

Providence Spine Surgery Notebook



**A GUIDE TO HELP YOU PREPARE FOR
AND RECOVER FROM SURGERY**

Table of Contents

Care provider information & phone numbers	4-5
Preparing for your surgery	6-16
Pre-operative appointments & medications	6-11
Planning for going home	12-14
Pre-op showering instructions	15-16
What to expect at the hospital	17-21
Continuing your recovering at home	21-24
Activity after spine surgery	25-33
No BLTs	26
Getting in and out of bed	27-28
Tips for daily living	31-34
Helpful resources	34-42
Medication and activity logs	42-44
Questions for your doctor	45
Specific orders	46-47
Showering & dressing instructions	46
Bracing instructions	47

Introduction

This booklet is a general guide for you and your family to use as you prepare for surgery and recovery. Write down questions you may have for your doctors. Your care team will give you instructions about what you should do before and after surgery. Bring your questions and this booklet with you to appointments and to the hospital.

Our goal is to ease your way as you prepare for and recover from spine surgery

Care providers and phone numbers:

Primary Care Doctor, Nurse Practitioner, or Physician Assistant

Surgeon

Surgeon, Nurse Practitioner, or Physician Assistant

Other treating doctors:

Important phone numbers

	Providence St. Vincent	Providence Portland	Providence Willamette Falls
Pre-Admit Clinic	503-216-1993	503-215-1874	503-650-6838
Hospital Information	503-216-1234	503-215-1111	503-656-1631
Spine Surgery Unit	503-216-3991	503-215-7883	503-657-6722
Pre-op Class Registration	503-216-1110		
Surgery Pre- Registration	503-215-9565		
Business Office	503-215-4300		
Diet, Pain, or Smoking Cessation Classes	503-574-6595 or 1-800-562-8964		

Guest housing information

Providence hospitals may have guest housing or reduced hotel pricing if you need to stay near the hospital the night before surgery. For assistance, please call the general hospital information phone number, or go to this website:

oregon.providence.org/our-services/g/guest-housing/

Preparing for Surgery

Schedule Appointments

- Pre-op appointment with surgeon

Date: _____ Time: _____

- Pre-admit clinic appointment

Date: _____ Time: _____

- Pre-op spine class Date: _____ Time: _____

- Surgery Date: _____ Time: _____

*Check-in time is usually 2-3 hours before surgery.

- Post-op appointments

Date: _____ Time: _____

Date: _____ Time: _____

- Other appointments for medical clearance:

Date: _____ Time: _____

Provider: _____

Date: _____ Time: _____

Provider: _____

Preoperative appointments

Here are some helpful suggestions to prepare for your upcoming spine surgery.

Ask any questions you may have about your surgery; no question is too small. Your surgeon will review information about your surgery before asking you to sign a consent. Here are some common questions to consider:

- What kind of surgery will you be doing?
- Will you be placing hardware or bone graft in my back or neck?
- What other choices do I have?
- What are the risks to my surgery?
- How much will the surgery help my symptoms?
- What will you use to help me control my pain after surgery?
- Will I need to wear a brace? Do I need to get fitted for brace before surgery?
- When can I drive?
- When can I go back to work, or do my usual activities?
- When can I travel or go on vacation?
- Where will I have my surgery?
- When will I go home?

Review your medications

Make a list of the drugs that you take. Write down the dose and how often you take them. This list should include any over the counter drug, vitamin or herbal supplement. Bring your medication list to your appointments.

Review your list with your surgeon and the pre-admit clinic. They will tell you which medications to stop and when to stop taking them. Stopping medications may:

- reduce bleeding during or after surgery
- keep your blood pressure from dropping too low
- help manage your blood sugar levels
- help your wound heal

Not all medications may be safe to stop. You may need a different medication or need to stop a medication slowly.

Talk to the doctor that ordered the drug if you need to stop taking it. Your doctor will tell you if it's safe for you to stop taking the drug.

Here are some questions to ask your doctor:

- I take aspirin, when should I stop taking it?
- Can I take nonsteroidal anti-inflammatory drugs (NSAIDs) after surgery?
- I am on blood thinners, when do I stop taking the medication? Do I need to start another medication before surgery?
- I take special medication for my rheumatoid arthritis, psoriasis, Crohn's, or other health problems. When do I stop medication?
- Should I take my blood pressure medication the night before or day of surgery?
- I am a diabetic, should I take my medication pills or insulin?
- When can I restart my medications?

