

# Cervical Spine Surgery

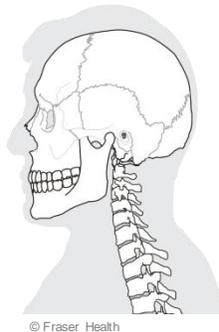
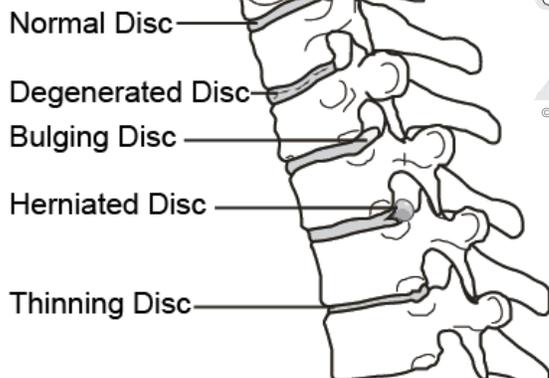
## Your Day Surgery and Recovery at Home

### I am having:

- A disc removed (discectomy)
- A disc replacement (disc arthroplasty)

You are having surgery on the neck or cervical part of your spine. This surgery is usually done to relieve pain, numbness, and/or tingling in the neck, shoulder, or arm from pressure on a spinal nerve or the spinal cord. This could be caused by a bulging disc, a degenerating disc, a herniated disc, or a thinning disc.

### Examples of disc problems



The surgeon makes a small cut (incision) through the front of your neck (sometimes the back of the neck). All or part of the disc is removed. The disc might be replaced with a man-made one.

You usually go home the same day or 1 day after the surgery. This will depend on your recovery and your health before the surgery.

### Appointments after surgery

See your family doctor or nurse practitioner.

**My appointment is on:** \_\_\_\_\_

See your surgeon.

**My appointment is on:** \_\_\_\_\_

### Going home checklist

- You have a ride home and someone to stay with you for 24 hours or longer, if needed.
- You know what medicine(s) to take, as well as when and how to take them.
- You know what you cannot do for 24 hours (because of anesthetic) including:
  - \* **no** driving or operating hazardous machinery
  - \* **no** drinking alcohol or using any substance or street drug
  - \* **no** making important decisions or signing legal documents

Family Practitioner: Refers to family doctor or nurse practitioner

## Caring for Yourself at Home

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### Drinking and Eating

For the first 24 hours, you might only be able to drink liquids (your throat will be sore or swollen). Once swallowing is easier, you can return to your normal diet.

You might feel sick to your stomach (nausea) or throw up (vomit). This should not last long. It is important to stay hydrated.

If you feel sick or throw up:

- Drink 'flat' ginger ale, clear soups, and clear fluids, and eat mild foods until you feel better. Other good choices include dry toast, crackers, popsicles, and gelatin dessert (such as Jell-O). Stay away from caffeine, carbonated soft drinks, and acidic fruit juices while feeling sick.
- Drink and eat small amounts often.
- Rest in bed until you feel better. Place a cool, damp cloth on your face and neck.
- Try not to smoke or be around smoking. Smoke can make your nausea worse.

You might get constipated because you are less active or eating less fibre.

To prevent constipation:

- Drink plenty of liquids each day (unless you have been told differently).
- Eat high fibre foods such as bran, prunes, whole grains, vegetables, and fruit.
- Walk and move around as much as you can.

If you continue to be constipated, talk with a pharmacist or family practitioner.

### Activity and Rest

If you go home the same day as your surgery, rest for the remainder of the day. Anytime you lie down in the first 24 hours, rest your head on 2 or more pillows. After the first 24 hours, balance your activity and rest. Try to get 8 hours of sleep each day.

For the first few days, your neck muscles will probably be stiff and sore. Try to keep your head and neck in a neutral position. Try not to twist or turn your head.

For 2 to 3 weeks after the surgery, or until you see your surgeon:

- \* **Do not** lift, push, or pull anything over 5 kilograms (10 pounds), including carrying children and groceries.
- \* **Do not** vacuum, rake leaves, or do any other reaching activity.
- \* **Do not** play any sports.

You cannot drive or return to work until approved by your surgeon or family practitioner.

