Providers
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Reducing the Trauma of Spine Surgery © Minimally Invasive Surgery of Cervical, Thoracic and Lumbar Spine, Board Certified

Anterior Cervical Post-Op Instructions

Physical Activity Restrictions

- No repetitive/excessive twisting or bending.
- No lifting > 10 lbs for 4 weeks.
- No driving for 4 weeks or while taking opioids.
- No sexual activity for 2 weeks. After 2 weeks, let comfort by your guide.

Walking Program

Walking is one of the most important activities for post-operative rehabilitation. Our walking program is designed to slowly increase your physical stamina throughout the first 4 weeks of recovery.

- Start with 5 min walks 2-3 times daily for the first week.
- Increase to 10 min walks 2-3 times daily during the second week, 15 min walks the third week, and 20 min walks during the fourth week. This is the goal. It ok if you don't reach that goal.
- Try to adhere to this structure as you want to avoid overexerting yourself too soon and potentially hindering your recovery
- If possible, perform your walks in an indoor controlled environment such as a mall or on a treadmill. The ideal location would have level ground without changes in elevation/uneven ground which could predispose you to falling or injuries. Avoid steep inclines/declines. **DO NOT walk your dog** as this is a significant fall risk.

Medications

You will be prescribed pain medication. Typically, you will be given an opioid and muscle relaxer. These medications are to help with post-operative pain. Please take them as prescribed. We recommend the use of a stool softener to prevent constipation while taking opioids. You may also take Tylenol as needed.

- DO NOT TAKE non-steroidal anti-inflammatories such as: Advil, Motrin, Aleve for 4 weeks post-op
- If you are on anticoagulation/blood thinners, don't restart until instructed (typically 5-7 days after surgery).

Incision/Wound Care

Your incision(s) will be covered by wound dressing(s) upon discharged. Please leave it on and intact for at least 5 days after surgery.

- You may shower with the dressing(s) on since they are waterproof. After the original dressing is removed (5-7 days post op), you may keep the incision(s) open to the air. If you experience fluid drainage from the incision(s), please cover with dry gauze until it stops.
- Keep showers short and pat dry the wound thoroughly. Don't put any ointments or creams on the incision(s). ANYTHING YOU PUT ON THE INCISION WILL SLOW DOWN HEALING!!
- Do not submerge the incision for 4 weeks, this includes taking baths, swimming, etc.



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FAQs

1. How much pain will I be in after surgery?

a. Every patient responds differently to surgery. It is possible you wake up from surgery pain free or with severe pain. This is normal and expected. This is why we prescribe high level analgesics such as opioids and muscle relaxers to help with surgical site pain. It is also normal to experience an increase in pain on post-op day 2-3. We use medications while you're in the hospital that are potent analgesics. These will start wearing off the post op day 2-3 and you might experience an increase in pain. Please use the medications that are prescribed to help alleviate your pain.

2. Can I develop new pain or symptoms after surgery?

a. Recovering from spine surgery is a long road and it is normal to have good and bad days, and you should not be discouraged after a bad day. It is normal to develop new sensations (new pain, numbness or tingling) in areas that were not there before surgery. Nerves can be unpredictable. We can remove the pressure placed on nerves, but we cannot control how they will react. It is normal for there to be variation in symptoms as you recover. Throughout the first 4 weeks, it is normal for you to develop an increase or change in pain severity, location or distribution. You will see Dr. Hardenbrook for your first post-op visit at 4 weeks where you will be able to share your recovery progression and any concerns you might have.

3. What symptom changes should I look out for?

- a. If you notice any of the following, please call our office immediately or go to the emergency department:
 - i. Increase or change in drainage from surgical site
 - ii. Significant redness and swelling
 - iii. Fever >101.5
 - iv. Nausea and/or vomiting
 - v. Uncontrollable pain with medications
 - vi. Shortness of breath or chest pain

4. Is difficulty swallowing or hoarseness in my voice normal after surgery?

a. Yes. In order to access the anterior portion of the cervical spine we need to move important structures such as your trachea and esophagus out of the way. It is possible you might wake up and find it difficult to swallow. You might have hoarseness of your voice during the early phases of recovery. These changes are normal and are expected to be temporary.

5. How should I use my soft collar?

a. The soft collar is there as needed for your comfort. Some patients like to use it during the first few days/weeks or recovery. You do not have to wear it.

*Please ensure that you are taking your medications as directed. For concerns about post operative pain management, please call 617-431-3121 to discuss.