Stop the following medications prior to surgery:

2 weeks before surgery

Stop taking all herbals, supplements & vitamins.

3-7 days before surgery

Stop taking all non-steroidal, anti-inflammatory medications (NSAIDs). Examples are Celebrex, Ibuprofen, Naproxen, Advil, Aleve, and Motrin.

Day of surgery

Take allowed medications with a sip of water.

Medication	Date to Stop medication	Take medication <u>with sip</u> of water day of surgery

Contact your treating providers

- Tell them you are having surgery.
- Ask them which medications you should stop before surgery (blood thinners, aspirin, diabetic, blood pressure, rheumatoid arthritis, psoriasis, or for other medications)

Make sure you are healthy enough for surgery

Talk to your surgeon about any current or past problems with

- **Sleeping:** unable to sleep 7 hours, waking up with pain, snoring, sleep apnea
- **Constipation, heartburn, or nausea**
- **Bladder:** leaking urine, urinating all the time, difficulty starting urine stream or difficulty urinating after surgery
- **Bleeding problems or blood clots**
- **Heart and lung problems**
- **Diabetes**
- **Depression or anxiety**
- **Infection after surgeries**
- **Radiation or chemotherapy**
- **Trouble swallowing**
- **Stop smoking or using nicotine products**

Studies show non-smokers heal easier than smokers. Nicotine slows bone healing. Talk to your doctor about how to stop smoking.

Planning for going home

Plan for who will give you a ride home. **Discharge occurs around 11 AM.**

Plan to have someone stay with you for the first couple of days once you are home. Let your surgeon know if this will be an issue.

You will need help with many common activities after surgery.

Walking & Feeding Pets



Driving



Housework



Laundry



Cooking



Dishwasher



Yard Work



Preparing your Home

- Clear stairs and pathways of any clutter.
- Remove throw rugs.
- Remove telephone or electrical cords from walk areas.
- Have a firm, straight-back chair with arm rests available at home for use after surgery. A chair seat that hits the back of your leg above the knee will be easier to get out of.
- Use folded blankets (not pillows) to build up low chairs or car seats.
- Place a table next to chair and bed for water, books and phone numbers.
- Store frequently used items on countertops in your kitchen and bathroom so you don't bend or reach overhead.
- Measure the following:
 - **Bed height:** _____ inches
 - **Toilet:** _____ inches
 - **Tub height:** _____ inches
 - **Chair or couch height:** _____ inches

Other things to do prior to surgery

2 weeks before Surgery

- Schedule an appointment with the pre-admission clinic to have pre-op tests done.
- Attend a pre-op spine class.

Day before Surgery

- Pack a small bag for hospital.
 - Try to have a bowel movement before surgery.
 - Take a shower with Hibiclens® (chlorhexidine) soap the night before and the morning of surgery (detailed instructions are on pages 14-15).
 - The anesthesiologist will usually call you the day before surgery to ask you about your medical and surgical history.
-

Do not eat or drink anything after midnight, unless your doctor or anesthesiologist tells you to. If you are allowed to take medications the morning of surgery, you may take them with a sip of water.

Paperwork

- Fill out your pre-op outcome form. Your answers are important to us. If you did not receive a copy from your surgeon or from class, you may call **503-216-1110**.
- If you need a medical release for work, talk to your surgeon's office. Try to do this at least 1-2 weeks before your surgery.

Pre-Operative Showers with Hibiclens®

You will take 2 pre-op showers to help prevent infection:

- 1. The evening before surgery*
 - 2. The morning of surgery*
-

Instructions

1. Change the linen on your bed. Don't let your pets sleep in the bed.
2. Remove all jewelry and piercings. Leave them off until after surgery
3. Use a fresh, clean towel and washcloth with each shower.
4. First, shampoo your hair with your regular shampoo. Wash your face and genital area with your regular soap. Rinse off with water.
5. Next, using ½ bottle of Hibiclens® with each shower and a clean washcloth, wash your body from your neck down to your toes. Focus on the area where your surgery will be and leave Hibiclens® on for 4-5 minutes before rinsing off. The Hibiclens® soap will not lather.
6. Have someone help wash your back if you are unable to reach it.
7. Do not use any of the following after your Hibiclens® shower: makeup, lotion, powder, deodorant, perfume, aftershave, or hair spray.
8. Put on clean clothes after each shower.

