STEINDLER ORTHOPEDICS



Your Lumbar Fusion Planning Guide

Patients, please be sure to

- Attend all appointments
- Bring this guide to all appointments
- Bring your coach to all appointments

Surgery Scheduling Department

Phone: (319) 600-8089

Office Hours: Mon - Fri, 8:00 am - 4:30 pm

Steindler's Spine Surgeons



Dr. Evan Larson



Dr. Benjamin MacLennan

Since 1950, Steindler Orthopedic Clinic has remained the region's most preferred orthopedic practice. Our experienced team of neck and spine specialists work to provide excellence in total joint care and will get you back to doing the things you love.

To schedule your spine evaluation, call Steindler Orthopedic Clinic at (319) 338-3606.

STEINDLER ORTHOPEDICS

PREPARING FOR SURGERY

Your Surgery Scheduler will be contacting you within the next two business days to schedule your surgery. Prior to them calling you, the schedulers need to contact your insurance company to verify your eligibility status and prior authorization requirements. When they call you, they will be letting you know what days your surgeon does surgeries on and when the first available date is. **If you have not heard from the Scheduler in two business days, please give them a call at 319-600-8089.**

When the Surgery Scheduler calls you to set your surgery date, they will be letting you know which preoperative appointments your doctor has ordered to be done prior to the surgery and they will also be scheduling them for you. Preoperative appointments may include Preadmission/ labs, educational appointment(s) with Steindler Therapy, Medical Clearance from your Primary Care Physician, Cardiologist, Pulmonologist, etc. and your Surgeon.

Here's what you need to know and prepare for prior to scheduling your surgery.

☐ **Are you planning to travel out of town before or after your surgery?**

Before Surgery, please let us know the dates that you are out of town so that your surgery scheduler does not schedule any preoperative appointments for you during this time frame. **After Surgery**, there may be travel restrictions, please check with your doctor to see what those restrictions are as they may vary.

☐ **Do you have someone that can help you after surgery?**

Please make sure that you are planning for someone to help you for at least the first 24 hours after you get home from surgery.

☐ **Do you have transportation?**

You may not be able to drive initially postoperatively. Please make sure that you are planning for someone to drive you to and from the hospital/surgery center and to your PT appointments post operatively if the doctor orders physical therapy.

☐ **Do you see a Cardiologist?**

If you do see a cardiologist, make sure they are aware of your plans to have surgery and they feel you are medically cleared to proceed with surgery.

Please review the following information prior to your surgery at Steindler Surgery Center or the partnered hospital.

- Read all the instructions in your packet carefully and take the packet with you to each of your appointments and to your surgery.
- Complete any requested forms and send them to the designated party.
- Steindler Surgery Center will call you to perform your pre-admission screening 5-10 days before your surgery and will also pre-certify your surgery with your insurance company. If you are not receiving your surgery at Steindler Surgery Center, complete any pre-registration processes requested by the partnered hospital.

In addition to the above instructions, if you are scheduled as an OUTPATIENT, the following instructions will apply.

- Be sure you DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT THE DATE OF SURGERY UNLESS INSTRUCTED OTHERWISE.
- Your surgical arrival time will be scheduled several days prior to surgery. If you have not gotten a confirmation call by the day before surgery, please call to confirm your arrival time. Please keep in mind that your surgery time MAY change due to cancellations or urgent added cases.

IMPORTANT NOTICE REGARDING THE PAYMENT FOR YOUR SURGERY:
Not all insurance companies will cover all areas of your care. The Steindler Orthopedic Clinic surgeons utilize physician assistants, co-surgeons, and first assistants to perform your surgery. You may be responsible for non-covered charges if your insurance company does not cover the use of certain surgical assistants.

Please feel free to call Steindler Orthopedic Clinic if you have any questions regarding the above information.

Important Phone Numbers

Steindler Orthopedic Clinic.....(319) 338-3606

Steindler Therapy.....(319) 354-5114

Steindler Surgery Center .....(319) 259-8400

UIHC Downtown Operator Line .....(319) 339-0300

Table of Contents

Your Pre-Surgical Schedule 6
- Pre-Admission Screening (PAS) 6
- Occupational Therapy 6
- Durable Medical Equipment 6
- Medical Clearance Clinic 7
- Pre-Payment/Out-of-Pocket Expense 7

Getting Ready for your Surgery 8
- Your COACH 8
- Checklist for your COACH 8
- Things to Think About 9
- Pre-Operative Medication Guidelines 10
- Infection Control and Showering 11
- What to Bring to Surgery 12
- For your Family 12
- Guest Lodging 12

Lumbar Fusion FAQ's 13
- Prior to Surgery 14
- Day of Surgery 15
- Going Home 17
- 1 - 2 Weeks After Surgery 19
- 6 - 8 Weeks After Surgery 20
- 12 -16 Weeks After Surgery 21
- What about the Future? 21

Risks of Lumbar Fusion 22

Lumbar Fusion Discharge Instructions 23

Car Ride and Other Considerations 26

Equipment Information 27

FMLA Policy 28

Maps 29

Your Questions/Notes 31

STEINDLER ORTHOPEDICS

Lumbar Fusion Planning Guide

Please bring this guide to all appointments as well as to surgery.

Your Pre-Surgical Schedule

We're pleased that you have chosen Steindler Orthopedic Clinic for your surgery. To prepare you for a successful surgery and outcome, you will be scheduled for several appointments 10-14 days before your surgery (pre-op). It is HIGHLY RECOMMENDED that a friend or family member (your COACH) attend each appointment with you. Once scheduled, your appointment times will be sent to you. Your appointments will likely include:

Pre-Admission Screening

The Steindler Surgery Center team will call you 5-10 days before your surgery . Additionally, routine blood tests and other tests, such as an EKG, may be performed prior to surgery. You will be given instructions to follow in the days leading up to surgery. If you are not having your surgery at Steindler Surgery Center, you should ask your surgery scheduling team about completing the pre-admission process.

