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## **DISCHARGE INSTRUCTIONS FOLLOWING AN**

### **ACDF**

### **(ANTERIOR CERVICAL DISCECTOMY WITH FUSION AND PLATING)**

You had a surgical procedure called anterior cervical discectomy with fusion and plating. During this procedure your neurosurgeon made an incision on the front of your neck and removed your damaged disc(s), and replaced them with a cage & bone graft and then applied a plate and screws to hold this in place. As your neck heals your bone grows. Over the next 3 to 6 months your neck bones at the level of surgery will start to fuse together. These instructions provide additional information regarding your care at home.

#### **Incision Care:**

- Unless otherwise instructed by your neurosurgeon, please keep the dressing & wound dry for first 5 days, then you may shower with mild soap and shampoo daily, gently wash your incision and pat dry. This is the only time you may touch your incision.
- Your incision was closed with absorbable sutures and steri-strips or surgical glue was placed over the skin. The steri-strips should be removed after 1-2 weeks if they are still in place
- Do not apply ointments, lotions or creams to your incision
- Apply an ice pack or a clean bag of frozen peas to your incision 20 minutes on and at least 20 minutes off to help reduce the swelling and discomfort, as needed
- Occasional episodes of neck pain and arm pain are not unusual immediately after surgery
- You may have discomfort in between your shoulder blades which is a common part of healing
- Bone marrow may have been taken from your hip and used with the bone graft at the fusion site. This may cause some discomfort of your hip but should improve with time
- Stop smoking as could lead to a nonunion, delayed healing, or cause a wound infection

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## **Activity:**

- Start with light activity around the house for the first 3 days you are home
- Gradually increase your activity starting with a short walk 1-2 times a day, working up to 2 miles a day over the course of the day by 2 weeks after surgery
- Allow your body time to heal by resting for short periods during the day
- Avoid contact sports, skating, bike riding or other activities until cleared by your surgeon
- You may **not** drive until instructed to do so by your neurosurgeon
- Avoid lifting, pushing or pulling heavy objects (more than 10 lbs) for 6 -12 weeks
- Avoid bending over to pick things up, or turning your head side to side or nodding
- Avoid sitting in soft chairs or slumping while sitting
- Avoid reaching above your shoulder level
- Be sure to get up and move around / stretch every 30 minutes while sitting
- Wear the neck collar until instructed to remove it by your neurosurgeon

## **Nutrition:**

- Eat plenty of fruits and vegetables to prevent constipation
- Warm liquids and soft foods are usually easiest to swallow after this surgery
- A soft diet includes: shakes, soup, pasta, soft vegetables, meat and breads will be easier to swallow for the first few days after surgery
- A sore throat and softer voice is common for about 2-3 weeks after surgery, but you should be able to swallow food without difficulty and not choke or cough while eating or drinking
- Drink at least six 8 oz. glasses of water daily

## **Medications:**

- **Do not take any NSAIDS such as ibuprofen, (advil), naprosyn, (naproxen, aleve) etc. for 3 months as this will inhibit your bones from fusing**
- Eat some food with your pain medications and use these medications sparingly to avoid nausea, vomiting or constipation
- Take your pain medications as prescribed and gradually **decrease** these as your pain improves
- Because a side effect of taking narcotics is constipation, you may need to take a stool softener (colace) or a laxative (dulcolax) that you can buy at a pharmacy until your bowels return to normal

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- You may need to use a suppository (dulcolax or glycerin) or an enema if you have not had a bowel movement in 3 days

- **Follow Up:**

- **Call our office** when you get home to schedule your follow-up appointment in 2 weeks
- Follow up with your primary care Physician for all medical issues

**Call 303-790-1800 or return to the emergency room if you experience any of the following:**

- **Call 911 for any life threatening emergency** Difficulty breathing or swallowing
- Constipation- no bowel movement for more than 3 days
- Difficulty moving or weakness of your face, arms, or legs
- Problems with speech, vision or severe headache
- Nausea or vomiting that won't stop
- Your pain is not well controlled on your pain medications
- **A fever above 101 F**
- Redness, Swelling, odor or drainage at your incision site

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