Do not get Hibiclens® on your face, eyes, ears, or genitals. If you do, rinse it off right away.

*If your doctor asks you to use a particular type of wipes instead of the Hibiclens®, follow your doctor's instructions.

What to bring to the hospital

- Loose fitting clothes or pants or shorts that do not need a belt. Wide neck shirts or shirts with buttons may be more comfortable after neck surgery.
- T-shirts if you will have a back brace
- Flat shoes with backs on them
- Brace if you already have it
- List of emergency contact numbers
- Pacemaker or defibrillator card
- Glasses, hearing aids and/or dentures
- List of questions for the doctor
- List of all medication, herbals, and vitamins
- This guide
- Your C-PAP or Bi-PAP machine from home
- Walker or cane if you are currently use one
- Copy of your advance directive or POLST form to the hospital if it is not already on file



What to Expect in the Hospital

Day of surgery

- Please arrive on time.
- When you arrive, enter through the hospital main entrance and check in with the admitting desk. You and family/friend will be brought back to short-stay unit.
- You may be in short stay longer than 2 hours before going into operating room.
- Your nurse will start your IV to give you fluids, medication, and review your health history.
- You will sign a consent form.
- Your nurse or doctor will mark your surgery site.
- Your anesthesiologist and surgeon may meet with you before surgery to answer any questions.

After your surgery

You will be in the recovery room for about 1-2 hours. Some patients will discharge home directly from the short stay a few hours after surgery. If you are staying overnight in the hospital, you will move to the nursing unit when your blood pressure, heart rate, and breathing are stable.

- You may have a tube (Foley catheter) in your bladder to drain urine.
- You may have a tube (JP or Hemovac drain) in your incision to drain fluid and blood.

Your nursing and surgery teams will closely monitor you. They will:

- Talk with your family and answer questions about your surgery.
- Check your breathing, blood pressure, heart rate, pain level, nausea, dressing, drain, how well you are moving your arms, and legs, and if you have any new numbness or weakness.

Things You Can Do During Your Recovery

Prevent constipation and nausea

- Take stool softeners to keep your bowel movements loose while you are taking pain medications.
- If you haven't had a bowel movement by the second day after surgery, ask for a laxative medication to help.
- Eat small meals and drink enough fluids.
- Take pills with yogurt, applesauce, or ice cream to help you swallow pills and coat your stomach.
- Sit in chair with all meals and walk in hallways with help.

Prevent Pneumonia

- Sit in chair and walk in hallways with help.
- Every hour when you are awake take deep breaths, cough, and use the incentive spirometer.



Prevent Blood clots

- Sit up in chair and walk in hallways with help.
- Pump your feet up and down when sitting and lying in bed.



- Wear the compression devices while in bed.



Pain

You can expect some increase in pain as your tissues heal from surgery. This is normal. Getting moving again will actually help you heal faster and decrease your pain over time. It is important to keep in mind that pain medications do not take away 100% of your pain.

Non-medication options to help with pain

- Walk. This will help with stiffness and decrease pain.
- Space out your activities throughout the day. Allow for rest periods.
- Reposition frequently. You might feel uncomfortable if you sit or lay in one position for too long.
- Use an ice pack around incisional area every 4 hours for 20 minutes at a time for 2-3 days after surgery.
- Music, meditation, and deep breathing exercises may help manage stress.
- Place pillows under your knees and between your legs when in bed.
- Place pillows under arms when sitting in chair with neck surgery.

Medications

- Your doctor will order pain medications and a muscle relaxer after surgery. These may have Acetaminophen (Tylenol®) in them. Do not take more than 3,000 mg of Tylenol in a day.
- Avoid taking anti-inflammatory medication, such as Celebrex®, or ibuprofen medications like Advil® or Aleve® (naproxen) if you had a spinal fusion.

Ask for pain medication when you notice your pain is increasing. You may need to take it more regularly the first few days and then slowly decrease.

Continuing Your Recovery at Home



- Have someone put your pet in another room until you are able to sit down. This is to prevent you from falling.
- For car rides longer than 20-30 minutes you might consider stopping briefly to walk around.
- You will feel tired for a few weeks. Remember to rest and relax, but do not lay in bed all day.
- Use neck or back brace as instructed by doctor.
- Do not smoke.

