



*Life in Motion*

**Dr. Hammer**  
**3909 9<sup>TH</sup> AVE SW**  
**Olympia, WA 98502**  
**360-570-3460**

**Discharge Instructions**  
**Anterior Cervical Discectomy and Fusion**

**Medications:**

Avoid taking Advil, Motrin, Ibuprofen, Aleve, or other NSAIDs (non-steroidal anti-inflammatory drugs) for 3 months after surgery.

Avoid taking blood thinners such as Aspirin, Plavix, Coumadin, Warfarin, or Argatroban  
**UNLESS EXPLICITLY CLEARED BY DR. HAMMER.**

You will be given a list of medications for home. This will include pain medication, anti-nausea, stool softener and laxative.

You can take Tylenol for pain if you do not need narcotic pain medication, but remember that many kinds of narcotics, such as Vicodin, have Tylenol in them. Avoid taking more than 3000 mg of Tylenol (acetaminophen) in a 24 hour period

You should resume your previous medications. Any changes will be noted on your discharge medication list.

You will be given a prescription for any new medications prescribed in the hospital

**\*\*CONSTIPATION:** The pain medication often causes constipation, take the prescribed stool softener (Colace) and Miralax daily as long as you are on the pain medication. You may also add Senna to Miralax. Limiting the amount of narcotics will help improve constipation. Increase fluids, fresh fruit (prunes) and vegetables high in fiber. If you have not had a bowel movement within 1-2 days after returning home from the hospital, over the counter medication may be purchased at most drug stores: Magnesium Citrate (liquid), suppository, or enema. Start this by day 3 or 4 if unable to have a bowel movement. Please call our office for further suggestions to help with this.

**Neck Incision:**

Your neck wound will have a dressing that is made up of island dressing and/or steri-strips. There are dissolvable sutures under the skin that do not need to be removed. These help hold the skin together until it heals. The steri-strips will fall off by themselves. You will be contacted and scheduled by Dr. Hammer's office for a wound check appointment for 10-14 days after surgery if you were not already scheduled. Any residual steri-strips will be removed at that time.

**-Icing** (20 minutes on, 20 minutes off) the incision will help with swelling. Eating popsicles or ice chips will help reduce swelling of your throat as well as soothe the sore throat. DO NOT USE HEAT PACKS ON THE INCISION, THIS COULD CAUSE AN INFECTION.

**Call the office at (360) 709-6223 if there is excess drainage on the steri-strips/dressing. It is normal to see some drainage on the steri-strips, but they should not be soaked with blood.**

You had surgery on the front of your neck, it is normal to have a feeling of fullness in your throat, or a sore throat. To get to the spine from the front, your esophagus and wind pipe are moved out of the way. You may have some difficulty swallowing, but you should be able to take liquids well.

**Call immediately if you notice a lot of swelling in your throat, have difficulty swallowing liquids, or have difficulty breathing. If you have difficulty breathing call 911.**

**Collar:**

You may have been asked by Dr. Hammer to wear a cervical collar. The purpose is to remind you not to move your neck, but it will not keep you from moving your neck if you try. Unless specified by Dr. Hammer, you do not need to wear your cervical collar in bed when your head is on a pillow, while sitting up in a chair or while eating. You can take it off to shower. You should wear the cervical collar through your follow up visit. You may discuss the duration you need to wear the collar at that time but most people will be taken out of the collar at 6 weeks.

You may have had metal plates and screws (made of non-magnetic titanium so that it will not interfere with an MRI scan) to stabilize your neck as part of the surgery. This will stabilize the bones until a solid fusion has occurred.

**Driving:**

It is best not to drive for the first 3 weeks after surgery. This is because driving involves a lot of bending, twisting, and turning of the neck. You should not drive while you are taking narcotic pain medication. If you are wearing a collar you should not drive unless cleared by Dr. Hammer.

**Watch for the following signs and symptoms and call the office if they occur:**

Temperature greater than 101° F  
Persistent drainage from the wound of blood or clear fluid  
Any drainage of pus from the wound  
Increasing redness and swelling around the incision  
Separation of the wound edges

Do not apply any lotions, ointments, or other products to your incision unless directed by your physician

**Fever:**

Some patients have low grade fevers (99°-101°F) in the immediate post operative period. This is almost always due to the fact that your lungs are not fully re-expanded after the general anesthetic.

You can treat this fever with Tylenol but it is important to try to cough the phlegm out of your lungs, take deep breaths to re-expand your lungs, and begin to increase your activities as tolerated

Wound infections are rare in the first couple days after surgery. If you have a low grade fever, try coughing and deep breathing.

**Activities and Restrictions:**

Avoid heavy lifting (greater than 10 lbs), bending, or straining.  
Do not sit for long periods of time, including long car rides  
Avoid any activities that put a strain on your neck

It is normal to feel tired after the operation. Your body is using all of its energy to heal itself and therefore, it is normal to be fatigued after even small activities. Your strength will gradually improve on a daily basis. The wound will not open with activity or normal movement. Activity may cause some discomfort but it is not dangerous. Do not worry about causing harm to yourself by increasing your activities. The guiding principle for your activities should be that "if it hurts, don't do it." You can gradually increase your activities by walking short distances at first then increasing the distance before doing anything else.

You should avoid returning to work until cleared by Dr. Hammer

**Showering:**

You may shower on the 4<sup>th</sup> day after surgery. Remove your bandage as it is not waterproof and a wet dressing left on the incision may cause an infection. **Do not scrub the incision.** Let the water run over it and pat it dry. Do not submerge the incision underwater in a bathtub, swimming pool, or hot tub until the wound has completely healed.

**Diet:**

You may resume your regular diet. Nutrition is extremely important for wound healing. You may be instructed to take vitamin supplements such as a multivitamin, and Calcium with Vitamin D. These can be purchased at most grocery stores or pharmacies. In addition, nutritional shakes such as Ensure or Boost can also provide supplemental nutrition.

**Symptoms:**

You may experience pain, numbness, weakness, or tingling that was present prior to surgery that persists. This may last awhile as the nerve needs time to heal.

**General:**

Smoking inhibits wound healing and increases your chances of the bone fusion not healing, creating a “pseudoarthrosis.” This can lead to persistent pain and require additional surgery in the future. **Do not smoke!**

Remember; ask your nurse or physician if you have any questions or if you do not understand any instructions. You may also call the clinic with any questions.

**For any post-operative problems or concerns, call  
(360) 709-6223**