

## *Kyphoplasty Discharge Instructions*

### **Success of Surgery**

After your Kyphoplasty surgery, you will spend an hour or so in the post-anesthesia unit where you will be monitored by nurses and anesthesiologists. Once you have fully recovered from anesthesia, you will be able to leave the hospital.

With this surgery, you will have no specific restrictions or limitations. Usually it is a good idea to take it easy for the next day or so, however, if you feel good you should be able to get back to your usual schedule the next day depending on your pain relief. Rehabilitation in the post-operative phase will be discussed with your physician at both the pre-op and post-op visits.

If you have fractured a vertebra, and you have an underlying diagnosis of osteoporosis, it is very important that you follow-up with your medical doctor to discuss your current medication regimen and whether it is the most beneficial for you at the current time. If you haven't seen your doctor in a while, you may want to discuss the possibility of updating a bone scan or other tests to determine if your regimen is the absolute best one for you currently. If you are not sure if you have osteoporosis, you should contact your medical doctor to discuss the possibility, and we will help facilitate that process.

### **Expected Hospital Stay**

Most patients will be expected to leave the hospital the same day of the surgery. After the procedure, you will stay in the post-anesthesia care unit where you will be monitored closely. Once you have fully recovered from anesthesia, you will be able to leave the hospital.

### **Care of Your Incision**

You may have one or two small incisions. The incision/s will be located towards the center of your back. Your incision/s will be closed with buried stitches that will dissolve within a couple of weeks. A liquid glue called "dermabond" will be used on the skin over the incision/s. This glue may last a week or two. It should not be peeled or picked off. It will come off gradually on its own. You will not have to place any type of dressing over the glue. Slight drainage the first day or so, limited swelling or mild

bruising is common and usually not of concern. If there is significant leaking or any marked redness or a large amount of swelling you should call the office.

### **Activity**

After surgery, you will have no restrictions. It is usually a good idea to take it easy for the next day or so, however, most patients are able to get back to their normal schedule within a day.

### **Pain Management**

A postoperative pain medication plan will be discussed at the preoperative appointment, and the "West Bay Orthopaedics & Neurosurgery Pain Management Agreement" will be discussed at that time.

### **Diet and Medication**

You can resume your regular diet immediately after the surgery. Your regular medications may be restarted right away. However, aspirin is usually started the day after surgery unless otherwise instructed by your surgeon. If you are taking an anticoagulant or "blood thinner" such as warfarin (coumadin), plavix (clopidogrel), pradaxa (dabigatran), or any other anticoagulant medication, you will be told when to restart the medication. You should then follow-up with the doctor who prescribes the anticoagulant medicine.

Constipation is a common problem after spine surgery. Over the counter stimulants and stool softeners can be beneficial, along with plenty of fresh water.

### **Follow up Appointments**

Your post-op appointment will be scheduled approximately 10-12 days after surgery. For that appointment, it is required that an x-ray be scheduled prior to the visit. This x-ray should be set up at the pre-op visit. If you have any questions regarding this important x-ray, please call the office at 401-739-4988.

### **What to Watch Out For**

These symptoms should cause you to call immediately or dial 911 to come to the emergency department

- Paralysis or inability to fully move your legs
- Severe chest pain, difficulty breathing
- Loss of control of your bowels and bladder

The following symptoms may indicate a problem. You should call the office number listed below.

- Fever higher than 101 F
- Increasing back and/or leg pain
- Difficulty passing urine
- New numbness or change in symptoms from before surgery
- Redness or drainage from the incision
- Unusual headache, especially if it is much worse when you stand up

It is especially important to report any new back pain that is severe and fairly constant. Especially if you have improvement in your back pain with surgery and then suddenly experience a new back pain, you may have a new fracture. You should call the office to notify the physician. If you have osteoporosis, you are always at risk for future fractures.

**For questions after the surgery, please call 739-4988. After hours, the answering service will respond and page the doctor in an emergency.**