POST-OPERATIVE CONSTIPATION

- It is not unusual to have constipation due to medications.
- You may use a stool softener/laxative as needed
- Drink plenty of water and add fiber to your diet.
- You may also try 1 dose Milk of Magnesia, 1 small can Prune Juice. Heat juice in microwaveable cup. Add Milk of Magnesia. Drink. Results within 2-3 hours.
- If you do not have a bowel movement by post op day 7, call our office.

RETURNING TO WORK

Following the procedure, you will be off work for at least 1 week. You will most-likely be able to return to work in 1-2 weeks with the following restrictions.



- **No** bending for 6 weeks
- **No** lifting more than 10 pounds for the initial 6 weeks.
- **No** lifting more than 25 pounds for the following 6 weeks
- **No** activities that require rotation of the spine
- **No** sitting for longer than 30-45 minutes at one time for 6 weeks.
- Standing and walking are both permitted and may be limited to the patient's tolerance.

WHEN TO CALL THE DOCTOR

If you have any of the following symptoms, call us right away.

- Increased leg weakness or numbress
- Loss of control of bowel or bladder
- Fever greater than 100.5
- Pain not controlled with your prescribed pain medication
- Worsening redness or continuous drainage from surgical incision site
- Weakness or swelling in your legs or your calf muscle is tender
- Shortness of breath
- Increase difficulty swallowing



CALL US IF YOU HAVE ANY OUESTIONS TEAM MCBRIDE: (407) 254-4053 TEAM WEBER: (407) 254-4057





G. Grady McBride, M.D. Mark Whitehead, PA-C **TEAM MCBRIDE: (407) 254-4053**



Steven E. Weber, D.O. **TEAM WEBER: (407) 254-4057**

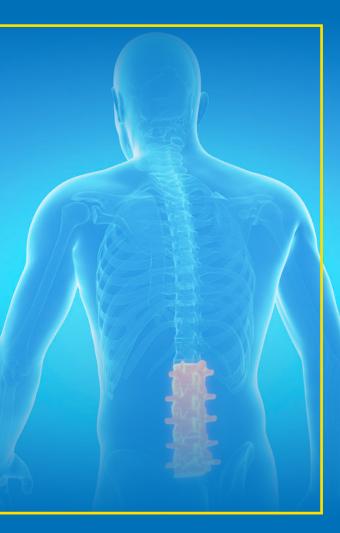


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WHAT TO EXPECT AFTER MICRODISCECTOMY

Orlando Orthopædic Center



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ACTIVITY

- Plan to rest for the first 3 days. Get in a comfortable position (lying down or reclining). Limit sitting or walking to 10-20 minutes at a time, 2-3 times per day.
- Do not stay in bed most of the day. Try to be more active each day until you are able to resume normal activity. Inactivity can lead to blood clots which can become dangerous.



- Do not cross your leas when reclining or lying down as this may also cause blood clots.
- You may begin walking longer distances after 1 week. Start by walking 20 minutes per day. You may increase to 20 minutes twice a day, if tolerated. Then progressively increase to 1 hour a day. If at any point, back or leg pain and numbness increases, decrease the duration of time walking.
- After you are evaluated at your first post-operative visit, in 2-3 weeks, you will be enrolled into a physical therapy program.

- You were given some breathing exercises while in the hospital. You should continue these to help rid your body of anesthesia and to prevent post-operative pneumonia.
- **No** driving for 48 hours. **No** lifting over 5-10 pounds. No bending, twisting or stooping. No chiropractic manipulation, massages, or traction for 12 weeks. No swimming for 2 weeks. No treadmill or Stairmaster for 6 weeks.

SHOWERING

- You may shower 24 hours after completion of your surgery.
- Stand straight up and DO NOT bend over. Keep the incision and dressing clean and dry.
- The incision will need to be covered while showering during the next 5 days. You can cover it with plastic wrap.
- Do not take a bath, swim or sit in a hot tub until approved by your physician.



WOUND CARE

DR. MCBRIDE'S PATIENTS

- Your dressings may be changed if it becomes soiled or wet.
- Remember to wash your hands thoroughly before & after changing your dressing.
- Included are instructions for *Mepilex* and *Zip-line* dressings.
- Your Zip-line dressing has been applied to your skin, this will remain on your incision until your first post-operative evaluation.
- Over the Zip-line is the Mepilex dressing. It will be changed daily while you are in the hospital & at home by a home health nurse.
- Keep the incision site clean and dry.
- Clean the incision site daily with hydrogen peroxide.
- Some swelling may occur around the site, and this is normal. This can occur for several weeks.
- **DO NOT** place 4x4 gauze over the Zip-line dressing, as this may result in snagging the Zip-line and removing it inadvertently.

DR. WEBER'S PATIENTS

- Change your dressing daily or more often if needed.
- Leave the steri-strips in place, they will fall off on their own.
- Use dry sterile 4x4 gauze secured with minimal tape.





MANAGING PAIN CONTROL

Pain is normal after surgery and may take several weeks to improve.

Take medications as prescribed.

Allow 24 hrs for refill requests.

You will be given prescriptions for post-operative pain control, prior to being discharged.

Most post-operative pain meds are written prescriptions & have to be picked up. Be sure to have someone designated on your HIPPA form at our office to pick up written prescriptions.

If you had pain and numbress prior to your surgery, you may have these afterwards as well; especially if you had any delicate surgery around the nerve itself. This will gradually improve as you heal!

If you are still in pain after taking your prescribed medication:

Try lying down and applying an ice pack beside your incision. Ice helps control inflammation, muscle spasm, and pain.

Relaxation breathing may also help. Slow deep breaths can help muscles relax and also helps bring in much needed oxygen to sore tissues.