



Anterior Cervical Discectomy and Fusion

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

-Your incision will be assessed at your 1st post-operative visit. Your wound is closed with Dermabond-A medical grade superglue. There are no sutures you will need removed.

-You may shower the day after surgery. There is no need to cover the incision. **Do not take baths, soak in a hot tub or swim until we have assessed your incision.** Gently clean with antibacterial soap and pat the incision area dry. -Do not scrub the incision site or put any creams or ointments on the incision site.

Collar

-You may be required after surgery to wear a collar. You should wear the collar anytime you are out of bed. Our office will let you know how long you will need to wear the collar. You do not need to sleep in your brace unless instructed to by the doctor.

X-ray

-X-rays will be taken in the office routinely. It takes approximately 1 year for us to see complete fusion. X-rays will be taken every three months with your follow up appointments.

Pain Relief

-Our office will provide you with prescription pain medication to help with your surgical pain.

You should use these medications only as directed.

-You will need to avoid anti-inflammatory medications for 1 year following surgery. Use of these medications could delay the healing of your fusion.

-Contact your pharmacy to process all refill requests.

No medication will be processed on the weekend.

-You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

-The best exercise is walking. Small amounts done frequently are best. Increase your activities slowly. Follow the instructions given to you by the physical therapist at the hospital prior to your discharge.

-Repetitive activities using your arms may aggravate muscle spasms around your neck and upper back. Modify your activity with this in mind. Do not lift above your head for the first 6 weeks following surgery. Do not lift more than 5-10lbs for the first 6 weeks after surgery.

-Do not smoke. Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

-You may drive 2 weeks after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the

influence of pain medications. **Do not drive while wearing a collar; it restricts you from turning your head side to side.**

Return to work

-If you can work from home or have a light duty option you may return 2-3 weeks after surgery. This includes light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 10-12 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site, or if the incision site opens as well as new increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs especially if it is noticeable in only one leg as this could indicate a DVT. This is a medical emergency.

-Numbness and tingling present before surgery may take several months to a year and a half to resolve. Please be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Carpal Tunnel

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

Your incision will be assessed at your 1st post-operative visit. The first dressing you will need to have taken off and a lighter dressing applied around 3 days after surgery. Please call our office to make an appointment. Sutures are removed approximately 10 days after surgery by our office. We will make an appointment for you to come in and do that as well. You will not be able to get surgical site wet until after the sutures are removed. After the sutures are removed you may get the site wet but you cannot submerge the incision in water until after 4 weeks or once the incision is completely healed. Gently clean with antibacterial soap and pat the incision area dry. Do not scrub the incision site or put any creams or ointments on the incision site.

Pain Relief

Usually patients with this type of surgery are not given pain medication. You may take over the counter Tylenol or Ibuprofen for pain. If your pain is not well controlled with either of those medications please call our office.

Exercise/Activity

You may begin to perform hand exercises with the surgical hand once the large bandage is removed at day 3. NO lifting for the first 2 weeks with the surgical hand. At your post-operative appointment we will let you know how to increase your lifting capabilities.

Driving

You may drive 1 week after surgery.

Return to work

If you can work from home or have a light duty option you may return approximately 2 weeks after surgery. This includes light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 4 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site, if the incision site opens, increasing pain, numbness, swelling, or weakness in your hand or arm. Numbness present before surgery may take several months to resolve. Please be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.
For medical emergencies please call 911 or report to the nearest emergency room.



Chiari Malformation

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

Your incision will be assessed at your 1st post-operative visit. Sutures are typically dissolvable, but should any need to be removed they will be removed at this appointment. You may shower the day after surgery. There is no need to cover the incision. **Do not take baths, soak in a hot tub or swim until we have assessed your incision. Also do not color or perm your hair until you are cleared by Dr. Bianco.** Gently clean with antibacterial soap and pat the incision area dry. Do not scrub the incision site or put any creams or ointments on the incision site.