Occupational Therapy

Location: Steindler Orthopedic Clinic

The occupational therapist will go over the post-operative precautions and provide training of the assistive equipment needed to remain independent while observing these precautions. Therapy staff will see that you have the self-care equipment that is needed.

Durable Medical Equipment (DME)

Location: Steindler Orthopedic Clinic

You may be directed to Steindler Durable Medical Equipment (DME) Staff to be sure you have all appropriate home equipment ready. DME may be sized and prepared for you before your surgery.

Medical Clearance Clinic
Location: Primary Care Physician

Your surgeon may request a pre-op medical clearance appointment with a medical specialist. This is a time to make sure all of your medical conditions are reviewed so that you are ready for elective surgery. Additional tests may be scheduled, based on your medical conditions, prior to your surgery.

If you do not have a primary care provider, you will instead be referred to Dr. Larew at Larew Internal Medicine.

We ask that you, your family and/or COACH read the enclosed materials, especially the Frequently Asked Questions (FAQs). **Reminder: Please bring this packet of materials to all appointments.** You may find it helpful to save the FAQs for later reference during your recovery.

Our protocols and treatments constantly evolve, it is best to be familiar with the enclosed material as your post-op plan, length of stay and discharge-planning continue to evolve.

Surgery Pre-Payment/Insurance Out-of-Pocket Expense Estimate

Please take note that Steindler Orthopedic Clinic and Steindler Surgery Center/ partnering hospitals are separate billing entities. **Steindler Orthopedic Clinic will bill the physician fees, and Steindler Surgery Center/partnering hospitals will bill the facility fees separately to your insurance carrier.** The anesthesiologist fee will also be billed separately.

Depending on your insurance carrier and your insurance benefits, you may potentially receive an estimate from both the clinic and the surgery center/partnering hospital, and you may potentially be asked to make a surgery prepay to both the clinic and the surgery center/partnering hospital. Commercial Insurance plans and Medicare Advantage plans typically have an out-of-pocket expense for surgery. Based on your individual out of pocket estimate, we may require that a surgery prepayment to be paid prior to surgery. Every insurance plan is different, so it is our goal to provide the surgery out of pocket expense estimate that will allow our patients to be prepared for their out-of-pocket cost and be able to plan accordingly. Note: We do not send expense estimates to patients who have Traditional Medicare or Medicaid

Getting Ready For Your Surgery

Your COACH

Your coach is a person to support you in your recovery. A coach can be a spouse, a family member, a friend, a neighbor or a companion. Ideally, this person should stay with you for the first few days after you return home. After the first few days, your coach should be available to check on you and help with transportation to physician appointments.

We all need encouragement at times to help us along the way. Your coach can provide this by being present and taking part in your recovery. Because more than 90 percent of our patients go directly home after surgery, it is important to plan ahead to have a helping hand(s).

Checklist for your COACH:

_____ Complete the Pre-Admission Screening call or form, familiarize yourself with the facility, and prepare for your role on the day of the procedure

_____ Be present at discharge to learn home instructions

_____ Check in on you during your recovery process

_____ Run errands, prepare meals, and help with household chores

Watch Out! (Things to think about)

If you use tobacco (or nicotine of any kind), stop prior to surgery.

- Smoking reduces your lung function
- Nicotine reduces circulation and healing, increasing risk of poor healing and infection

If you drink alcohol, be honest with your doctors about how much you drink.

- Alcohol impairs liver function
- Going through withdrawal during your recovery can be serious

You will have to follow these precautions for 8 weeks after surgery:

- No bending at your waist; you may bend at your hips with a straight back or at your knees
- No lifting more than 5-10 pounds (1/2 a gallon of milk)
- No twisting at your back (move your feet when turning)
- Use a log-roll technique for transferring in/out of bed

Think ahead about the space you live in.

- You may want a safety bar or handrail for your bath or shower
- Use a toilet riser with grab bars
- Stairs with a secure handrail
- May want to remove all loose carpets, rugs and cords
- A recliner to elevate your legs could be helpful
- Consider a temporary living space on your first floor to avoid frequent stair climbing

In the days leading up to surgery, any colds, fevers, nausea, vomiting, or infections should be brought to our attention immediately. Please call Steindler Orthopedic Clinic at (319) 338-3606.

STEINDLER ORTHOPEDICS

PRE-OPERATIVE MEDICATION GUIDELINES

This information is a guideline for medication instructions prior to surgery. Please be sure to provide the surgery center or hospital with a complete list of your current medications so more specific instructions may be given.

MAOIs to be stopped 2 weeks prior to surgery (Marplan, Nardil, Emsam, Parnate)

Medications to stop 7 days prior to surgery:

- Aspirin products (Bayer, Excedrin, Ecotrin) if not prescribed by a physician for a medical condition
- Nonsteroidal anti-inflammatories such as ibuprofen, Advil, Naprosyn, Aleve, Voltaren, Indocin, Naproxen
- All herbal supplements including fish oil, garlic, vitamin E, ginkgo biloba
- Semaglutide injections such as Ozempic and Wegovy

*** If taking any blood thinners prescribed by a physician (aspirin, Plavix, Warfarin, Eliquis, Xarelto, Brillinta, etc), consult the prescribing physician to determine appropriate discontinuation times. Certain cardiac patients may need to stay on aspirin up until the time of surgery. ***

If you are on an immunosuppressant medication such as Methotrexate, check with your prescribing physician regarding whether this needs to be stopped prior to surgery.