**Do not drive or drink alcohol** if you are taking an opioid medication or a muscle relaxant.

### Your incision

**Always** wash your hands before and after touching around your incision.

You can shower 24 hours after the surgery. Try not to let the shower spray directly on your incision. Gently pat the area dry.

**Until the incision is healed:** No soaking in a bath tub or hot tub, no swimming, and no creams, lotions, or ointments on the incision (unless directed by your surgeon).

### Managing pain

If you had numbness and/or tingling in your arms or hands before surgery, it could still be there after. It can take a few weeks for this to go away.

You might also have muscle spasms for a couple of days. Your surgeon lets you know what medication to take to ease the spasms.

If you have been living with pain before surgery, be sure to tell your surgeon how you manage this pain, such as with medicines, herbs, supplements, cannabis products, other substances, massage, yoga, meditation, etc. This helps your surgeon create the best plan with you for managing pain after surgery.

Your surgeon gives you instructions to take pain medicine. This might include a prescription for an opioid (narcotic).

Your pain should be at a comfortable level that allows you to move, take deep breaths, cough, and to do every day activities. Take your pain medicine regularly for the first day or so, even if you have just a little pain. Also do other things to help ease your pain or distract you from the pain, such as slow breathing, listening to music, watching T.V.

#### Non-prescription pain medicines:

- acetaminophen (Tyleno®)
- non-steroidal anti-inflammatory drugs (NSAIDs)  
Examples: ibuprofen (Advil®, Motrin®)  
naproxen (Naprosyn, Aleve®)

**NSAIDs are not for everyone after surgery.** If you have (or have had) health problems such as stomach ulcers, kidney disease, or a heart condition, speak with your surgeon or family practitioner before using NSAIDs.

#### Prescription pain medicines with opioids (narcotics):

- Tramacet® (tramadol and acetaminophen)
- Tylenol #3® (codeine and acetaminophen)
- Oxycocet®/Percocet® (oxycodone and acetaminophen)

**Note:** These medications also have 300 to 325mg acetaminophen in each tablet. All total, **do not** take more than 4000mg of acetaminophen in 24 hours (too much can harm your liver).

### Safe use of opioid pain medicines

If you are using any medicines that have opioids (narcotics) in them, take note of the following safety information.

- Tell your surgeon if you have sleep apnea. Opioids can make your sleep apnea worse.
- Your pain should lessen over the first week. You should not need to take opioid pain medicine for more than 1 week.
- Always use the least amount possible for the shortest amount of time.
- Common side effects include constipation, feeling sick to your stomach (nausea), a dry mouth, sweating, dizziness, and feeling drowsy.

- **Do not** crush, cut, break, chew, or dissolve opioids before taking. Doing this could cause serious harm, even death.
- While taking opioid pain medicines, **do not** drive, drink alcohol, or start taking any new sleeping pills.
- Store opioid medicines in a secure place. Keep out of sight and out of reach of children, teens, and pets.
- Never share your opioid medicine with anyone else.
- Take any unused opioid medicines back to your pharmacy to be safely disposed.  
**Do not** keep unused medicines at home.

Always read the label and/or information from the pharmacist about how to take medication safely.

**Questions about medications?** Speak to your local pharmacist. After-hours, call 8-1-1 and ask to speak to a pharmacist.

## When to get help

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**Go to the nearest Emergency or Call 9-1-1**

if you have any of the following:

- severe problems swallowing
- very hoarse voice
- trouble breathing or shortness of breath
- extreme drooling
- face drooping
- any sudden severe pain
- chest pain

**Call your surgeon or family practitioner**

if you have any of the following:

- pain that does not ease with pain medicine
- a fever over 38°C (101°F)
- warm, red, swollen incision, or blood or pus (yellow/green fluid) draining from the area
- a new numbness, tingling, or weakness in your arms or legs

Can't contact your surgeon or family practitioner?  
Have any questions about your recovery?

• **Call Fraser Health Virtual Care**

10:00 a.m. to 10:00 p.m., daily

**1-800-314-0999**

[fraserhealth.ca/virtualcare](http://fraserhealth.ca/virtualcare)

• **Call 8-1-1 (HealthLinkBC)** to speak to a registered nurse any time - day or night.

HealthLinkBC is available in 130 languages.

For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

• **Call 9-1-1** if you have any:

- trouble breathing or shortness of breath
- chest pain
- sudden severe pain

**Questions you might have:**

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