Pain Relief

Our office will provide you with prescription pain medication to help with your surgical pain. You should use these medications only as directed. As your incision heals, we would expect you to begin weaning from prescription medications. Contact your pharmacy to process all refill requests. **No medication will be processed on the weekend.** You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

The best exercise is walking. Small amounts done frequently are best. Try to set a goal for yourself. Follow the instructions given to you by the physical therapist at the hospital prior to your discharge. Repetitive activities using your arms may aggravate muscle spasms around your neck and upper back. Modify your activity with this in mind. Do not lift above your head for the first 6 weeks following surgery. Do not lift more than 5-10lbs for the first 6 weeks after surgery. **Do not smoke.** Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 1-2 weeks after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return approximately 2 weeks after surgery. This includes light desk/phone type work. If you must report to the office you will be able to do this between 3-4 weeks after surgery. You will be restricted to light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 12 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site. New increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs, especially if it is noticeable in only one leg. Numbness present before surgery may take several months to resolve. Please be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Craniotomy

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

Your incision will be assessed at your 1st post-operative visit. Sutures are typically dissolvable, but should any need to be removed they will be removed at this appointment. You may shower the day after surgery. There is no need to cover the incision. **Do not take baths, soak in a hot tub or swim until we have assessed your incision. Also do not color or perm your hair until you are cleared by Dr. Bianco.** Gently clean with antibacterial soap and pat the incision area dry. Do not scrub the incision site or put any creams or ointments on the incision site.

Pain Relief

Our office will provide you with prescription pain medication to help with your surgical pain. You should use these medications only as directed. If you have increased pain or headaches please call our office.

As your incision heals, we would expect you to begin weaning from prescription medications. Contact your pharmacy to process all refill requests. **No medication will be processed on the weekend.** You may need to purchase an over the counter stool

softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

The best exercise is walking. Small amounts done frequently are best. Increase your activities slowly and if you feel extremely tired, sore, or increased pain rest and decrease your activities until you feel better then resume.

Follow the instructions given to you by the physical therapist at the hospital prior to your discharge. Repetitive activities using your arms may aggravate muscle spasms around your neck and upper back. Modify your activity with this in mind. Do not lift above your head for the first 6 weeks following surgery. Do not lift more than 5-10lbs for the first 6 weeks after surgery. **Do not smoke.** Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 2 weeks after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return approximately 4 weeks after surgery. This includes light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 12 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site, opening of the incision site, swelling of the legs, especially if it is noticeable in only one leg, excessive dizziness, and frequent falls.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician. For medical emergencies please call 911 or report to the nearest emergency room.



Implant Removal/Insertion Post-Operative Instructions

Wound

-Your wound will be assessed at your first post-operative visit approx. 4 weeks after surgery. Your incision site was closed with Dermabond, medical superglue. You will not have any sutures. You may shower the day after surgery. You will not need to cover the wound. Please no tub baths, hot-tubs, or swimming pools for 4 weeks after the procedure. Do not scrub the incision. Allow the water to run over the incision and pat dry.

Pain Relief

-Our office will provide you with prescription pain medication and muscle relaxants to help with your surgical pain. You should use these medications only as directed.

-Contact your pharmacy to process all refill requests.

No medication will be processed on the weekend.

-You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Implant

If you had an implant placed you will have follow up care and teaching performed by the **company** in which we received the device from. This teaching usually occurs in the hospital and will continue at home. If you received a pain pump the pain management physician will oversee the regimen of getting it regulated.

Exercise/Activity

-The best exercise is walking. Small amounts done frequently are best. Slowly increase your activities.
-Follow the instructions given to you by the physical therapist at the hospital prior to your discharge. No bending or twisting at the waist during the first 2 weeks following surgery. -Do not lift more than 5-10 lbs for the first 3 weeks after surgery.

-Do not smoke. Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 2 weeks after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return approximately 4 weeks after surgery. You will be restricted to light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 6-8 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site, new increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs, especially if it is noticeable in only one leg could indicate a DVT, which is a medical emergency.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Kyphoplasty Post-Operative Instructions

Wound

Your wound will be assessed at your first post-operative visit appx. 4 weeks after surgery. You will have to small areas where the needles were inserted that are closed with Dermabond, medical superglue. You will not have any sutures. You may shower the day after surgery. You will not need to cover the wound. Please no tub baths, hot-tubs, or swimming pools for 2 weeks after the procedure. Do not scrub the incision. Allow the water to run over the incision and pat dry.

Pain Relief

-Our office will provide you with prescription pain medication and muscle relaxants to help with your surgical pain. You should use these medications only as directed.

-Contact your pharmacy to process all refill requests.

No medication will be processed on the weekend.

-You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

The best exercise is walking. Small amounts done frequently are best. Slowly increase your activities. Follow the instructions given to you by the physical therapist at the hospital prior to your discharge. No bending or twisting at the waist during the first 2 weeks following surgery. Do not lift more than 5-10 lbs for the first 3 weeks after surgery. **Do not**

smoke. Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 1 week after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return approximately 2 weeks after surgery. This includes light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 6-8 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site, new increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs, especially if it is noticeable in only one leg could indicate a DVT, which is a medical emergency.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Bianco Brain and Spine, LLC

Lumbar Laminectomy

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

Your incision will be assessed at your 1st post-operative visit. Sutures are typically dissolvable, but should any need to be removed they will be removed at this appointment. You may shower the day after surgery. There is no need to cover the incision. **(Do not take baths, soak in a hot tub or swim until we have assessed your incision).** Gently clean with antibacterial soap and pat the incision area dry. Do not scrub the incision site or put any creams or ointments on the incision site.

Pain Relief

Our office will provide you with prescription pain medication to help with your surgical pain. You should use these medications only as directed. As your incision heals, we would expect you to begin weaning from prescription medications. Contact your pharmacy to process all refill requests. **No medication will be processed on the weekend.** You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

The best exercise is walking. Small amounts done frequently are best. Try to set a goal for yourself. Follow the instructions given to you by the physical therapist at the hospital prior to your discharge. No bending or twisting at the waist during the first 2 weeks following surgery. Do not lift more than 5-10 lbs for the first 3 weeks after surgery. **Do not smoke.** Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 1 week after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return approximately 2 weeks after surgery. This includes light desk/phone type work. If you must report to the office you will be able to do this between 3-4 weeks after surgery. You will be restricted to light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 12 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site. New increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs, especially if it is

noticeable in only one leg. Numbness present before surgery may take several months to resolve. Please be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Lumbar Microdiscectomy/Foraminotomy

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

Your incision will be assessed at your 1st post-operative visit. Sutures are typically dissolvable, but should any need to be removed they will be removed at this appointment. You may shower the day after surgery. There is no need to cover the incision. **(Do not take baths, soak in a hot tub or swim until we have assessed your incision).** Gently clean with antibacterial soap and pat the incision area dry. Do not scrub the incision site or put any creams or ointments on the incision site.

Pain Relief

Our office will provide you with prescription pain medication to help with your surgical pain. You should use these medications only as directed. As your incision heals, we would expect you to begin weaning from prescription medications. Contact your pharmacy to process all refill requests. **No medication will be processed on the weekend.** You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

The best exercise is walking. Small amounts done frequently are best. Try to set a goal for yourself. Follow the instructions given to you by the physical therapist at the hospital prior to your discharge. No bending or twisting at the waist during the first 2 weeks following surgery. Do not lift more than 5-10 lbs for the first 3 weeks after surgery. **Do not smoke.** Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 2-3 days after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return 1-2 weeks after surgery. This includes light desk/phone type work. If you must report to the office you will be able to do this between 2-3 weeks after surgery. You will be restricted to light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 12 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site. New increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs, especially if it is

noticeable in only one leg. Numbness present before surgery may take several months to resolve. Please be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Posterior Cervical Discectomy and Fusion-Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

-Your incision will be assessed at your 1st post-operative visit. Your incision is closed with Dermabond-which is medical grade superglue. You will not need to have any sutures removed. You may shower the day after surgery. There is no need to cover the incision. - **Do not take baths, soak in a hot tub or swim until we have assessed your incision.** Gently clean with antibacterial soap and pat the incision area dry. Do not scrub the incision site or put any creams or ointments on the incision site.

Collar

-You may be required after surgery to wear a neck brace. You should wear the collar anytime you are out of bed. Typically you wear the collar for 3 months after surgery but it may be longer depending on the range of the surgery. You do not need to sleep in your brace.

X-rays

X-rays will be taken in the office routinely. It takes approximately 1 year for us to see a complete fusion. X-rays are taken every 3 months with your follow up visits.

Pain Relief

-Our office will provide you with prescription pain medication and muscle relaxants to help with your surgical pain. **You should use these medications only as directed.**

-You will need to avoid anti-inflammatory medications for 1 year following surgery. Use of these medications could delay the healing of your fusion.

- Contact your pharmacy to process all refill requests. **No medication will be processed on the weekends.**

-You may need to purchase an over the counter stool softener (ie. Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

-The best exercise is walking. Small amounts done frequently are best. Increase all of your activities slowly.

-Follow the instructions given to you by the physical therapist at the hospital prior to your discharge.

-Do not lift above your head for the first 6 weeks following surgery. Do not lift more than 5-10lbs for the first 6 weeks after surgery.

-**Do not smoke.** Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving-You may drive 2 weeks after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications. Do not drive while wearing a collar; it restricts you from turning your head side to side.

Return to work

-If you can work from home or have a light duty option you may return 2-3 weeks after surgery. This includes light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 10-12 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5F, excessive redness, swelling, or drainage at the incision site, , new increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs especially if it is noticeable in only one leg could indicate a DVT. This is a medical emergency.

-Numbness and tingling present before surgery may take a year to a year and a half to resolve. Please note that does not mean it will take that long but it can. Also, be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician.

For medical emergencies please call 911 or report to the nearest emergency room.



Posterior Lumbar Interbody Fusion

Post-operative Instructions

Successful surgery depends not only on the success of the surgical procedure but also depends on the patient's compliance throughout the post-operative period. Below are instructions and guidelines to follow after surgery.

Wound

Your incision will be assessed at your 1st post-operative visit. Your incision is closed with Dermabond which is a medical grade superglue.

- You may shower the day after surgery. There is no need to cover the incision. **Do not take baths, soak in a hot tub or swim until we have assessed your incision.** Gently clean with antibacterial soap and pat the incision site dry.
- Do not scrub the incision site or put any creams or ointments on the incision site.

Brace

-You may be required after surgery to wear a brace. You should wear the brace anytime you are out of bed. Most patients that wear a brace wear it for at least 3 months. We will let you know when you can stop wearing the brace. You do not need to sleep in your brace.

X-rays

X-rays will be taken in the office routinely. It takes approximately 1 year for us to see

complete fusion. X-rays will be taken every 3 months with your follow up visits.

Pain Relief

-Our office will provide you with prescription pain medication to help with your surgical pain.

You should use these medications only as directed.

- You will need to avoid anti-inflammatory medications for 1 year following surgery. Use of these medications could delay the healing of your fusion.
- Contact your pharmacy to process all refill requests. **No medication will be processed on the weekend.** --You may need to purchase an over the counter stool softener (Miralax) to take in addition to taking the narcotic medication to avoid constipation.

Exercise/Activity

The best exercise is walking. Small amounts done frequently are best. Increase your activities slowly. Follow the instructions given to you by the physical therapist at the hospital prior to your discharge.

- No bending or twisting at the waist for the first 3-4 weeks after surgery. Do not lift more than 5lbs for the first 6-8 weeks after surgery.

- **Do not smoke.** Smoking could delay or interfere with your body's ability to heal after surgery. See your primary care physician if you need assistance to quit smoking.

Driving

You may drive 2-3 weeks after surgery, short distances only. You may increase driving time gradually as tolerated. Do not plan long trips without adequate resting periods. It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to work

If you can work from home or have a light duty option you may return 4-6 weeks after surgery. This includes light desk/phone type work. If your job requires heavy physical activity, you will be able to return to work approximately 12-16 weeks after surgery.

What to Watch For

Please contact our office for any of the following: oral temperature greater than 100.5°F, excessive redness, swelling, or drainage at the incision site. New increasing pain, numbness, or weakness in your arms or legs. Swelling of the legs, especially if it is noticeable in only one leg. Numbness present before surgery may take several months to resolve. Please be aware there may always be some residual numbness.

For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician. For medical emergencies please call 911 or report to the nearest emergency room.



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