Medications to hold 72 hours prior to surgery:

- Jardiance and Farxiga

Medications to hold 24 hours prior to surgery:

- Metformin and other oral hypoglycemics such as pioglitazone, glimepiride, glipizide, Januvia
- ACE inhibitors such as lisinopril, benazepril, captopril, enalapril
- Angiotension II receptor antagonists such as losartan, valsartan, irbesartan
- Semaglutide oral medications such as Rybelsus

Medications to take with a sip of water the morning of surgery (if routinely taken in the morning):

- Cardiac medications including Digoxin
- Blood pressure medication except diuretics and ACE inhibitors/Angiotension II receptor antagonists as listed above. May take diuretics if in combination form with a beta blocker such as metoprolol/hydrochlorothiazide
- Steroid medications such as prednisone
- Anti-seizure medications such as Depakote, Keppra, Dilantin, Tegretol
- Chronic benzodiazepines such as Xanax
- Acid reflux medications such as Prilosec, Tagamet, Nexium, pantoprazole
- Medications for Parkinson's such as Carbidopa/Levodopa
- Gabapentin and Lyrica

Use any inhalers that you normally would in the morning. Please bring these with you to the hospital. If you use insulin, instructions regarding this will be given by the hospital or surgical center Pre-Admission nurses. You may use Tylenol for pain if needed when you have stopped the NSAID medication. This does not need to be stopped prior to surgery.

Infection Control and Showering Before Surgery

Our goal is to keep you safe and free from infection. You can help with this goal by following these showering instructions. Doing so will help reduce the number of germs on your skin, which lowers the risk of you getting an infection after surgery. It is also important for your skin to be as clean as possible so that the antiseptic cleaning we do before surgery on your skin will work to its full potential.

Before surgery, it is highly recommended that you use a 4% chlorhexidine gluconate solution to bathe with. Read all label instructions carefully and follow the directions on the package for proper skin cleaning. In most cases, this skin cleansing solution will be provided to you at your pre-operative PT or OT appointment. If you do not have a pre-operative PT/OT appointment, visit Steindler Therapy at our North Liberty clinic, Monday - Friday, 8:00 am - 4:30 pm.

Showering Before Surgery Instructions:

- Shower the night before or day of your surgery using antibacterial soap and shampoo your hair with regular shampoo.
- After you clean with antibacterial soap, turn the water away from yourself and thoroughly apply the 4% chlorhexidine gluconate solution to your entire body, but not your face and genitals. Take extra care to clean the surgical area.
- Once the solution is applied, fully wash it off and do not wash again with other soap.
- Do not shave. Men may shave facial hair if surgery is not in the head/neck area. Any cut, abrasion, or rash near your surgical site will be evaluated and may cause a delay in your procedure.

After Showering:

- Dry yourself off with a freshly cleaned, dry towel.
- Do not apply lotions, ointments, perfumes, deodorants, hair products, or powders.
- Put on clean clothes or pajamas.
- Put clean sheets on your bed to sleep on the night before surgery.
- Do not allow pets to sleep in your bed.

If you have any questions, please contact Steindler Orthopedic Clinic at (319) 338-3606.

What to Bring to Surgery

_____ This Planning Guide
_____ Your COACH
_____ Loose-fitting clothes
_____ Your front-wheeled walker
_____ Necessary personal items
_____ Supportive shoes
_____ Glasses/glasses case
_____ Hearing aid, extra batteries, case
_____ CPAP or BiPAP machine (if staying overnight at a partnered hospital)
_____ Copy of Living Will, Durable Power of Attorney, etc.

For your Family

Please designate one family member (perhaps your coach) to coordinate information about your procedure for other family members.

Consult with Steindler Surgery Center staff for wireless internet access.

Guest Lodging

If you are having surgery at a partnered hospital and may be staying over night, please consult with that facility about options for guest lodging.

Lumbar Fusion Surgery

Frequently Asked Questions (FAQs) and answers.

PRIOR TO SURGERY
Questions 1–8

DAY OF SURGERY
Questions 9–17

GOING HOME
Questions 18–29

1–2 WEEKS FOLLOWING SURGERY
Questions 30–34

6 - 8 WEEKS FOLLOWING SURGERY
Questions 35–39

12 -16 WEEKS FOLLOWING SURGERY
Questions 40–44

WHAT ABOUT THE FUTURE?
Questions 45–46

PRIOR TO SURGERY

1. Q: Do I need to stop taking certain medications prior to surgery?
   A: Possibly. It depends on your circumstances. These questions are answered at your pre-admission screening appointment which is why you should provide a complete and detailed medical history during your pre-admission screening appointment.

2. Q: What if I get an infection prior to surgery?
   A: You must call the office if you develop any infection, such as a cold, sinus infection or urinary tract infection prior to surgery. We handle this on a case-by-case basis.

3. Q: What equipment will I need?
   A: You may need a front-wheeled walker. A stool riser may be helpful unless you already have elevated toilets. Specific equipment needs and sizing for you will be addressed at your Occupational Therapy pre-instruction appointment. Occupational Therapy will see that you have needed self-care equipment, and this can be purchased at your pre-instruction appointment. You may also need a single tip cane for stairs or later in your recovery. It may be wise to have at least one railing installed for stairs inside your home. A recliner works well to elevate your legs.

4. Q: How long will I be in the surgery center or hospital?
   A: You may be receiving an outpatient procedure at Steindler Surgery Center and will go home the same day. If your surgery is being performed at a partnered hospital, you will likely stay there overnight. The hospital physical therapy staff will inform you and your surgeon when you are safe and prepared to return home.

5. Q: Will I need to have someone at home with me when I am discharged?
   A: After your surgery, you will be able to get in and out of bed, get in and out of a chair, walk to and from the bathroom, and be able to go up and down stairs. It is best to have someone stay with you the first few nights at home, though it is unlikely that you will need someone with you continuously. Physical/occupational therapy may be ordered for you to work on mobility, self-care (including using the toilet), dressing, and bathing/showering. You may need some initial help at home for showering, as well as laundry and meals. If family or friends are not able to assist, some outside help can be arranged, usually at your cost. Occupational therapy will address this with the discharge planner.

6. Q: I live alone, will I need to rely on others?

   A: Because we live in rural Iowa, this is an understandable concern. We suggest you utilize friends and family through this process. Spine surgery is best accomplished when you have a coach and others help you. Success is best achieved by going to your home after surgery, working on your exercises several times a day, occasional walking, icing your back, and following spine precautions. Home physical therapy and skilled care units are used as a last resort. You are free to contact a nursing home to pay privately when you are discharged. You must contact the nursing home prior to your operation.

7. Q: Do I go to physical therapy once I return home?

   A: No. Your surgeon may initiate further outpatient physical therapy if needed.

8. Q: I get very nauseous and vomit after surgery, what can I do?

   A: Let your surgeon and anesthesiologist know beforehand, and medicine can be prescribed to take the morning of surgery.

DAY OF SURGERY:

9. Q: What will happen the day of surgery?

   A: You will be informed of what time to arrive the day of surgery. Nurses will record basic information, you will get into a surgical gown and an IV will be started. The anesthesiologist will meet with you to discuss your anesthesia and answer any questions. Your surgeon will speak with you to answer questions.

10. Q: Will I be asleep for surgery?

    A: You will be under general anesthesia (completely asleep). You will not be awake for the surgery. We may also use a local anesthesia to decrease pain the first 24 hours. All of this is done to keep you the most comfortable and have the least amount of pain.

11. Q: How long is the surgery?

    A: The surgery itself typically takes about 2-5 hours.

12. Q: Will I have stitches?

    A: There will be steri-strips on the skin over the incision. The incision will be closed with buried stitches and then sealed with steri-strips and you will be instructed to cover the incision for showers.

13. Q: Will I have a catheter in my bladder?

    A: Sometimes a catheter is needed.

14. Q: Will I get out of bed the same day of surgery?

    A: Yes, if medically stable. Nursing and/or physical therapy will assist you getting in and out of bed, walking to and from the bathroom and sitting in a recliner. You will also start learning motion/activity precautions. You will also learn to log-roll, get in and out of bed, and use your brace whenever out of bed.

15. Q: What will I use for pain control?

    A: IV pain medications or oral pain pills, similar to the ones you will take at home. Nursing and physical therapy will routinely assess your pain, and there is a range of medical options to be sure your pain is controlled. You will also be instructed on alternative, non-medicinal ways to control your pain. Ice packs will also be routinely offered while in the surgery center.

16. Q: I have sleep apnea, should I bring my CPAP?

    A: If you are having an outpatient procedure at Steindler Surgery Center, you will not need it. If you know you are staying overnight at a hospital after your surgery, please bring it and inform nursing when you reach your room after surgery.

17. Q: Will I have physical therapy before discharge?

    A: If you have outpatient surgery at Steindler Surgery Center, you will walk and practice transfers with assistance from nursing staff before you are discharged. If you stay overnight at a partnered hospital, you will usually work with physical therapy before you are discharged.

GOING HOME:

18. Q: How will I get home?

    A: On the day of discharge, surgery center staff will teach you and your family and/or coach how to get you in and out of a vehicle while maintaining your spine precautions. Surgery center staff will assist you into your vehicle.

19. Q: What will I use for pain control when I get home?

    Your prescription will be sent electronically to your pharmacy. Any refills can only be done during Steindler business hours. Your prescription will likely be Tylenol with Hydrocodone or Oxycodone. Each tablet of Hydrocodone contains 325mg of Tylenol (Acetaminophen). At home, you can take 1 or 2 tablets, separated by the **time instructions on the prescription**. Narcotics can affect your alertness, can be constipating and can be addictive. **You should try to get off of them as soon as you can** by cutting back from taking 2 tablets at a time to only 1 tablet at a time and increasing the time between doses. You can substitute plain Tylenol (Acetaminophen). You can safely take up to 3000mg of Tylenol (acetaminophen) a day. Plain Tylenol contains 325mg of Acetaminophen and some narcotics also contain Tylenol (325mg of Acetaminophen), so be sure to count both medicines in your daily limit. If you do need a refill on your pain medicine, that can only be done during Steindler business hours. Please try to plan ahead so that you do not run out on the weekend. You should allow 2-3 business days to complete a refill, so your surgeon has time to receive your request. Ice packs are also very helpful, and several should be purchased and frozen pre-operatively.

20. Q: How long will it take to recover?

    A: When you get home, you will be able to navigate around the house by yourself. You will be able to do stairs. You will know and be reliable with your spine precautions. You may use a walker for approximately 2 weeks. Driving and returning to work will be discussed with your surgeon at your 2 week appointment. The bottom line is you **cannot** drive until you can do so safely. You need to have good muscle and reflex control and not have taken narcotic pain medicine for 24 hours. Returning to work is the most variable depending on your occupation. The earliest return to work would be a strict sitting job at 2 weeks or longer. You will need to wear the brace and follow spine precautions for 8 weeks. Labor work and construction work may require 3-4 months. Again, your surgeon is your best resource for these questions.

21. Q: Can I take over the counter Ibuprofen or Aleve (Naproxen) with my pain medications?

    A: Do not take NSAIDs for 3 months after your lumbar fusion surgery. Again, discuss this with your surgeon and you will be provided with specific written instructions at discharge.

22. Q: Should I be using ice on my back?

    A: Yes. This is done frequently throughout the day to alleviate pain and swelling. This should be done for 15-20 minutes every hour as needed. You can start timing once you feel the coolness on your back. You will need several ice packs and you should purchase these prior to your surgery. The ice pack should not make direct contact with your skin.

23. Q: What is the most important thing for me to do once I am home?

    A: It is important to be reliable with your spine precautions and walking around every 1-2 hours while awake.

24. Q: Narcotic pain medicine can cause constipation, what should I do?

    A: Fruit and fiber intake should be increased. Frequent walking and drinking a lot of water will also help manage constipation. You can also use a laxative, such as Miralax or Colace. These are available at your pharmacy. Call Steindler Orthopedic Clinic at (319) 338-3606 from 8:00 am-4:30 pm or talk to your pharmacist if you have any questions.

25. Q: What if I have questions about my home medications after surgery?

    A: Call Steindler Orthopedic Clinic at (319) 338-3606 from 8:00 am-4:30 pm and discuss with a medical assistant.

26. Q: What are the signs of infection?

    A: Although a low-grade temperature (100 degrees) is common for a few days after surgery, an increasing temperature, chills, shakes, increasing pain, and worsening redness are signs of possible infection. If you are concerned about infection, please call Steindler Orthopedic Clinic weekdays 8:00-4:30 at (319) 338-3606 or (800) 373-6417. After hours or on weekends, please call UIHC Downtown at (319) 339-0300.

27. Q: How can I prevent blood clots?

    A: Foot pumpers and support stockings (TED's) will be used in the surgery center. Early and frequent mobilization like walking and changing positions is recommended. Frequently move your ankles and toes.

28. Q: What are the signs of a blood clot?

    A: A blood clot or deep vein thrombosis (DVT) begins in a vein in your calf muscle. Symptoms include an increase in swelling below the knee, worsening pain, and tenderness in the calf. Other signs can be shortness of breath and an irregular or fast pulse. These can be signs that a clot has gone to the lungs. If you experience changes in your leg, you should immediately call **Steindler Orthopedic Clinic** weekdays 8:00-4:30 at (319) 338-3606 or (800) 373-6417. After hours or on weekends, please call UIHC Downtown at (319) 339-0300. **Shortness of breath or changes in your pulse or heartbeat are cause for calling 911 immediately.**

29. Q: Can I shower over the incision and let it get wet?

    A: It is essential that you keep your surgical incision dry. Most of the time, it will be closed with dissolvable stitches. The incision will be covered with "steri-strips" or skin glue, these will fall off on their own within several weeks, usually before your follow-up appointment. Take sponge baths for the first 3 days after surgery, this will allow a scar to form over the incision. It is okay to shower over the dressing 3 days after surgery. It is okay to leave the incision open to the air 1 week after surgery. The steri-strips will fall off on their own.

1–2 WEEKS FOLLOWING SURGERY:

30. Q: Is it normal that I am not hungry?

    A: Yes. Many people get post-surgical anorexia (lack of appetite). This will pass on its own. It is suggested that you supplement your diet with protein shakes (like Ensure) or Carnation instant breakfast drinks.

31. Q: Why can't I sleep?

    A: Surgery definitely interrupts your sleep-wake cycle. Also, the pain from the recovery is often more noticeable at night. It is recommended that you take your pain medicine before bed and ice at bedtime. Limiting daytime naps to 20 minutes is also helpful. Call **Steindler Orthopedic Clinic** weekdays 8:00-4:30 at (319) 338-3606 or (800) 373-6417 if you are having trouble sleeping. Sometimes a sleeping medication can be prescribed for a short period.

32. Q: Is it normal that my back is red/swollen/hot?
    A: A light pink is very common after surgery. Spreading redness that is accompanied by increasing pain and fever is a sign of infection. Swelling may continue for up to a year. It will get better, but it may take months.

33. Q: Will I be able to sleep on my back?
    A: You may sleep without the brace on your back or on your side with pillows between your knees. You may be more comfortable sleeping in a recliner initially. When getting up from lying down, use the log rolling technique you learned in the surgery center or hospital; remember not to twist your spine.

34. Q: What is my goal in therapy?
    A: It's MANDATORY you remain reliable with your spine precautions for the first 8 weeks and then your surgeon will instruct you when and how to gradually decrease the need for these. You need to be walking around every 1-2 hours while awake until your 2 week appointment.

6-8 WEEKS AFTER SURGERY:

35. Q: Is it still supposed to be swollen?
    A: Yes, this is still normal.

36. Q: Is it still supposed to be stiff?
    A: Yes, stiffness is still common (especially after sitting).

37. Q: Is it still supposed to ache and hurt and feel restless at night?
    A: Yes, this is common.

38. Q: Shouldn't it be completely healed by now?
    A: No, complete healing takes several months.

39. Q: Can I stop maintaining the spine precautions?
    A: No. Your surgeon will let you know when you can safely stop.

12-16 WEEKS AFTER SURGERY:

40. Q: Is it normal for my back to still be stiff?
    A: Yes. This is most noticeable first thing in the morning and when you have been sitting for a length of time.

41. Q: Is it normal for my back to be sore and ache later in the day?
    A: Yes, this is normal.

42. Q: What can't I do?
    A: You can't run or jog, but walking, biking, and hiking are okay. You should not jump off the last few rungs of a ladder, the tailgate of a pickup or farm machinery. You should not do high risk activities like water skiing. Discuss with your surgeon any other questions you might have about your activity levels.

43. Q: What about going through the airport after my lumbar fusion?
    A: Inform the TSA staff as you enter security. Your surgeon may provide you with an ID card but you will still need some level of security screening.

44. Q: Can I go to the dentist now?
    A: Yes, now that is has been 4 months since your surgery.

WHAT ABOUT THE FUTURE?

45. Q: What do I do if I think I am getting an infection such as a skin, sinus, dental, or urinary tract infection?
    A: You should call your primary physician as you normally would.

46. Q: What are the symptoms of infection?
    A: These may include drainage, increased swelling, redness, and pain not associated with increased activity. You should call Steindler Orthopedic Clinic 8:00-4:30 at (319) 338-3606 or (800) 373-6417 at the earliest signs of infection. After hours or on weekends, please call UIHC Downtown at (319) 339-0300.

Contact Steindler Orthopedic Clinic at any time if you are unsure if you should continue with pre-dental antibiotics or have any other questions/concerns at (800) 373-6417 or (319) 338-3606.

What Are the Risks of Lumbar Fusion?

- **Infection**. We prevent infection by giving you antibiotics during and after surgery. Infections can occur at the site of your incision and in the deeper tissue. Most infections are treated with antibiotics, but a major infection might require surgery to remove and replace the hardware.
- **Blood clots**. Clots can form in the deep veins of your leg after surgery. This can be dangerous because a piece of a clot can break off and travel to your lung.
- **Medical complications**. All surgeries carry the risk of medical complications. These are rare, but include stroke, heart attack, lung problems, or other issues.

More rare complications:

- **Loosening**. Although this complication is rare with newer implants, your new hardware might not become solidly fixed to your bone or might loosen over time, causing pain in your back. That part may need to be replaced through further surgery.
- **Fracture**. During surgery, healthy portions of your spine might fracture. Sometimes the fractures are small enough to heal on their own, but larger fractures might need to be stabilized with wires, screws, and bone grafts.
- **Nerve damage**. Rarely during surgery, nerves in the area can be aggravated or even injured. This can cause numbness, weakness, and/or pain. This is a risk of surgery.

Lumbar Fusion Discharge Instructions

Things to Remember After Lumbar Fusion Surgery

- No Work:

  Do not return to work until cleared at your first follow-up appointment by the surgeon or PA/NP.

- Back Brace Use:

  Always wear your back brace when out of bed or not showering.

- No Smoking:

  Absolutely no smoking — it delays bone healing and increases surgical risks.

- Spine Precautions:

  No bending or twisting at the waist.

- Always move your feet to turn, not your torso.

  Use the log roll technique when getting in and out of bed.

- Lifting Restrictions:

  Do not lift, push, or carry anything heavier than 5–10 lbs.

- Activity Guidelines:

  - Gentle walking and light activity are encouraged.

  - Movement helps prevent blood clots and supports healing.

- No Driving:

  Avoid driving for the first 2 weeks post-op or until cleared by your surgeon or PA/NP.

- Avoid NSAIDs:

  No NSAIDs (e.g., ibuprofen, naproxen) for 12 weeks, or unless cleared by your surgeon or PA/NP.

Lumbar Fusion Post-Op: Wound Care Discharge Instructions

- Obtain Extra Dressings:

  Before leaving the hospital or surgery center, request additional waterproof dressings for at-home use.

- Keep Incision Clean & Dry:

  This is critical to prevent infection and promote healing.

- Incision Closure:

  - Typically closed with internal dissolvable sutures.
  - Reinforced with steri-strips; some cases may include external sutures or staples.

- Drainage is Normal:

  - Some wound drainage is expected, especially in the first few days.
  - Change dressing as needed if drainage increases.
  - Drainage may vary daily and increase with more activity.

- Initial Dressing:

  - Incision is covered with a waterproof bandage (e.g., Tegaderm)
  - Leave dressing in place until post-op day 8 unless it becomes saturated or compromised.

- Bathing Instructions:

  - Days 1–4: Sponge baths only — avoid getting incision wet to allow initial healing.

- Post-Op Day 4: You may shower with the waterproof dressing still in place.

  - After showering, replace dressing if wet or no longer adherent.

- Post-Op Day 8:

  - It is safe to remove the waterproof dressing and shower normally.
  - Leave incision open to air afterward.

- Steri-Strips:

  - Will fall off naturally over time, okay to remove if starting to fall off
  - If still present at your first post-op visit, they will be removed by the surgical team.

- Avoid Soaking:

  - No baths, pools, or soaking until the incision is fully healed and scab-free.

Activity & Good Body Mechanics After Lumbar Fusion Surgery

- Walking is key to recovery.

- Aim for gentle, slow-paced walking — no brisk walking.
- Try to gradually increase your distance every few days, as tolerated.

• Avoid Twisting:

- Do not twist at the waist — turn your whole body by moving your feet.

• Getting Out of Bed:

- Use the log roll technique: roll to your side, keep legs straight and aligned, then push up with your arms.
- Avoid bending or twisting your spine while transitioning from lying to sitting or standing.

• Posture Matters:

- Staying upright helps expand your lungs and reduces the risk of blood clots in the lungs.

• Use Proper Muscle Groups:

- Rely more on your leg and arm muscles, not your back or abdominal muscles, when performing daily activities.
- Discussion of activity restrictions and guidance for the next phase of your recovery

Follow-Up Appointment (2–3 Weeks After Surgery)

• At your 2–3-week post-op visit with your surgeon, you can expect:

- X-rays to check spine and hardware
- Wound check (steri-strips removed if needed)
- Review of activity restrictions and next steps

Questions or Concerns?

• Routine (M–F, 8:00 AM–4:30 PM):
Call 319-338-3606, ask for the surgeon's medical assistant

• After-hours urgent concerns:
Call UIHC On-Call Nurse at 319-339-0300

• Emergencies: Call 911

Car Ride Home

Depending on how far you have to drive to get home after leaving surgery, you may want to think about several things so that you can be more comfortable on the ride home:

- The staff will teach you how to get into your car. Depending on the shape of your car seats, you may want to bring several pillows to help keep yourself comfortable.
- You may want to put a plastic bag/grocery sack on the seat to help you swivel as you bring your legs into the car.
- You may also want to have a blanket along if you get cold. You can also use the blanket to support your knee, back, or head/neck depending on how you position yourself in the car.
- We recommend bringing a water bottle during your stay, and ensure you have water to drink for the ride home.
- You may want to bring 1 or 2 ice packs along to help with pain/swelling.
- Pain medication can make you nauseous, as can riding in a car. You may want to bring a bag along in case you have an upset stomach and get sick.

