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Lifespan Physician Group, Inc.
Neurosurgery
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Discharge Instructions for Patients After ACDF

Success of the Surgery

A successful result after an anterior cervical discectomy and fusion (ACDF) surgery depends on a positive attitude and efforts by the patient to aid recovery. Your pre-operative symptoms may take weeks or longer to improve fully. Generally, symptoms such as pain shooting into the arm improve first, followed by motor weakness. Numbness is often the last symptom to improve. Pain in the neck itself may be due to many factors and may improve slowly or persist to some degree.

Care of Your Incision

If your incision was closed with buried stitches, you can shower three days after the surgery, but you should not scrub your incision or soak it in a pool, hot tub, or tub bath for at least two weeks. It is okay to gently pat it dry. If you need a hard cervical collar you will be instructed on how often to wear it. Soft (foam) collars can be used at anytime if they make you more comfortable.

Slight drainage the first day or so, limited swelling, or mild bruising is common and usually not of concern. If there is significant leaking or any marked redness, or a large amount of swelling, you should call the office at (401) 606-6360.

Pain Management

Most patients after ACDF and similar

surgeries complain more of a sore throat than pain in the incision itself. Trouble swallowing large pills or dry food is common. Pain in the back of the neck and in-between the shoulder blades, lasting for weeks after the surgery, is very common and usually not a cause for concern. Ice and/or heat can be helpful to decrease the discomfort.

You will be given a prescription for a narcotic medication after the surgery, if you need it. If your pain medication does not already contain Tylenol (acetaminophen) you can use Tylenol in addition to the pain medicine. It is okay to use an NSAID such as ibuprofen along with the narcotic occasionally, but long-term daily use may decrease bone healing. As your pain improves, you should gradually decrease the narcotic medication, and our office does not continue pain medicine after this surgery for more than 2-3 weeks. Please read the opioid medication and pain management agreement information you were given in the office. Refills of narcotic medication are given ONLY during office appointments, and you need to bring in your pill bottle with you.

Activity

Unless you have been instructed otherwise, you should focus on gentle walking the first two weeks after the surgery. You should start with brief walks in the house, and gradually increase the time and speed of your walks. It is best to limit stair walking to one or two times a day for the first week. As you feel better, you should start to take longer walks outside, including walking up inclines. You should avoid driving or being in the car for the first two weeks. After that, start with short drives with another person in the car. You should also avoid lifting anything heavier than a half-gallon of milk for the first two weeks. You may then start to lift light objects if you are comfortable. Please remember, if it hurts, do not do it! Sexual activity can be resumed when you feel comfortable. You can discuss returning to an exercise regimen with your physical therapist.

Therapy

For most patients, working with a physical

therapist after the surgery can help with the recovery process. This referral will be made during your first post-operative appointment about two weeks after the surgery.

Diet and Medication

You can resume your regular diet and most regular medications immediately after the surgery. The plan for restarting blood thinners such as Aspirin, Warfarin, or other prescription blood thinners will be discussed during your discharge. Constipation is a common problem after spine surgery. Over the counter stimulants and stool softeners can be beneficial, along with plenty of fresh water.

Work

Most patients with lighter duty jobs return to work 4-6 weeks after the surgery. Patients whose jobs require heavy lifting may take longer. Your return to work will be discussed in your office follow up appointment.

Follow-Up Appointments

Your follow-up appointment should have been set up at the time of your pre-operative visit. It is usually about two weeks after the surgery. You will need to have neck x-rays done on the day of the appointment. If you're not sure when this appointment is, call the office at 401-606-6360.

What to Watch For

These symptoms should cause you to call immediately or dial 911 to go to the Emergency Department.

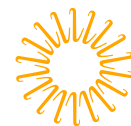
- Large swelling in the neck with trouble breathing
- Paralysis or inability to fully move your arms or legs

- Severe chest pain, difficulty breathing
- Loss of control of your bowels and bladder

The following symptoms may indicate a problem. You should call the office number listed below.

- Fever higher than 101 °F
- Increasing neck and/or arm pain
- Difficulty passing urine
- New numbness or change in symptoms from before surgery
- Redness or drainage from the incision

For questions after the surgery, please call our office at 401-606-6360. If you feel you have an urgent problem outside of office hours, go to the nearest Emergency Department.



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