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## **Microdiscectomy Post-Op Instructions**

### **Description of Procedure:**

A lumbar microdiscectomy, also known as microdecompression, is a minimally invasive spinal surgery performed to provide nerve decompression associated with a herniated disc, spinal stenosis, and degenerative disc disease. This procedure can be used to:

Remove a part of the disc that is bulging and pressing on the nerve.

Remove fragments of the disc that have broken away from the disc causing compression on the nerves

A 2-centimeter incision is made over the affected lumbar disc region. The surgeon locates the correct disc and vertebrae using fluoroscopy, which is a type of x-ray guidance. A small portion of the lamina (posterior region of a vertebra or spinal bone) is then removed, and then also, the herniated disc material is removed.

The following guidelines are recommended after surgery to ensure a good recovery. You may be given additional instructions by your surgeon when discharged. For questions or concerns, please contact Dr. Abbasi at **952-405-9760**.

### **After your surgery:**

- You may resume your regular diet as tolerated; avoiding spicy or greasy foods at first.
- Resume all previous medications. Pain medication and antibiotics may cause constipation. Increase your water and fiber intake. Also, over the counter stool softeners may be helpful (Senna, Colace, Milk of Magnesia).
- **NO ALCOHOL** for the next 24 hours or while taking pain medication(s).
- It is normal to feel sleepy, dizzy and/or slightly nauseous for 24 hours after anesthesia.
- **NO** driving or operating heavy machinery or make any important or legal decisions or sign legal documents while taking narcotics.

### **Restrictions:**

Following surgery, you will be asked to wear your brace with activity and in the car for the first 3 months. During this period, remember the acronym "BLT." That is, you should not **b**end, **l**ift over 8 pounds, or **t**wist. You should try to keep your back (hips to shoulders) as straight as possible. In addition, follow these lifting restrictions:

1 month: 8 lbs

2 months: 16 lbs

4 months: 25 lbs

Further guidance will be provided at your follow up appointment.

### **Incision Care:**

You may have staples, sutures, steri-strips, or likely a combination of these to help keep your incision closed post-operatively. Steri-strips are small stickers placed over the wound; please allow these to remain in place until they fall off on their own, typically about 7 days. Staples should be taken out within 10-14 days after surgery, either by your primary care provider or at our facility. Often a bandage is placed over the incision site. Please keep this bandage on for 48 hours after surgery, as it is a sterile dressing. After 48 hours, the dressing should be changed daily until there is no longer drainage around 5-7 days post-op. After this, gauze or bandages are usually not necessary. We ask that you leave the incision site open to air. Please remember that dark and moist areas promote bacterial growth.

### **Signs of Infection:**

You or a significant other should monitor your incision for signs of infection. Signs of infection include: redness, swelling, increased warmth to touch, discharge from the wound, and a body temperature over 100.5 F. If any signs of infection do appear, please contact our office.

**Can I bathe?**

It is safe for the incision to get wet while taking a shower, but avoid any direct pressure from the shower head and do not scrub the area. Lightly pat the site dry with a clean towel when finished. Avoid submerging your wound by soaking in the bathtub, as this will increase your risk of infection at the incision site. Please wait at least 3 weeks for the incision wound to heal before submerging the area while taking baths.

**When can I go back to work?**

Most patients go back to work with restrictions 4-8 weeks after surgery. If your job is more physically demanding, this may need to be extended. In general, your capability to return to work will be discussed at your one-month visit.

**When can I drive?**

Once you are off all narcotic pain medications, and you have regained full control of your extremities you should be able to safely operate your vehicle.

**Appointments:**

Please see your primary care provider 10-14 days after surgery to have the incision examined. We would like to see you at Inspired Spine one month after surgery. This is the first of a series of post-op appointments. You will have a CT scan prior to your appointment to confirm the position of the hardware. You can reach Inspired Spine to set up an appointment, if it is not yet scheduled.

**Things to Remember:**

Fluctuation in the amount of pain you may experience is normal. This is especially common 1-2 weeks after surgery related to increased swelling at the surgical site.

Certain things can delay your healing, hinder your surgery from being successful, and/or increase your risk of requiring another surgery. These include smoking and/or tobacco use, diabetes, poor general health, advanced age, and/or obesity. Although some risks cannot be avoided, it is important to control what you can for the best possible outcome.

**In Emergency Situations, Call 911:**

- Sudden onset of leg weakness and spasms
- Loss of bladder control and/or bowel functions
- Signs or symptoms of a pulmonary embolism (PE) - sudden coughing, sharp chest pain, rapid breathing, or shortness of breath, and/or severe lightheadedness.
- Signs or symptoms of a deep vein thrombosis (DVT) - Swelling in the leg(s), pain and/or tenderness in the leg(s), red or discolored skin on the leg(s), and/or warm skin to the touch.

RN Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Patient/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_