Pain medications

- Do not drink alcohol or use marijuana while you are taking pain medications.
- Do not stop taking pain medication suddenly, especially if you have been taking pain medication consistently for 3-4 weeks. Discuss with your doctor.
- No driving or operating machinery while on pain medication, or muscle relaxers, or until cleared by your doctor to drive.
- If you need refills of your pain medication, call your surgeon's office **2 business days** in advance.

As you begin to feel better, discuss with your healthcare provider before stopping any pain medication abruptly. Certain medications may need to be stopped slowly to prevent any complications.

Nutrition and constipation

- Swallowing difficulty and a sore throat are common after neck surgery, this will improve with time. Eat soft foods, and advance the thickness of foods, as tolerated. Remember to swallow small amounts of food or fluids at a time.
- Use stool softeners and laxative to prevent constipation.
- Drink plenty of fluids to stay well hydrated and eat proper nutrition to help with wound healing.
- Do not try to lose weight after surgery.

Wound care

- Keep your wound clean and dry.
- Do not let your pets sleep with you.
- You may have sutures, staples, fibrin glue, or steri-strips on your incision. Your doctor will remove your sutures or staples, and your steri-strips usually are left on until they fall off.
- Remove your dressing as instructed by your doctor.



- Don't soak your wound in water (bathtub, hot tub or swimming pools) until your doctor says it's okay.
 - You may take a shower when instructed by your doctor.
 - You may need to cover the incision in the shower. Your nurse will teach you how to do this. Carefully wash around incision with soap and water. Do not rub your incision. Gently pat dry the incision after a shower.
 - Change your dressing if it becomes wet.
 - Do not apply ointments or lotions to incision.
-

Always follow the instructions given to you from your surgeon.

Observe for signs of infection:

- Redness, warmth, and/or swelling developing around the wound.
- Yellow, green, or white (pus) draining from wound.
- Excessive drainage, foul odor, increasing pain at wound site, chills, or a fever greater than 101 degrees Fahrenheit.

You should call your surgeon for

- Signs of infection
- New weakness or numbness in your arms or legs
- Sudden increase in pain not control by pain medication
- Swelling in neck after neck surgery

- A headache that is worse when you are sitting or standing and better when you are laying down flat.
 - Difficulty swallowing
 - A rash, nausea, or vomiting
 - Swelling or pain in calf
 - Bowel or bladder problems (constipation, diarrhea, loss of control of bowel or bladder function, painful urination, difficulty or inability to urinate)
-

***PLEASE CALL YOUR PROVIDER WITH ANY
QUESTIONS OR CONCERNS***

CALL 911

WITH ANY LIFE THREATING EMERGENCY

(Shortness of breath or Chest pain)

Activity Restrictions after Spine Surgery

You will be asked to avoid certain activities while you heal from your surgery. This could last for several weeks to months. Your surgeon will let you know when it is safe to do these activities again.

Some patients will work with a physical therapist (movement specialist) or an occupational therapist (specialist that helps you to manage activities that occupy your day).

Remember: No BLTS

No Bending, Lifting, Twisting and Limited Sitting

NO BENDING



NO LIFTING



NO TWISTING



LIMITED SITTING



No Bending

- Do not bend from the waist.
- From a sitting position, your hands should not reach past your knees.

No Lifting

- Do not lift more than **10 pounds** after your surgery.
- Avoid pulling on chair levers or pushing up from chair arms.



A gallon of milk weighs 8 pounds

No Twisting

- Keep your head, shoulders, hips, and knees in line when you move. Roll like a log to get in and out of bed or move like a robot.
- Avoid reaching across your body. You may be twisting.
- Ask people to walk around and speak to you so you can see your face, or turn your whole body to look.

Limited Sitting

- Use good sitting posture when sitting in chairs.
- Sit in a chair that is high enough so you can easily stand.
- Sitting for a long time in a straight back chair may be uncomfortable. Adjust your position frequently.

No Overhead Reaching After Neck Surgery

- Keep your elbows below your shoulders when raising your arms.

