



DELAWARE ORTHOPAEDIC SPECIALISTS

Symptoms

1. You may have persistent or recurrent symptoms even after surgery. This is common during the healing process and is usually due to nerve swelling and irritation. **Pain** usually goes away quicker than **numbness and tingling**. **Weakness** (if you have any) usually takes a longer time to improve. It is also normal for symptoms to abate for the first few days after surgery and then to return again after a period of time. Again, this is usually just from nerve irritation and is part of the healing process.
2. It is very common for people to experience **muscular pain in the back of the neck** for a few weeks following surgery. This is due to the surgery itself and is to be expected. Ice, massage and continued movement are the best treatments. Gentle stretching and rolling of the shoulders will help lessen tightness. In addition, gentle side-to-side and up-down motion while in the cervical collar is recommended.
3. Normal range of motion of your neck is not only okay but necessary for recovery. If you limit your normal daily range of motion, the back of your neck will tense up and hurt more than it would otherwise.
4. **Swallowing** may be a problem for you after surgery, especially with heavier foods and pills. This is due to local swelling. If you had a metal plate placed at the time of surgery, this may exacerbate the issue. It almost always improves within a few weeks and rarely prevents people from eating or drinking. If, however, you experience **difficulty breathing**, call our office immediately. This may require emergent attention.
5. **Hoarseness and sore throat** are common after surgery and to be expected. These symptoms will generally resolve after a few days, but may last up to a week or two. Do not use lozenges or chloraseptic throat spray because they may increase irritation of the tissue.
6. Post-operatively, it is not uncommon to feel more tired than usual. Nausea and lack of appetite are also very common. This may last for several weeks.

Activities and Restrictions

1. You are encouraged to take short **walks** multiple times a day during your recovery. You may **climb stairs** and **ride** in the car immediately with the collar in place.
2. You are not allowed to **drive** until cleared by your surgeon. Please note, you will not be able to drive if you are required to wear a hard collar.



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3. **Light duty activities**, such as preparing meals, washing clothes or dishes, can be resumed almost immediately, but using an upright **vacuum** should not be attempted for six weeks.
4. **Repetitive lifting** above the shoulders should not be done. It is okay to raise your arms above shoulder level. You should limit your **lifting** to 10 pounds until your six week follow up appointment.
5. If your **work** does not require any lifting, you may return at your leisure after a week or two. If you need a letter from office to do so, please call the office. Please allow two days to complete the request.
6. Use of the cervical collar(s) depends on the surgery that was performed.
 - If you were sent home with only a soft collar, it is to be used for comfort only and when you are in a car, either riding or driving, for the first two weeks.
 - If you were sent home with a soft and hard cervical collar, wear the hard collar when you are up and about and the soft collar when you are in bed until your physician tells you that you may discontinue their use.
 - If you were sent home with only a hard collar, please wear it at all times until your physician tells you that you may discontinue its use.
7. **Physical Therapy**: depending upon your condition and the type of surgery performed, your physician may recommend physical therapy. Please note, prescriptions for physical therapy may not be provided until your six week postoperative visit. This is to allow your body an adequate amount of time to heal from surgery.

Medications

1. **PLEASE NOTE**: If you currently have active narcotic prescriptions from another provider, we will NOT be able to prescribe any pain medications for you after your surgery. You must contact your current prescribing physician to establish a plan for your post-operative care.
2. When you are discharged from the hospital, you will be given a **prescription** for pain medicine. If your pain is not severe enough to warrant its use, you may use Tylenol.
3. Post operative constipation is an issue for many people. Prior to surgery, please purchase Senekot, Colace, and Metamucil at the drug store to take as needed **after**



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surgery. **If you are taking narcotics on a daily basis**, you should be taking daily stool softeners and laxatives to prevent any issues. If these do not work after 2-3 days, you must increase your regimen by adding Dulcolax orally or as a suppository, a fleets enema, or by drinking 30ml of mineral oil once or twice a day. All of these supplements are available over the counter at your pharmacy.

4. **Prescription refills** on narcotics can be requested over the phone. Please make sure you **call during business hours** (8:00 am – 4:00 pm) and **plan ahead**. If you call our office on **Friday after 12:00 pm**, please be aware your request will not be completed until the following **Monday**.
5. **State law** allows us to refill your prescription only **one** time following surgery. If you request an additional refill, you will need to be seen in the office to discuss your medication usage.
6. Prescriptions will not be filled after hours, on weekends or holidays.
7. You may only obtain narcotics from one physician. If you have chosen our office to be your prescriber, you have already read and signed the narcotics policy stating this fact.
8. **Nicotine** in any form will prevent bone growth, as will any **anti-inflammatories** (i.e. advil, motrin, aleve, naprosyn) and are strictly prohibited postoperatively. If you are using nicotine or anti-inflammatories, you should stop them two weeks prior to surgery and remain off of them until your physician lets you know it is okay to resume. Of course you are aware of the risks associated with smoking and it will never be suggested that you return to doing so. However, eventually you will be able to resume your anti-inflammatories if necessary.
9. If you are on any **blood thinners** or take **aspirin** on a daily basis, your physician will tell you when to stop taking these medications preoperatively and when to resume postoperatively. You may need to communicate with your cardiologist, if you have one, to come to a decision that will be most beneficial to your health.
10. If you were taking any other **daily medications** prior to surgery, you should resume them after surgery unless your physician states otherwise.

Wound Care

1. Your incision will be covered with a large bandage. Remove this bandage the day after you go home. Under the bandage, you will find fine pieces of tape called steri-strips. **They should fall off on their own, but if they have not done so after seven days following surgery, you must peel them off.** This is done easiest immediately after showering.



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2. You may **shower** the day after going home, but do not soak in a tub, pool, Jacuzzi, etc for at least three weeks or until your incision is completely healed. This is to ensure your wound will heal properly and it will help prevent bacteria from entering the wound.
3. Do not put any **lotions or ointments** on the incision for six weeks.
4. Mild **swelling and redness** around the incision is normal. You may even have some spotty discharge. If you have any concerns about infection, please call us as early in the day as possible in case we need to see you.

We are devoted to giving you the best care possible. If you have any concerns, every effort will be made to address them in a timely fashion. Thank you for allowing us to be involved in your care.

Sincerely,

Mark S Eskander, MD

Crystal DiMauro, PA-C