

Deformity Spine Surgery Discharge Instructions

Congratulations on completing your spine deformity 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[\[1\]](#)
- 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
- Early movement after surgery helps reduce complications and speeds your recovery[\[1\]](#)
- Listen to your body and rest when you feel tired

Important Activity Precautions

- **Avoid prolonged forward bending activities for at least 3 months after surgery**[\[2\]](#)
- Forward bending puts extra stress on your pelvic fixation screws and could increase the risk of hardware loosening
- Activities that require bending forward include: weeding, gardening, farm work, picking items up from the floor, getting down on all fours, trimming toenails, and some personal hygiene tasks[\[2\]](#)[\[3\]](#)
- When you need to pick something up, bend at your knees instead of your waist, or ask for help
- Avoid heavy lifting, pushing, or pulling for at least 3 months
- Some patients may need to use assistive devices (like a reacher/grabber tool) to help with activities that would require bending forward[\[4\]](#)

What Activities You Can Expect to Do

- Most patients are able to return to light activities and walking without restrictions[\[4\]](#)

- Standing upright, doing laundry, light kitchen chores, and reaching for objects at heights typically become easier after surgery[\[3\]](#)
- **Most patients (97%) are able to return to driving** within an average of 4 months after surgery[\[4\]](#)
- **Most patients (88%) who were working before surgery are able to return to work** within an average of 5 months[\[4\]](#)
- The majority of patients report improved ability to walk and navigate stairs after recovery[\[4\]](#)
- Be patient with your recovery - it takes time to adjust to the changes in your spine, and some activities may remain more difficult even after healing[\[2\]](#)[\[3\]](#)

Returning to Activities

- Sedentary or desk work can typically be resumed within 2-3 months
- Light physical work may take 3-6 months before you can safely return
- Gradually increase your activity level as tolerated and as directed by your surgeon
- Avoid high-impact activities and contact sports until cleared by your surgeon

Back Brace (If Prescribed)

- **Wear your back brace exactly as directed by your surgeon**
- Your surgeon may prescribe a brace to help with pain management and comfort during healing[\[5\]](#)
- The most common type of brace used is a TLSO (thoracolumbosacral orthosis)[\[5\]](#)
- Most patients wear the brace for 6 to 12 weeks after surgery[\[5\]](#)
- Your surgeon will tell you when to wear the brace (such as when walking or sitting) and when you can remove it
- Your surgeon will tell you when you can stop wearing the brace
- Research shows that bracing does not prevent mechanical complications or improve fusion rates, but it may help with pain control in the early recovery period[\[6\]](#)[\[7\]](#)

Medication Instructions

Pain Management

- Some pain and discomfort after surgery is normal and expected
- Take your pain medications exactly as prescribed
- Use ice packs on your back for 15-20 minutes at a time to help reduce pain and swelling
- Pain typically improves gradually over the first several months

Important Medication Restrictions

- **Do not take ibuprofen (Advil, Motrin), naproxen (Aleve), or other anti-inflammatory medications (NSAIDs)** unless your surgeon specifically tells you it is safe
- These medications may interfere with bone healing and fusion
- Use acetaminophen (Tylenol) for mild pain relief instead

Other Prescribed Medications

- Take all other medications exactly as prescribed by your surgeon
- Do not stop taking any medications without talking to your surgeon first
- Contact your surgeon if you experience side effects from any medications

Wound Care

Showering

- You may shower **24 hours after surgery**
- 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 4-6 weeks)

If You Have Skin Glue:

- 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

If You Have Sutures or Staples:

- Your incision is closed with sutures (stitches) or staples
- Keep the area clean and dry between showers
- Do not apply any ointments or creams to the incision unless your surgeon tells you to
- Your sutures or staples will be removed at your follow-up appointment (usually around 2 weeks after surgery)
- 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 back or leg pain
- New numbness, weakness, or tingling in your legs
- Difficulty urinating or loss of bowel/bladder control
- Severe headache or changes in vision
- Wound edges that are separating or opening
- Inability to walk or stand

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

- Remove sutures or staples if you have them
- Assess your recovery progress
- Discuss when you can return to work and normal activities
- Answer any questions you have

Physical Therapy and Rehabilitation

- Your surgeon may recommend physical therapy to help you safely return to your normal activities[\[8\]](#)
- Physical therapy typically begins several weeks to months after surgery
- Your therapist will guide you through exercises to improve strength, flexibility, and function while protecting your fusion
- Continue gentle walking and movement exercises at home as tolerated

Important Reminders

- **Do not smoke** - smoking significantly slows healing, increases complication risk, and can prevent your fusion from healing properly[\[9\]](#)
- 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
- Keep all follow-up appointments with your surgeon
- Be patient with your recovery - deformity surgery is a major operation and full recovery takes many months
- Despite some limitations in certain activities, most patients experience significant improvement in their quality of life, pain levels, and ability to perform daily activities after surgery[\[4\]](#)[\[9\]](#)

What to Expect During Recovery

- Your spine will be straighter and more balanced after surgery, which should improve your posture and reduce pain[\[9\]](#)

- Some activities, especially those requiring forward bending, may remain more difficult even after full healing[\[2\]\[3\]](#)
- Most patients report high satisfaction with their surgery results despite some activity limitations[\[3\]](#)
- Full recovery and return to most activities typically takes 6-12 months
- Continued improvement in pain and function occurs over the first year after surgery

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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8. [Post-Discharge Care Interventions to Support Patient Recovery After Elective Degenerative Spine Surgery: A Systematic Review](#). Lorenzen MD, Wickstrøm LA, Andersen MØ, et al. European Spine Journal : Official Publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research Society. 2025;34(3):1042-1054. doi:10.1007/s00586-024-08622-x.
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