

## Walsh's Discharge Instructions: CERVICAL SPINE



**After Anesthesia:** Rest today, it is not unusual to feel sleepy or tired for a day or so after your surgery. No strenuous activity. A low-grade fever is common after any surgery with general anesthesia and is rarely due to infection. You may feel a sore or "scratchy" throat after general anesthesia.

**Medications:** You can restart aspirin or other blood thinners tomorrow, otherwise you can start taking all other regular medications.



**Diet:** No restrictions, but may be easier to eat soft foods initially since you may feel a "catch" in your throat when you swallow. This will gradually improve. Start with clear liquids, plain foods and work your way up to regular diet as tolerated. Avoid greasy, heavy and spicy foods, they can make you nauseated.



**Dressing and Wound Care:** Your incision has a waterproof sealant, so you can shower the day of surgery and wash your neck normally. DO NOT submerge your incision in a bathtub, swimming pool, or ocean for 6 weeks - or until Dr. Walsh says it's okay.

**Soft Cervical Collar:** Is for your comfort only. You do not need to wear it if you do not want to.



**Activity:** You may sleep on your back, side, or stomach - whatever is the most comfortable. You may return back to work whenever you want or per your discussions with Dr. Walsh. You may resume driving when you are off prescription pain medicine and feel comfortable to do so. You can exercise by walking and lift 5-10 pound weights a couple of days following surgery.

- **First 6 weeks:** Do not lift more than 20 pounds or until Dr. Walsh says it's ok. No golfing or swimming.
- **First 3 months:** No vigorous activity.



**Physical Therapy:** The majority of patients do not need physical therapy, but you can start physical therapy exercises one month following surgery, unless Dr. Walsh instructs you otherwise.



**Pain Medication:** Your neck may feel stiff and sore, especially a couple of days following surgery. This will get better over several days. Start taking your prescribed pain medication such as oxycodone, hydrocodone & acetaminophen (Vicodin or Norco), codeine & acetaminophen (Codeine #3 with Tylenol), or oxycodone & acetaminophen (Percocet) as soon as you start to feel increasing pain. We recommend taking a dose before going to sleep the first night, so you do not wake up in the middle of the night with pain. Follow the labeled instruction on your prescription. If your pain is mild, you can take acetaminophen (Tylenol), naproxen (Aleve), or ibuprofen (Motrin or Advil) rather than the prescription opioid pain medication.



**DO NOT** drink alcohol or use marijuana when taking prescribed opioid pain medications.  
**DO NOT** drive until you are OFF prescription opioid pain medications.



**Soreness:** It is okay to stretch, massage, or apply heat to your neck if it feels stiff and sore. If you have a lot of arm pain a couple of days after surgery, this is most likely due to swelling/irritation of the nerve. Contact Dr. Walsh and he may prescribe steroids (Medrol dose pack).

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**Nausea / Constipation:** Anesthesia and pain medications can cause nausea and/or constipation. Take prescription pain medicine with food to reduce nausea. You may be given a prescription for Ondansetron (Zofran) to take for nausea, if needed. If you develop constipation, try to discontinue prescription opioid pain medications (e.g. Tramadol, Oxycodone, Percocet, etc.) as able and take over the counter stool softeners (e.g. Senna, Dulcolax, MiraLAX, etc.) with plenty of fluids and high fiber foods.



**Itching / Rash:** If you develop MILD itching or rash, take over-the-counter allergy medicine such as Benadryl, Claritin, or Allerest. If you have a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.



### Call the Doctor's Office if you have any of the following:

- Fever is above 101.5°F and/or chills.
- Nausea or throwing up to where you can't keep food/ liquids/ medication down.
- Unable to pee or "shi-shi" for 24 hours.
- A lot of pain, even with medication.
- If you think the incision is infected – very tender and red, or if there is drainage. Bruising and swelling are common.
- Leg/calf pain, swelling, redness or tenderness.



