

Cervical Disc Replacement Discharge Instructions

Congratulations on completing your cervical disc replacement surgery! These instructions will help guide your recovery at home. Please read them carefully and keep them for reference.

Activity Guidelines

Walking and Movement

- Start walking the day after surgery and gradually increase your walking time each day
- Walking is one of the best activities for your recovery - aim to walk several times throughout the day
- You may climb stairs, but take your time and use the handrail
- Listen to your body and rest when you feel tired

Neck Movement and Exercises

- **You may begin gentle neck range of motion exercises starting within the first week after surgery**
- One of the benefits of disc replacement is that it preserves motion at the operated level[\[1\]](#)
- Move your neck slowly and comfortably in all directions: looking up and down, turning side to side, and tilting your ear toward your shoulder
- Stop any movement that causes sharp pain
- Avoid sudden or forceful neck movements
- Do not sleep in awkward positions that strain your neck
- Gentle neck movements help maintain the mobility of your disc replacement

Returning to Activities

- Most patients return to driving within 12 days after cervical disc replacement[\[2\]](#)[\[3\]](#)
- You may resume driving when you are no longer taking narcotic pain medications and can comfortably turn your head

- Most patients return to work within 14 days, though this varies based on the type of work[\[2\]](#)[\[3\]](#)
- Sedentary or desk work can typically be resumed sooner than physically demanding jobs
- Disc replacement allows for earlier return to normal function compared to fusion surgery[\[1\]](#)
- Gradually increase your activity level as tolerated
- Avoid high-impact activities and contact sports until cleared by your surgeon
- Most patients are able to return to rigorous physical activity after 3 months[\[4\]](#)
- **You do not need to wear a neck brace** - disc replacement typically does not require postoperative external immobilization[\[1\]](#)

Pain Management

- Some pain and discomfort after surgery is normal and expected
- Take your pain medications as prescribed
- Most patients are able to stop taking narcotic pain medications within 6 days after cervical disc replacement[\[3\]](#)
- Use ice packs on your neck for 15-20 minutes at a time to help reduce pain and swelling
- Pain typically improves gradually over the first few weeks

Celecoxib (Celebrex) - If Prescribed

- **Take celecoxib exactly as prescribed by your surgeon**
- This medication may help prevent abnormal bone formation (heterotopic ossification) around your disc replacement[\[5\]](#)
- Take celecoxib with food to reduce stomach upset
- Continue taking it for the full duration prescribed by your surgeon
- Do not stop taking it early without talking to your surgeon first
- Contact your surgeon if you experience stomach pain, black stools, or signs of bleeding

Wound Care

Showering

- You may shower **24 hours after surgery**[\[6\]](#)
- Let water run gently over your incision - do not scrub it
- Pat the incision dry with a clean towel after showering
- **Do not take baths, use hot tubs, or go swimming** until your surgeon says it is safe (usually 2-4 weeks)

Skin Glue Care

- Your incision is closed with skin glue (also called surgical adhesive)
- The glue will peel off on its own in 7-14 days - do not pick at it
- You do not need to apply any ointments or creams to the incision
- Keep the area clean and dry between showers
- It is normal to see some bruising or swelling around the incision

When to Call Your Surgeon

Contact your surgeon's office right away if you notice:

- Increasing redness, warmth, or swelling around your incision
- Drainage or fluid leaking from your incision
- Fever over 101.5°F (38.6°C)
- Severe or worsening neck or arm pain
- New numbness, weakness, or tingling in your arms or hands
- Difficulty swallowing that gets worse or does not improve
- Difficulty breathing or shortness of breath
- Difficulty urinating or loss of bowel/bladder control
- Severe headache or changes in vision

Swallowing and Eating

- Some difficulty swallowing is common after anterior cervical surgery and usually improves within a few weeks
- Start with soft foods and gradually advance your diet as tolerated
- Take small bites and chew thoroughly
- Drink plenty of fluids to stay hydrated
- If swallowing difficulty persists or worsens, contact your surgeon

Follow-Up Appointment

You have a follow-up appointment scheduled for approximately 2 weeks after surgery. Please call the office if you did not receive an appointment time or need to reschedule.

At this visit, your surgeon will:

- Check your incision healing
- Assess your recovery progress
- Discuss when you can return to work and normal activities
- Answer any questions you have

What to Expect After Disc Replacement

- Relief of pre-operative symptoms occurs in approximately 89% of patients[\[7\]](#)
- Most patients (92%) are able to return to full pre-operative activity[\[7\]](#)
- Disc replacement has a low rate of complications, with most being minor[\[2\]\[7\]](#)
- The procedure preserves motion at the operated level, which may reduce stress on adjacent discs[\[1\]\[8\]](#)
- Long-term results show that disc replacement is equivalent or superior to fusion in many measures[\[8\]](#)
- Most patients experience significant improvement in neck and arm pain after surgery[\[2\]](#)

Important Reminders

- Keep all follow-up appointments with your surgeon

- Do not smoke - smoking slows healing and increases complication risk
- Maintain a healthy diet and stay well-hydrated
- Get plenty of rest, but avoid staying in bed all day
- Gradually return to your normal routine as you feel able
- Continue your gentle neck exercises as tolerated

If you have any questions or concerns about your recovery, please contact Dr. Foster's office at Olympia Orthopaedic Associates.

References

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2. [Practical Answers to Frequently Asked Questions in Anterior Cervical Spine Surgery for Degenerative Conditions](#). Subramanian T, Kaidi A, Shahi P, et al. The Journal of the American Academy of Orthopaedic Surgeons. 2024;32(18):e919-e929. doi:10.5435/JAAOS-D-23-01037.
3. [Recovery Kinetics After Cervical Spine Surgery](#). Subramanian T, Shinn DJ, Korsun MK, et al. Spine. 2023;48(24):1709-1716. doi:10.1097/BRS.0000000000004830.
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8. [Cervical Disk Arthroplasty](#). Koreckij TD, Gandhi SD, Park DK. The Journal of the American Academy of Orthopaedic Surgeons. 2019;27(3):e96-e104. doi:10.5435/JAAOS-D-17-00231.