General Precautions

- No strenuous activity: avoid running, jumping, jarring, pulling or pushing motions.
- Avoid sleeping on your stomach. Lie on your side or back with a pillow between your knees.
- Do not begin any exercise program, except walking without discussing with your surgeon first.
- Do not drive until your doctor says it's okay.

Getting In and Out of Bed

1. Roll onto your side



- Keep your knees together.
- Flatten your stomach muscles to keep your back from arching.
- Put your hands on the bed in front of you

2. Raise your body



- Push your upper body off the bed as you swing your legs to the floor.
- Keeping your back straight, move your whole body as one unit. Don't bend or twist at the waist.
- Let the weight of your legs help you move.

*Before standing, sit on the side of the bed.
If you feel dizzy, then wait to get up.*

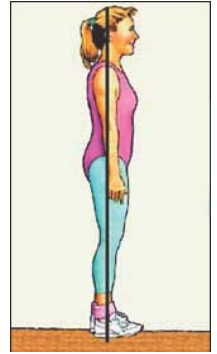
3. Stand up



- Lean slightly forward from your hip and roll onto the balls of your feet.
- Flatten your stomach muscles to keep your back from arching. Using your arm and leg muscles, push yourself to a standing position.

Standing

To help keep your spine straight, line up your ears, shoulders, and hips. Stand with your feet shoulder-width apart. Or, place one foot slightly in front of the other. Keep your knees relaxed and stomach muscles slightly flattened.



Turning

Protect your back while you stand or turn. Turning can twist your spine if you don't do it right. Keep the tips on this sheet in mind as you move.

- To turn, move your feet instead of twisting your body at the waist or neck.
- Turn your hips and shoulders together.
- Take short steps around.
- Try pivoting on the heel closest to where you're headed.
- Step forward out of the turn.
- Keep your knees relaxed and your stomach muscles tightened.



Sitting Down

Follow these steps to sit down. Reverse them to get back up.
Make sure the chair is behind you.

- Place one foot slightly behind the other.
- Tighten your stomach muscles. Bend forward from the hips, keeping your back straight.
- You may use the armrests for light balance only.
- Bend your knees. Use your leg muscles to lower yourself onto the seat.
- Scoot back in the seat until you are comfortable.
- Avoid sitting for longer than 20 minutes at a time without getting up and moving.



Stairs

- You will be able to go up and down stairs.
- Let your nurse and therapist know that you have stairs.

Increasing your activity level

- Gradually increase your walking time and frequency each and every day.
- Walk on smooth surfaces. Avoid walking up hills.
- Beginning with 5 to 10 min walks 3 to 4 times a day.
- Remember to keep your muscles strong and prevent blood clots.

Tips for Daily Living

These tips can help make some tasks easier, and will help protect your back.

Preparing your Home

Ask someone to help you prepare your home if you didn't do this before surgery. Checklist is repeated from page 13.

- Clear stairs and pathways of any clutter.
- Remove throw rugs.
- Remove telephone or electrical cords from walk areas.
- Have a firm, straight-back chair with arm rests available at home for use after surgery. A chair seat that hits the back of your leg above the knee will be easier to get out of.
- Use folded blankets (not pillows) to build up low chairs or car seats.
- Store frequently used items on countertops in your kitchen and bathroom so you don't bend or reach overhead.

Getting Dressed

- You will need to avoid bending at the waist and twisting when dressing.
- Sit up straight. You may bring your leg up and cross your opposite leg if you do not need to use your hands to help.
- Long handled equipment may be helpful if you don't have help. Not all patients need this equipment. It is not covered by insurance.
- Wear a T shirt or camisole under the back brace for comfort.

Bathroom Safety after Surgery

- If your movement is limited during recovery, ask a family member or friend to help prepare your bathroom. This helps make it safer and more comfortable while you heal. Use the tips below as a guide.



- Prevent slips and falls by using non-slip bathmats on your bathroom floor and in your tub or shower.
- Watch out for hazards, such as wet floors.
- You won't be able to pick up a dropped bar of soap. Using liquid soap or "soap on a rope" may be easier. To make a "soap on a rope":
 1. Cut off a nylon stocking at the hip.
 2. Place the bar of soap in the toe.
- Tie the stocking around your wrist.
- Talk with your occupational therapist if you need more instruction in using bath aids.

