Getting Ready for Your Spine Surgery

Pre-operative Preparations

Contacting Your Primary Care Physician and Completing the Necessary Paperwork

The first step to undergoing any type of elective spine surgery is to ensure you are in good general health. Advocate Condell Medical Center requires, for your safety, all patients undergoing spine surgery to contact their personal physician for a pre-operative physical, known as a history and physical. If you do not have a primary care physician, we suggest you contact:

- Your neurosurgeon for a referral
- Contact Health Advisor, Advocate Health Care's physician referral service at 1-800-323-8622 to find a physician in your area.

It is recommended that you schedule your physical with your primary care physician as soon as you decide you are having spine surgery. All of your pre-operative activities should be completed 2 weeks before your surgery. It is important to know that your history and physical is only good for 30 days.

Preparing your home

Preparing for your return home from the hospital takes time. Most patients will come home directly from the hospital. You need to be well prepared for rehabilitation.

Let us start with the safety of your home. Since you may be going home with a cane, or a walker, we strongly advise you to remove any throw rugs, loose floor tiles, or other obstructions that could cause you to lose your balance or trip. If you plan to use stairs, make sure that all supportive hand rails are securely fastened and all banisters have been inspected for stability. AARP has excellent resources in assisting you to adjust items based on needs and safety. www.AARP.org

Maintaining your balance is a common concern following spine surgery. Properly installing balance support bars in your bathroom and staircase hand rails will assist with activities that require balance. If you plan to get in and out of your home through your garage, the installation of a balance bar is suggested to help you go up and down stairs. Arrangements must be made with a qualified installer to ensure safety. Many of the supporting devices recommended include: shower seats, elevated toilet seats, a portable commode, safety bars and stair handrails. These may be needed for only a short time.

Building a support network

Having a reliable support network will enhance your recovery. Please select a spine coach. We respect your medical confidentiality and privacy, however, we encourage you to contact a local friend or neighbor who can help you once you return home. Running an errand may not be an easy task following spine surgery. Choose someone you trust and who already has a relationship with you and your family. It is helpful to do all grocery and household shopping before your surgery. Items to consider include:

- healthy foods
- heavy items such as water, juices and sports drinks
- cleaning solutions and materials
- paper goods (toilet paper and paper towels)
- laundry supplies
- vitamin and medication refills (approved by your physician)

To further reduce your stress, we recommend that you complete unfinished home-related tasks, such as checking furnaces and air-conditioning units and changing filters, as well as routine duties such as bill payments.

Health and exercise

Practicing a safe stretching and strengthening routine prior to surgery may help improve your recovery. By increasing spine strength and improving upper and lower extremity flexibility, your rehabilitation will be more successful. Before beginning any exercise program, always check with your neurosurgeon and primary care physician. Your neurosurgeon may have already recommended formal physical therapy, aquatic therapy, or other organized exercise routines. We strongly suggest that you continue that program until advised by either your physical therapist or your physician. Depending on your general medical condition, your pre-operative exercise routine may continue until three days before surgery. It is not advisable to engage in any aggressive exercise within 72 hours prior to surgery.

Sleep

Sleep is an integral part of any surgical recovery process. Snoring, excessive daytime sleepiness, and difficulty falling or staying asleep are common symptoms of sleep disorders. If you have or suspect you have a sleep disorder, discuss your condition with your physician prior to surgery. For questions regarding sleep issues, please contact your primary care physician.

Nutrition for the surgical patient

Good nutrition is important to restore your active lifestyle and also helps:

- speed healing
- enhance the immune response
- decrease complications

Eat a variety of foods

The Daily Food Guide (below) illustrates the major food groups and the recommended number of servings to be eaten daily. Keep a consistent diet. Changing your diet can have an effect on your progress. Use this chart when planning your meals.

Increase protein intake

Protein is necessary for the maintenance and repair of body tissues. Good sources of protein include:

- low-fat milk and milk products
- eggs
- lean meat
- poultry
- fish

Vegetable protein sources include:

- soybeans
- lentils
- garbanzo beans
- peant butter

To increase protein:

- Add extra chopped or pureed meats to soups, stews or casseroles.
- Use peanut butter on celery, apples, bananas, crackers or toast.
- Add powdered milk to a variety of foods such as hot cereal, soups, casseroles, puddings, sauces, gravies and scrambled eggs.
- Try fruit with yogurt or cottage cheese for an easy nutritious food.

Take a multiple vitamin supplement

A multiple vitamin/mineral (with iron, zinc and magnesium) may be helpful to increase the body's storage of nutrients prior to surgery. This is important if you are unable to eat the recommended number of servings in each food group.

Although nutrition is very important, do not take any other supplements or vitamins that are not prescribed by your doctor. Many supplements can interact with medications and may either increase or decrease the effectiveness of these medications.

Stop supplements one week prior to surgery.

Fluids

Make sure you get adequate fluids; six 8-ounce glasses per day are recommended. Check this with your physician.

Pre-operative information

- Nothing to eat or drink after midnight before your surgery.
- Avoid all tobacco products after cervical or lumbar fusion for 3 months. Multiple studies suggest that tobacco use may:
 - o increase nonunion rate after spinal fusion
 - o increase need for reoperation
 - result in poor wound healing

The Center for Disease Control and Prevention recommends cessation 30 days prior to surgery.

- Routine daily medications may be taken the morning of surgery, with a sip of water only for hypertension and diabetes. (If you eat or drink any food or drink, more than a sip, the morning of surgery, then your surgery will be cancelled.
- Medications to avoid
 - anti-inflammatories including Motrin, Naprosyn, Relafen, Voltaren, Aleve, Daypro,
 Mobic, Ibuprofen, Naproxen. 7 to 10 days prior to surgery
 - Do not use 6 weeks post-op for cervical fusion and 12 weeks with a lumbar fusion
 - o autoimmune medications: Consult your surgeon or prescribing physician
 - blood thinners: With all blood thinning medications you must consult your surgeon or primary care physician to find out when to stop your medicine prior to your surgery date.
 - ie: Coumadin, Plavix, and aspirin

>Nurse navigation will contact you two weeks prior to your procedure. If you do not hear from them a week prior to your procedure, please call 847-990-5555.