Other Considerations

- DO NOT get in the bathtub and sit down; you may shower if you can do so safely. To step over the tub, stand sideways, step in and out with stronger leg first.
- DO NOT take prolonged rides in a car; keep in mind the above precautions as you get in/out of the car. A plastic bag on the front seat may help you slide into the seat more easily. Drive only after your physician has given approval.
- DO use your walker until you see your physician.



Sock Aide

Place your sock completely over the sock aide.

Next, hold the straps/rope and lower the sock aide to the floor in front of your foot.

Pull the straps/rope so that your foot goes inside the sock and sock aide.



Use a Reacher

Use a reacher when you can to avoid bending over towards the floor. This works well for small items such as clothing, trash and other small objects.



Putting on a Shoe with Long-Handled Shoe Horn

Grab the tongue of your shoe with a reacher and place your foot partially inside your shoe.

Next, use a long-handled shoe horn to assist getting your heel inside the shoe to complete the process.

STEINDLER ORTHOPEDICS

STD/FMLA Policy

If you are having surgery and will be unable to work, your employer may require you to have paperwork completed and the company that processes this paperwork may have a deadline for submission. **Please remember our processing time may take up to 10 business days, which begins on the 1st day when all required information is received by our office.** The required pieces of information are listed below.

Steindler Orthopedic requires three pieces of information to process your STD/FMLA forms. There is a 10-day processing time and will not begin until ALL required pieces have been received.

1. **A signed Release of Information:** This tells us who you are giving us legal permission to release your medical information to. This is required regardless of who will be receiving the information ie: insurance company, employer, yourself. If you have more than one form to complete, please provide both companies as they must be listed on the release with the fax/address provided. This form can be found on our website steindler.com under Patient Resources.

2. **Documents/Forms needing to be completed by the physician:** Your employer should provide these to you.

3. **Payment in full:** A $20 service charge applies to only Disability & Loan forms to assist with covering the cost of processing the form. These costs also include but are not limited to the time required to complete the form as well as the transmission of forms and medical records.

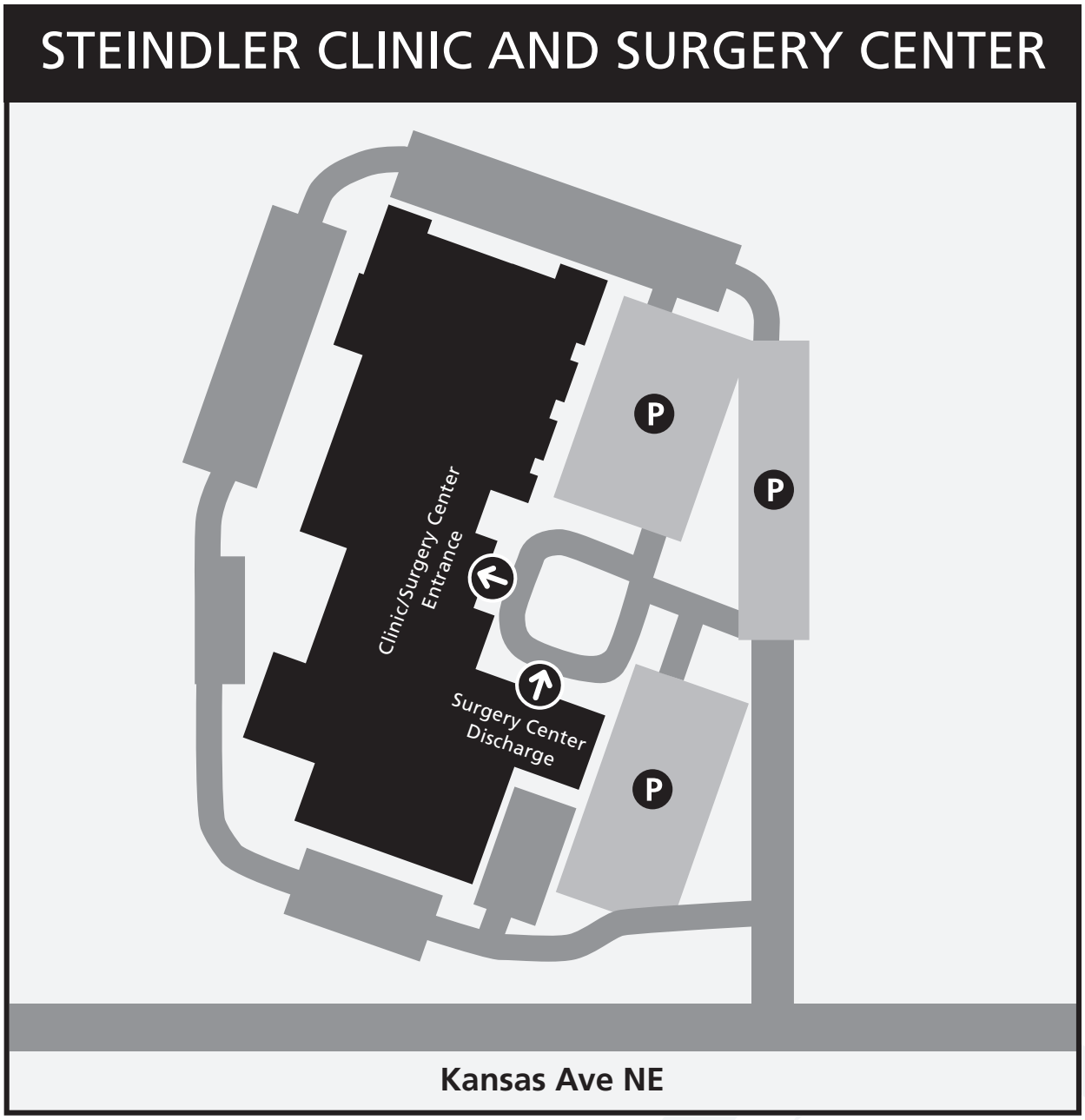
   Once you have submitted the three required pieces of information, your paperwork will be completed and sent to the employer or insurance company you have provided on the signed release of information form.