Using the toilet

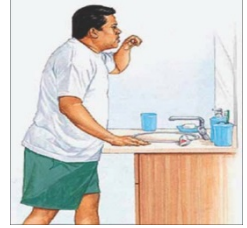
- Remember you will need to avoid bending at the waist and twisting when wiping after going to bathroom. If you find you have difficulty using the toilet paper to clean yourself without bending and/or twisting, an Occupational Therapist can help you solve this problem.
- If you had surgery that limits bending, you may need to use a commode chair or elevated toilet seat to raise the height of your toilet.

Showering

- Your first shower should be slightly cooler.
- You may need help to get positioned in the shower. Step into shower sideways to prevent twisting.
- Have someone in bathroom to hand your brace to you and help you in and out of shower.
- You may need to sit on a bath bench or shower chair while you bathe.
- Use a hand-held shower to wash if available. Bend at the knees and hips under the shower head to avoid arching your back.
- Use a long-handled sponge or long handled bath brush to wash hard-to-reach areas.

Washing at the Sink

- When brushing your teeth use a cup to spit into so you don't bend.
- While standing at the sink, bend your knees and hips. Keep your back in a neutral position.



Driving or riding in a car

- Move the front car seat all the way back to help you get into car.
- Use folded blankets (not pillows) to build up low seats in your car. A plastic bag on top of blanket will help with pivoting.
- To get in or out of the car, pivot on your buttocks and swing your legs in or out, keeping your knees together to prevent you from twisting.
- For a higher car, you may need a step stool or park next to a curb. Do not pull on the arm handles.

Helpful Resources

Certain lifestyle choices and health conditions can make it harder to heal after spine surgery.

Here are some tips to make sure you're ready for surgery and heal after surgery.

Eat a Healthy Diet

Eat enough food and healthy drinks to give your body fuel, protein, vitamins, minerals, and liquid to heal and get better.



Eat foods from all food groups:

- **Protein** (beans, eggs, chicken, fish, lentils, peanut butter, nuts, meats, or meat substitutes).
- **Dairy** (yogurt, milk, dry milk powder, chocolate milk, cheese, or fortified drinks like soy milk).
- **Vegetables**
- **Fruit**
- **Grains** (healthy cereals, grains, or starchy vegetables)
- Eat 2-3 meals daily
- Eat protein foods at all meals, especially at breakfast and after physical therapy.

Diabetes - If you have diabetes or high blood sugar

- It is important to get your blood sugar to the right level before and after surgery.

- Your doctor can tell you who can help you learn to manage your blood sugar.

Special Drink for Your Surgery

Your doctor may want you to drink a special drink 5 days before and 5-7 days after major surgery. This drink helps your body's immune system recover and your incision to heal.

Usually, you will drink 3 containers a day: **One drink after each of 3 meals.**

If you have diabetes you will drink **1/2 a container 6 times a day after each of 3 meals and 3 snacks.**

For more information on healthy eating:

- www.supertracker.usda.gov/
- www.choosemyplate.gov/food-groups/
- www.nutrition.gov/

If You Need to Lose Weight

- Weight loss efforts are usually stopped the week or two before surgery.
- Weight loss is usually avoided in the first weeks after major surgery or medical treatments because it slows healing.
- Talk to your doctor, surgeon or registered dietitian about when to start, stop and restart your weight loss program and about avoiding weight loss diet scams.

If You Need to Keep Your Weight the Same

- If you need to keep your weight the same before surgery or medical treatment, eat a healthy, balanced diet with extra protein foods.
- If your weight drops after surgery or major medical treatments, increase serving sizes at meals and snacks.
- Homemade shakes, smoothies, pre-made medical drinks (like Boost® and Ensure®), healthy snack bars and pre-made frozen meals can help, especially if energy is low or cooking food and meals is hard.
- If you lose 5 or more pounds after your surgery or treatment, be sure to tell your doctors and nurses.

If You Need to Gain Weight

- If you need to gain weight before surgery or medical treatments, eat a healthy diet with extra calories, protein, and vitamins and minerals from food
- Increase serving sizes at meals and snacks. Add foods like gravy, sauces, jam, avocado, oils and peanut butter to add calories.
- Homemade shakes, smoothies, pre-made medical drinks (like Boost® and Ensure®), healthy snack bars and pre-made frozen meals can help, especially if energy is low or cooking food and meals is hard.
- If you lose weight before or after your surgery or treatment, be sure to tell your doctor.

