Patient 8	Caregiver	Education
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Spine Surgery Pathway - Minimally Invasive Surgery (MIS)

Surgery date:	
Expected discharge date:	

These are goals for your recovery. Your experience may not follow this pathway exactly. Your doctor or nurse will tell you what to expect.

	Before Surgery		
What should I do?	 Follow the instructions your care team gives you. Talk with your health care agent about your advance directives (such as your Health Care Proxy form). Start thinking about discharge planning. Choose a caregiver to help you after you're discharged. Think about who will be there during your discharge teaching. Make sure someone can pick you up by 11:00 AM on your expected discharge date. 	 The night before surgery and morning of surgery: Clean your neck and whole back with Hibiclens®. Don't use any lotion, powder, oils, or deodorant. 	
What can I eat and drink?	• Follow a healthy diet.	 The night before surgery: Don't eat or drink anything after midnight. This includes water and gum. 	
What medications will I take?	 Stop taking over-the-counter nonsteroidal anti-inflammatory drugs (NSAIDs) 7 days before surgery. Stop taking herbal and dietary supplements 7 days before surgery. 	Follow your doctor's instructions for when to stop taking anticoagulants (blood thinners), such as aspirin.	
What tests, procedures, and medical devices will I have?	 Presurgical testing (PST) appointment: Bring a list of all medications you take. Bring results from medical tests done outside of MSK (if you haven't already). Bring a copy of your Health Care Proxy form (if you have one). 		

	Day of Surgery		
What should I do?	 The morning of surgery: Clean your neck and whole back with Hibiclens. Don't use any lotion, powder, oils, or deodorant. 	 After surgery: Follow spinal precautions (no BLT) as instructed by your medical team. Move to your chair about 6 hours after your surgery. A staff member must help you. 	
What can I eat and drink?	• Don't eat or drink anything. This includes water and gum.	After surgery:At first, you will follow a clear liquid diet.You will slowly start eating solid foods, as tolerated.	
What medications will I take?	 The morning of surgery, at home: Take only the medications you were told to take. Take them with a small sip of water. In the presurgical center: Your nurse will give you medications to help with pain after surgery. 	 After surgery, you will get: Oral and IV pain medication. You will control your IV pain medication with a patient-controlled analgesia (PCA) button. Dexamethasone, if needed. IV antibiotics. Medications to help you have a bowel movement. 	
What tests, procedures, and medical devices will I have?	Placed before surgery: • Intravenous (IV) line • Compression boots Placed during surgery: • Urinary (Foley®) catheter	 After surgery: Your Foley catheter will be removed once you can sit in your chair. Your nurse and patient care technician (PCT) will check your vital signs and do neurological exams often. If you're taking dexamethasone, your finger will be pricked before meals and at bedtime so your blood sugar levels can be checked. You will be given insulin, if needed. 	

While you're in the hospital:

- You will wear compression boots while you're in your bed or chair, unless there's a reason for you not to.
- Once your dressing is removed, a staff member will clean your surgical site with Hibiclens every day.
- Clean your hands with hand sanitizer wipes or soap and water often.
- Use your incentive spirometer 10 times every 1 to 2 hours you're awake.
- Sit in your chair to eat all of your meals.

Spinal Precautions



No bending, lifting, or twisting (BLT). Read your discharge activity instructions for more information about what to do after your specific surgery.

	1 Day After Surgery	2 Days After Surgery Until Discharge	
What should I do?	 Follow spinal precautions (no BLT). Your bandage may be changed or removed. Talk to your care team about who will be present at discharge and who will take you home. A physical and occupational therapist (PT and OT) will visit you in your room. They will see how you're doing and make an exercise plan for you. Be out of bed as much as you can. A staff member must help you move to your chair. Walk around the unit 3 times today. A staff member must help you. 	 Follow spinal precautions (no BLT). Be out of bed for longer than you were yesterday. Walk around the unit 5 times today. A staff member must help you. Finish planning your discharge. Your care team will help you. Tell your care team the name of the pharmacy you want your prescriptions sent to. Make sure your caregiver is with you for your discharge teaching. Your nurse will go over your discharge medications. If you need to take insulin at home, you and your caregiver will be taught how to give you an insulin injection. 	
What can I eat and drink?	You will start your regular diet or a special diet (if needed).	Keep following your regular diet or a special diet (if needed).	
What medications will I take?	 Oral pain medications. You will slowly stop taking IV pain medications. Medications to help you have a bowel movement. Blood thinner injection (shot). Dexamethasone, if needed. Insulin, if needed. 	 Oral pain medications. Medications to help you have a bowel movement. Blood thinner injection. Dexamethasone, if needed. You will start to slowly stop taking (taper) this medication today. Insulin, if needed. 	
What tests, procedures, and medical devices will I have?	 You will have spine x-rays, if needed. Your nurse and PCT will check your vital signs and do neurological exams often. If you're taking dexamethasone, your finger will be pricked before meals and at bedtime so your blood sugar levels can be checked. 	 If you're having radiation therapy after your surgery, you will have a myelogram and simulation. If you're taking dexamethasone, your finger will be pricked before meals and at bedtime so your blood sugar levels can be checked. 	

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Spinal Precautions



No bending, lifting, or twisting (BLT).

Read your discharge activity instructions for more information about what to do after your specific surgery.

	After Discharge		
What should I do?	 Don't shower for the first 2 days after your surgery. Follow your care team's instructions for cleaning your incision with Hibiclens. 3 days after your surgery, shower every day until your staples or sutures are removed. When you shower, let the water run over your incision. Use Hibiclens and a clean washcloth to gently clean your incision. Rinse off and use a clean towel to pat your incision dry. Keep your incision uncovered. Don't submerge your incision underwater (such as in a bathtub, pool, ocean, or hot tub) for at least 2 months after your surgery. Don't use a heating pad (either electric or microwavable) near your incision until your care team tells you it's okay. Don't drive until your care team tells you it's okay. Call your doctor's office if you have any questions or concerns. 		
What can I eat and drink?	• Keep following your regular diet or a special diet (if needed).		
What medications will I take?	• Follow the medication list you got at discharge.		
What tests, procedures, and medical devices will I have?	• Your first appointment after surgery will be 3 to 4 weeks after your surgery.		

Notes	 	

Spinal Precautions



No bending, lifting, or twisting (BLT).

Read your discharge activity instructions for more information about what to do after your specific surgery.