**Dr. Walsh's office @ 808-522-4231** Monday-Friday 8am – 4:30pm  
After office hours call the 24/7 Physicians Exchange hotline @ 808-524-2575



If you need IMMEDIATE ATTENTION (such as difficulty breathing)  
**Call 911 or go to the NEAREST EMERGENCY ROOM**



### Call Dr. Walsh's office to schedule your Follow Up Appointment

If you need anything else or have additional questions, feel free to message his office on MyChart or please call the office at the number listed above.

**Follow Up:** A nurse from MIS will be giving you a post-operative follow-up call within a few days.



The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Nurse Signature

Date/Time

## Dr. Walsh's Discharge Instructions: LUMBAR SPINE



**After Anesthesia:** Rest today, it is not unusual to feel sleepy or tired for a day or so after your surgery. No strenuous activity. A low-grade fever is common after any surgery with general anesthesia and is rarely due to infection. You may feel a sore or "scratchy" throat after general anesthesia. This will go away in a day or two. A low-grade fever is common after any surgery with general anesthesia and is rarely due to infection. Resume eating normally. Start with gentle, soft foods; avoid greasy or spicy foods which may cause nausea.

**Medications:** You can restart aspirin or other blood thinners tomorrow, otherwise you can start taking all other regular medications.



**Dressing and Wound Care:** Your incision has a waterproof sealant, so you can shower the day of surgery and wash your back normally. You should not submerge your incision in a bathtub, swimming pool, or ocean for 6 weeks - or until Dr. Walsh says it's okay.



**Activity:** You may sleep on your back, side, or stomach - whatever is the most comfortable. You may return back to work whenever you want or per your discussions with Dr. Walsh. Avoid sitting more than 30 minutes at one time - stand for 30 seconds and then sit back down. No bending or twisting until Dr. Walsh instructs you on stretching exercises at your 2-week follow up appointment. It is okay to take short walks as long as it does not increase your pain.

- **First 6 weeks:** Do not lift more than 20 pounds or until Dr. Walsh says it's ok. No golfing or swimming.
- **First 3 months:** No vigorous activity.



**Driving:** You may take short drives in a few days, if you are off prescription pain medication. Keep in mind driving requires sitting, so it may be uncomfortable to drive.



**Physical Therapy:** The majority of patients do not need physical therapy, but you can start physical therapy exercises one month following surgery, unless Dr. Walsh instructs you otherwise.



**Pain:** Your back will hurt more in a couple of days due to swelling of the muscles retracted during surgery. This will get better over several days. Start taking your prescribed pain medication such as oxycodone, hydrocodone & acetaminophen (Vicodin or Norco), codeine & acetaminophen (Codeine #3 with Tylenol), or oxycodone & acetaminophen (Percocet) as soon as you start to feel increasing pain. We recommend taking a dose before going to sleep the first night so you do not wake up in the middle of the night with pain. Follow the labeled instructions on your prescription. If your pain is mild, you can take acetaminophen (Tylenol), naproxen (Aleve), or ibuprofen (Motrin or Advil) rather than the opioid pain medication.



**DO NOT** drink alcohol or use marijuana when taking prescribed opioid pain medications.  
**DO NOT** drive until you are OFF prescription opioid pain medications.



**Soreness:** If you have a lot of leg pain a few days after surgery, this is most likely due to swelling of irritation of the nerve. Contact Dr. Walsh and he may prescribe steroids (Medrol dose pack).

## Dr. Walsh's Discharge Instructions: LUMBAR SPINE



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**Itching / Rash:** If you develop MILD itching or rash, take over-the-counter allergy medicine such as Benadryl, Claritin, or Allegra. If you have a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.



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### Call Dr. Walsh's office at number above to schedule your Follow Up Appointment

If you need anything else or have additional questions, feel free to message his office on MyChart or please call his office at the number listed above.

**Follow Up:** A nurse from MIS will be giving you a post-operative follow-up call within a few days.



The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Nurse Signature

Date/Time