If keeping your weight right is hard, talk to your doctors and dietitian. They can help find other helpful ways to help you keep your weight where it needs to be to have a successful surgery and medical outcome.

There are dietitian available if you would like help. Before scheduling your dietitian appointment, please check with your health insurance for benefits or if prior approval is needed. Clients may also self-pay.

For information or to make an appointment, please call:

Providence St Vincent 503-216-2368

Portland Medical Center 503-215-5160

Providence Milwaukie Hospital 503-215-5160

Providence also offers classes in weight management, fitness and diabetes. Call Providence Resource Line, 503-574-6595, or visit www.providence.org/classes.

Help to Stop Smoking or Using Nicotine Products

Cigarettes, E-cigarettes, cigars, pipes, chewing tobacco

Smoking can make it harder for you to recover from surgery.

Smoking or use of tobacco can:

- Make it easier for your blood to clot. This increases your risk of getting a blood clot after surgery.
- Decrease the amount and quality of blood that goes to the skin and bones. This increases the amount of time to heal

after surgery and makes it harder for the bones to fuse together (in a spinal fusion).

We recommend that you stop using any nicotine products before and after surgery for several months or longer, depending on what your surgeon tells you.

Providence Smoking Cessation Classes and Support Group

Based upon the American Lung Association's Freedom from Smoking program, Providence Smoking Cessation Classes and groups are designed to help you quit smoking for good. You will learn a systematic approach to quitting through behavior modification techniques, coping skills, social support, and information on weight management, stress management and the role of medication. To register for a class, call Providence Resource Line at 503-574-6595 or 1-800-562-8964, or visit www.providence.org/classes.

Quit for Life®

In this telephone-based program, a coach helps you come up with a quit plan that works for you. This 12-month smoking cessation program offers the support of scheduled phone calls, written materials, and recommendations for medicines. To register, call 1-866-QUIT-4-LIFE (1-866-784-8454) or visit www.quitnow.net.

American Lung Association – Freedom from Smoking Online program www.ffsonline.org.

Tobacco Quit Line

This free service offers advice on quitting, telephone counseling, and referrals to stop smoking programs based on your health insurance coverage. **Call 1-800-QUIT-NOW (1-800-784-8669).**

Help with Managing Pain

Pain can wear you down. Feeling down or stressed can make your pain feel worse. Talk to your doctor if you have signs of depression or anxiety. Try to find other ways to continue with activities that bring joy to your day.

- Avoid sleeping on stomach.
- Use pillow between knees or under your knees.
- Use a cervical pillow or rolled up towel to support your neck for neck pain.
- Use pillows under arms when sitting in chair
- Getting plenty of sleep, at least 7 hours a night. Talk with your doctor if you have trouble sleeping
- Talk to your doctor if you are feeling depressed or anxious.
- Keep moving, this will help with pain.
- Rest

- Being around family and friends



- Meditation and relaxation techniques



- Deep breathing
- Music
- Decrease stress around you



Resources to Help Manage Pain

Classes at Providence: Call 503-574-6595 to register or online at:

<http://oregon.providence.org/our-services/h/health-and-wellness-classes/>

Pain Medication	Time Taken

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Activity Log	Date

Questions for your doctor:

Specific Orders after Surgery

Your surgeon may give you specific instructions that are not in this book. Here are some questions to ask.

Showering after surgery

- When can I take a shower? Date: _____
- Do I need to cover my wound in the shower?
 Yes No

For how many days? _____

*If you are using a waterproof dressing for showering, like Tegaderm™ or Opsite, remove it after the shower.

- Should I change my dressing every day?
 Yes No
- When should I stop using a dressing?
Date: _____

Other instructions:

Wearing a brace after surgery

Not every patient is instructed to wear a brace after surgery.

Braces are more likely to be ordered after a spinal fusion surgery.

Your surgeon will give you specific instructions on when to wear the brace.

- Should I wear the brace all the time? Includes while in bed and out of bed?
 Yes No
- Only wear the brace when out of bed?
 Yes No
 Put the brace on when lying down.
 Sit on the edge of bed to put the brace on.
- Ok to take brace off in shower after sitting down?
 Yes No
- Ok to remove neck brace while eating?
 Yes No

Other instructions:
