



NORTHERN ARIZONA HEALTHCARE



# Spine Surgery Guidebook

The Ultimate Guide to  
Your Spine Surgery

Improving health, healing people.

**Always** better care.

**Every** person, every time...**together.**



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# Welcome

Welcome to Northern Arizona Healthcare's Spine Surgery Program!

The Spine Surgery Program you are about to enter will give you specialty care throughout your spine surgery journey. We want to help you improve your quality of life by giving you personalized care.

Our goal is to help you live with greater independence and movement.

In order to do this, we focus on four major points:

- Helpful and timely education
- Living a life of wellness
- High motivation
- Attentive and dedicated staff

## Meet your Team

Your healthcare team includes your orthopedic surgeon and office staff, anesthesiologist, operating room staff, a nurse navigator, an orthopedic trained nursing staff, physical and occupational therapists and care coordinator experts. Your overall care and wellness during your joint replacement experience is important to us, so it is a group effort between the medical team, laboratory, radiology, environmental and nutrition services. Our team will follow you throughout your stay and after discharge to help you have a successful recovery experience.

If you have any questions or comments, please call the nurse navigator (*Cottonwood (928) 639-6297* or *Flagstaff (928) 213-6433*) or your orthopedic surgeon's office. We look forward to meeting you and your loved ones and welcoming you to our program. Thank you for letting us help you with better bone and joint health.

Sincerely,

*Northern Arizona Healthcare*



# Purpose of the Guidebook

The purpose of this Guidebook is to start you off in the right direction, answer your questions and address any concerns.

Preparation, education, seamless care and a pre-planned discharge are important for ideal joint replacement surgery results. This Guidebook is a teaching tool for you and your loved ones. In reading this entire Guidebook and attending Spine Surgery Class, you and your loved ones will be well prepared for great results. See the colored boxes in the Guidebook for reminders, tips and more resources.

We want you to know:

- What to expect every step of the way.
- What you need to do.
- How to care for your new joint for life.

**Please remember this is just a guide.**

Your surgeon, nurse navigator, therapists or care coordinator may need to work with you one-on-one to help build a plan for your best outcomes. Always listen to their advice and tips. Bring your Guidebook with you to the hospital and keep it as a handy tool for the first year after your surgery.

## Helpful Reminders

We highly recommend visiting [NAHealth.com/jrp-spine](http://NAHealth.com/jrp-spine) to read more helpful information that is not included in this Guidebook before your surgery.

If you have a smart device, go to your camera and hold the lens over the QR code to the right. It will give you a pop-up to our website.



**You will be required to attend our in-person or online Joint Replacement or Spine Program Class before surgery.**

## Tips

You will find tips in the green boxes. Remember, these are only suggestions. Please ask your surgeon, therapists or nurse navigator if you have any questions.



# Frequently Asked Questions: Lumbar Spine

Below is a list of the most commonly asked questions, along with their answers. If you have more questions, please ask your surgeon or nurse navigator.

## What are the most common causes of back pain?

The most common causes of back pain are muscle injury and arthritis of the spine. Muscle injury can be caused from a specific event or simply because the muscles that support the trunk have become weak. Arthritis is a result of aging, genetics, or wear and tear on the joints and discs of the spine. Wear and tear alone can cause back pain and may cause leg pain if nerves are affected.

## What are the risks of spine surgery?

Many of the risks of spine surgery are the same as with any type of surgery. Risks include: blood clots, bleeding, infection, damage to nerves or vessels, scarring, pain, and the risk of the anesthesia itself. However, these risks are all low and not common.

## How long will I be in the hospital?

The time spent in the hospital will depend on the procedure you have, however, some patients go home the same day as surgery and many go home the next day.

## What activity level should I expect after surgery?

You should restart low-impact activities as soon as you can. Walking is the best exercise. Try to walk longer distances, slowly over time. A physical therapist may help you work on a safe discharge home. Talk to your surgeon before starting more active movements.

## What should I avoid after surgery?

You should not bend over, lift more than ten pounds, twist the spine and do high-impact activities. Always ask your surgeon about hard activities before doing them.

## Why should I quit smoking before surgery?

Many surgeons tell their patients to stop smoking before surgery and to think about quitting for good. Tobacco products have a bad effect on blood vessels, which can limit the body's ability to heal wounds and bones. The risk of infection and lung problems after surgery is also greater for patients who use tobacco. Many helpful sources of information are available, both online and off, to help people quit smoking.