Please send the completed and signed STD/FMLA Form request, along with the forms from your employer to Diana Parisi. Any questions, please contact Diana via phone or email.

Direct Line: (319) 248-4504

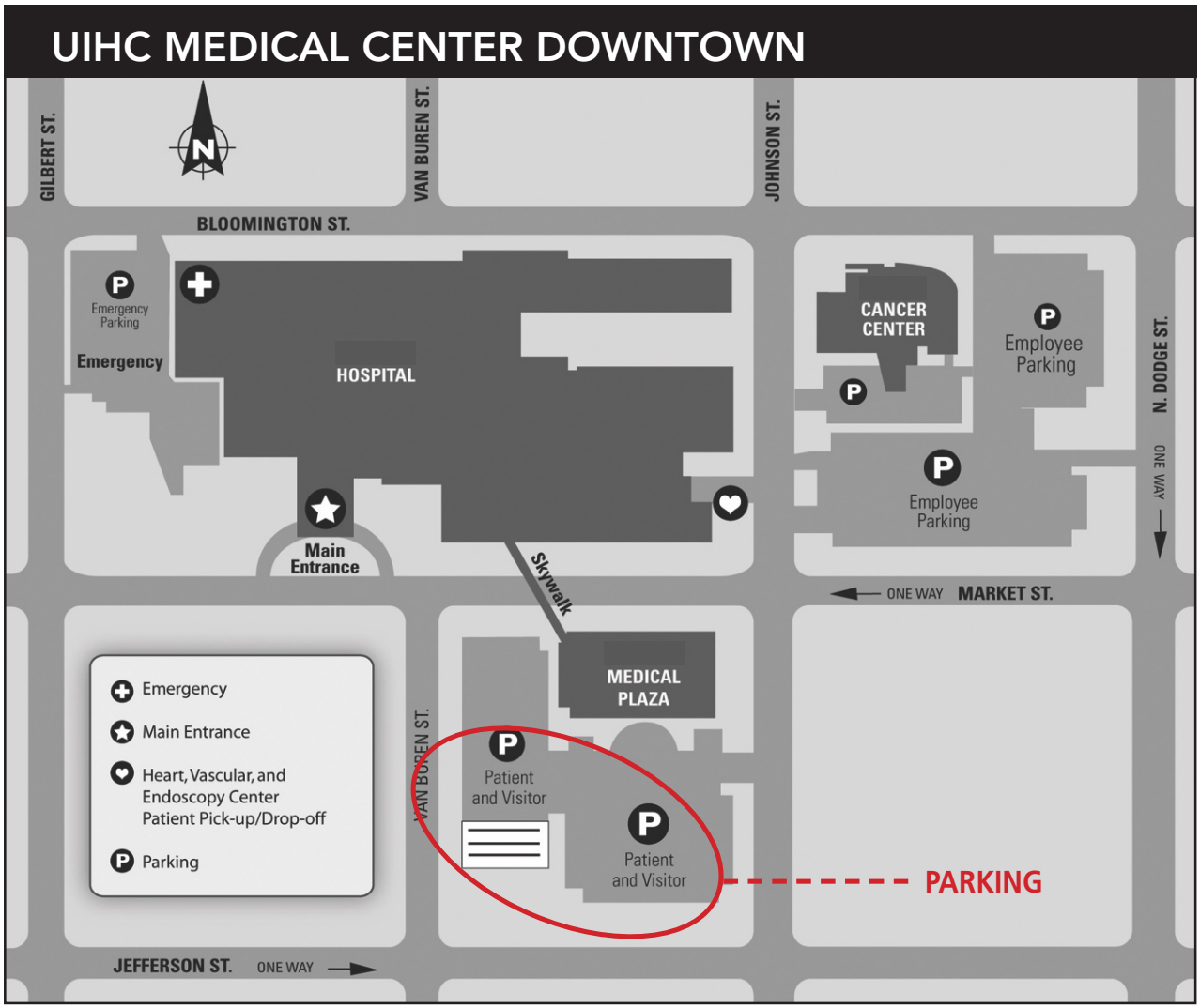
Email address: dcparisi@steindler.com

Fax: (319) 338-0522



2301 Steindler Way, North Liberty, IA 52317

- You will use the same entrance to get to Steindler Orthopedic Clinic and Steindler Surgery Center.
- Go to the left door to reach the surgery center.
- After surgery, patients will be discharged from the surgery center exit.



500 East Market Street • Iowa City, IA 52245

Your Questions and Notes

While you are reading through this guide, write any questions below and bring them to your appointments:

Surgery Scheduling Department

Phone: (319) 600-8089

Office Hours: Mon - Fri, 8:00 am - 4:30 pm

STEINDLER ORTHOPEDIC CLINIC

2301 Steindler Way, Suite B, North Liberty, IA 52317
(319) 338-3606 • Steindler.com

STEINDLER SURGERY CENTER

2301 Steindler Way, Suite A, North Liberty, IA 52317
(319) 259-8400 • Steindlerasc.com

Rev 10/2026