The Spine Center utilizes a team approach to care for patients having spine surgery. Specific responsibilities of your team members are outlined below.

- **Surgeons:** Dr. Hsu, Dr. Kondrashov or Dr. Zucherman will perform your surgery. The surgical team communicates daily with your therapists and your nurse regarding your needs and goals.
  - Dr. Ken Hsu: (415) 750-5836
  - Dr. Dimitriy G. Kondrashov: (415) 750-5847
  - Dr. James Zucherman: (415) 750-5835
- **Physician Assistant/Orthopaedic Resident/Spine Surgery Fellow** will be assisting the doctor during surgery and will assist with post-op care. They will be visiting you daily to assess your post-op course.
  - MyLinh Bui, PA-C: (415) 750-5502
  - Kristin Alderisio, PA-C: (415) 750-5725
- **Physical Therapist (P.T.):** Your physical therapist will provide you with information and education regarding your precautions and exercises. Your physical therapist will teach you how to get in and out of bed and how to walk within your restrictions. You will also learn how to monitor your activity and progress safely.
  - PHYSICAL THERAPY PHONE NUMBER: (415) 668-1000, EXT. 4997
- **Occupational Therapist (O.T.):** Your occupational therapist will help you address daily activities you will encounter at home such as dressing, bathing, showering and toileting. You will learn how to use adaptive tools to make these activities easier and safer within your restrictions.
  - OCCUPATIONAL THERAPY PHONE NUMBER: (415) 668-1000, EXT 6670
- **Orthopedic Nurse:** Pain control, operative care and safety are provided by your nurse, 24 hours per day.
- **Internist:** The Internist will be available to you during your hospitalization to help monitor post-op medications and other medical concerns which might arise in conjunction with your surgery, if necessary.
POST-OPERATIVE INFORMATION

Following are brief definitions for your information. Your therapist and surgeon will discuss the specific procedure you had performed.

• **Cervical Laminoplasty** - This procedure will relieve pressure on the spinal cord. Titanium plates are inserted, to widen the space. This keeps pressure off the spinal canal. The incision is in the back of the neck.

**Pain:** After your surgery, you will experience neck pain from the operation. This will resolve as you recover.

**Hospitalization:** You will remain in the hospital for approximately 3 to 5 days. Most patients are able to return to all activities within a week.

**Activity/Pain at Home:** You will have pain after you leave the hospital. The key to managing your pain at home is activity management. As you heal, the inflammation will decrease and you will be able to increase your activity in small amounts. You must manage your activities to prevent flare-ups by following the recommendations of your therapists.

• Pain issues will be managed by your surgeon unless you have a Pain Specialist. All pain medication questions should be referred to the doctor or physician assistant who prescribed your discharge pain medication.

**Precautions:**

• You will be wearing a cervical collar for approximately 6 weeks after surgery.

• **Do not lift more than 5 - 10 lbs.**
GUIDELINES:

- **Log Rolling** - This is a technique to turn in bed. Tighten stomach muscles, move shoulders and hips at the same time to prevent twisting the spine and roll like a log. Twisting is painful and stressful to the surgical site.

- **Getting Out of Bed** - Log roll then slide your legs over the edge of the bed together. Push on your elbow and hand, bracing your stomach muscles and come to sit with shoulders and hips moving together. Do not bend sideways. Bending sideways is painful and stressful to the graft site.

  Gently move buttocks to the edge of the bed. Push with your legs as you stand straight up. Do not bend forward.

- **Sitting** - Sit on high chairs with armrests. Low chairs are difficult to get up and down from while maintaining good posture. Do not sit in chairs with wheels.

- **Walking** - You will walk with your therapist while in the hospital. Walk as far as you can comfortably tolerate. Do not walk with a cane as it tends to make walking asymmetrical. If the physical therapist recommended a walker, use it until you can walk without limping.

- **Toileting:**
  - Refer to sitting precautions (see above).
  - Do not strain to have a bowel movement.

  Push with your legs to stand; avoid bending forward as it puts pressure on your back.
Dressing - Wear loose fitting clothes and lightweight, comfortable walking shoes. Put on shirts in standing while keeping the arms close to the sides of your body. Fasten bras in front, then slide around to the back. Use a reacher or dressing stick to get pants over your feet. Use your sock-aid to put socks on. DO NOT reach or twist while getting dressed. Wear elastic laces or slip-on shoes if you do not have help at home to tie your shoes. Your therapists will demonstrate and assist you in proper body mechanics while dressing.

Showering - Use a long-handled sponge to reach your feet and back while maintaining a straight back. Keep arms in close to your body to prevent overreaching and twisting when washing. Keep soap within easy reach - approximately chest height. DO NOT bend over to pick up anything off the tub ledge or on the floor. A shower caddy eliminates the need to bend. Use soap on a rope, tie soap in an old nylon stocking to keep from dropping, or use liquid soap. DO NOT take a tub bath until cleared by your physician.

Kitchen - Keep lightweight items in the refrigerator at chest height and stand in close to reach them. Keep any dishes/utensils needed to prepare food at counter level where you can easily reach them. Prepare lightweight microwave meals. Keep weight limit at less than 2 pounds (refer to weight list at end of this packet). Brace abdominal muscles when turning on tap at sink; don't bend. DO NOT load or unload the dishwasher or cook anything in a standard floor oven.

Housework - Light housework is fine to do. Dusting, cooking, ironing, sweeping and laundry are permitted as long as you use good body mechanics and you keep your 2 pound lifting limit in mind. Vacuuming, mopping, windows, mowing the lawn, etc., are considered heavier chores and are to be avoided until you the physician clears you. If you have any questions as to what constitutes light versus heavy work, CALL YOUR THERAPIST!

Driving - You may not drive until your surgeon approves it. You may not drive in any brace. You may ride as a passenger in a reclined position.

Sex - Do not have sex until you see your physician at your 4-6 week post-operative appointment. Talk with your therapist before you leave the hospital if you have questions.

Work - Consult your physician regarding return to work.

Pets - You cannot walk your dog on a leash until cleared by M.D.
Hospital Discharge and Spine Center Appointment

• Make your 4 - 6 week post-operative appointment with your spine surgeon when you go home.

• Dental work: Always take antibiotics before dental cleaning or dental work. Notify your dentist that you have hardware in your body.

REASONS YOU MUST CALL THE SURGEON:

• CHILLS AND NIGHT SWEATS
• NEW WEAKNESS OR NUMBNESS
• FEVERS
• DIFFICULTY CONTROLLING URINATION OR BOWEL MOVEMENTS
• NEW TENDERNESS AND/OR SWELLING IN THE LEGS

Any concerns/questions regarding exercises or physical activities, please contact your therapist.
DO YOU KNOW THE WEIGHTS OF SOME COMMON OBJECTS?

ATTACHE CASE (HALF FULL) 5 LBS.
BAG OF GROCERIES (LIGHT) 5-6 LBS.
BAG OF GROCERIES (MEDIUM) 9-10 LBS.
4 CHINA PLATES 4.5 LBS.
CHINA COFFEE CUP 0.5 LBS.
2 CHINA SOUP BOWLS 1.5 LBS.
FULL MR. COFFEE CARAFE 4.4 LBS.
GALLON OF ICE CREAM 2 LBS.
S.F. YELLOW PAGES A-L 2.8 LBS.
MEDIUM GLASS MIXING BOWL 2.0 LBS.
DESK TELEPHONE 2.4 LBS.
LARGE CAN OF TOMATO JUICE 3.2 LBS.
1/2 GALLON OF MILK 4.2 LBS.
STEP STOOL 6.1 LBS.
2 SHEETS, 2 PILLOW CASES (DOUBLE BED) 3.2 LBS.

** POST ON YOUR REFRIGERATOR FOR YOUR REFERENCE **