will take ONE YEAR after surgery to see what symptoms you may be left with.

### **Q: When can I drive after surgery?**

**A:** You **CANNOT** drive until you have the "OK" from Dr. Prpa to do so. As long as you need to continue taking the **Narcotic Pain Medications** prescribed by Dr. Prpa, **YOU CANNOT DRIVE**. Please feel free to discuss driving with Dr. Prpa at your follow-up appointment.

### **Q: How long do I need to wear my TED (compression) stocking after surgery?**

**A:** You should wear your compression stockings **FOR 2 WEEKS** following surgery. Wear them during the day and take them off before going to bed. Put them on again first thing in the morning. If you notice swelling in the calf or ankle, continue wearing them during the day until the swelling returns to normal

## Preventing Constipation after Back Surgery

Constipation is a common problem for many people recovering from back surgery, and frequently causes considerable discomfort and / or pain. While it is often not mentioned to patients as part of the recovery process, constipation, and its adverse side effects can be a significant challenge following back surgery.

There are many aspects of having back surgery that can contribute to constipation, including anesthesia, stress, dietary changes, use of pain medications and decreased activity.

Symptoms of constipation may include some combination of the following:

- Abdominal pain and bloating
- Nausea and/or vomiting
- Hard stools or inability to have a bowel movement

Recovering from the actual surgery is enough to focus on without having to deal with the negative side effects of constipation. Here are a number of actions that one can take to prevent the unpleasant and often painful side effects of constipation after back surgery:

## **Action to Prevent or Minimize Constipation**

- Increase activity as soon as possible after surgery. Walking is an excellent way to help bodily functions return to normal, and also help with healing from surgery.
- **Limit use of narcotic medications (e.g. Vicodin, Tylenol #3, Darvocet, Percocet, Oxycontin) to just what is necessary for adequate pain control. Narcotics slow down bowel motility, leading to constipation. Consider switching to a non-narcotic pain reliever (such as regular Tylenol or extra strength Tylenol) for pain control shortly after surgery to reduce the risk of constipation.**
- Begin using a fiber laxative, stool softener, or combination product after surgery to reduce the risk of constipation, particularly if one has experienced constipation in the past.
- Drink plenty of water and other non-caffeinated fluids (at least 40 oz per day), provided that the physician has not restricted fluid intake for another reason. Prune juice and apple cider (not apple juice) are also excellent natural laxatives.
- **Eat foods that are naturally high in fiber to stimulate the intestines. High-fiber foods include beans, whole grains and bran cereals, fresh fruits (such as watermelon, grapes), and vegetables (such as lettuce, carrots).**
- Limiting foods that contribute to constipation is also a good idea, such as cheese, meat and processed foods.
- Eat small, frequent high fiber meals throughout the day, rather than large meals to aid in the digestive process.

We are here to make your surgical experience as safe, smooth and pleasant as possible!

Office Contact Info (for all clinics): Phone (414)-939-5447 Monday – Friday 8:00am – 5:00pm  
Fax (262)-260-8968  
**Closed from 12:00p – 1:00p for lunch hour**

Racine Clinic  
**7200 Washington Ave. – Suite 101**  
Mt. Pleasant, WI 53406

Aurora St. Luke's Medical Ctr. **2900 W. Oklahoma Ave.** Milwaukee, WI 53215

- **Go to - Main Entrance by Emergency Room/Valet**
- **Pass registration desk to the Right**
- **(Ambulatory Treatment Center.) on the left**

[www.prpaspinesurgery.com](http://www.prpaspinesurgery.com)