## Will I need help at home?

You will need someone to help you for a few days to a few weeks after your hospital stay. The length of time help is needed depends on your progress. You will need someone to help you with meal preparations, house cleaning, and your home exercise program. If you prepare before your surgery, you can lower the amount of extra help you will need. It is best to have the laundry done, house cleaned, yard work done, clean linens put on the bed and single-portion frozen meals made.

### **Will I need to wear a back brace after surgery?**

Some surgeons tell you to wear a brace after surgery. Your surgeon will order the brace. The decision to wear a brace and how long it should be worn will be made by the surgeon.

**Please ask questions at any time.**

Use the following space for more questions:

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## Helpful Reminder

Visit [NAHealth.com/jrp-spine](http://NAHealth.com/jrp-spine) to read **more** frequently asked questions and advice/ tips from other patients.



# Frequently Asked Questions: Cervical Spine

Below is a list of the most commonly asked questions, along with their answers. If you have more questions, please ask your surgeon or nurse navigator.

## What causes neck pain?

The most common cause of neck pain is strain on the muscles and ligaments that support the neck. This pain can be due to overuse, poor posture, or minor injuries. This type of pain often stops within a few days. Arthritis is another cause of cervical pain. As we age, the joints in our neck may develop arthritis that is like the degeneration that develops in other major joints, such as the hips and knees. In the same way, the shock absorbers of the neck, the discs, may degenerate. As this gets worse, the discs become dry and cause pain. Fractures, tumors, or infections of the cervical spine can also cause pain.

## Why does my surgeon choose the front or the back of the neck for surgery?

Approaching your neck through the front may cause less muscle injury and tends to be less painful. Going through the back of the neck is necessary at times, but is more painful because there is more involvement of the muscle. Your surgeon will know which surgery is best for you.

## What are the risks of spine surgery?

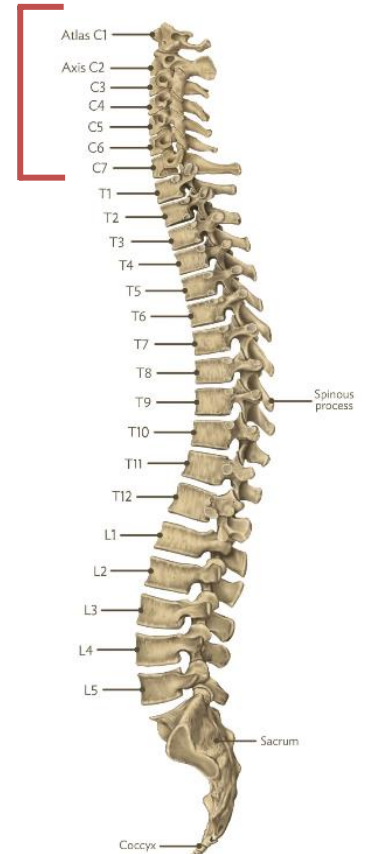
Risks include, but are not limited to: infection, bleeding, cerebral spinal fluid leak, failure of fusion, nerve injury, spinal cord injury, trouble swallowing, hoarseness of voice and the risks of the general anesthetic. The risks for posterior surgery are similar.

## How long will I be in the hospital?

The time spent in the hospital will depend on the procedure you have, however, some patients go home the same day as surgery and many go home the next day.

## Why should I quit smoking before surgery?

Many surgeons advise their patients to stop smoking before surgery and to think about quitting for good. Tobacco products have a bad effect on blood vessels which can limit the body's ability to heal wounds and bones. The risk of infection and lung problems after surgery is also greater for patients who use tobacco. Many helpful sources of information, both online and off, are available to help people quit smoking.





You should restart low-impact activities as soon as you can. Walking is the best exercise. Try to walk longer distances, slowly over time. A physical therapist may help you work on a safe discharge home. Talk to your surgeon before starting more active movements.

Limit lifting, pushing or pulling to less than ten pounds. Avoid movements that will put your neck in an extreme position such as reaching overhead or bending down low. In most cases, you are allowed to move your neck in a pain-free range. Avoid high impact activities. Talk to your surgeon before starting more activity movements.

Some surgeons tell you to wear a brace after surgery. Your surgeon will order the brace. The decision to wear a brace and how long it should be worn will be made by the surgeon.

Use the following space for more questions:

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Visit [NAHealth.com/jrp-spine](http://NAHealth.com/jrp-spine) to read **more** frequently asked questions and advice/ tips from other patients.





# Before your Surgery Checklist

Complete this checklist to be ready for your surgery.

## ☐ Step 1

**Know your surgery date and time.** Your surgeon's office will tell you of surgery date only.

*Cottonwood:* You will receive a phone call one to two business days before your surgery with the final date and time. If you have questions about your surgery date and time, you may call (928) 639-6426.

*Flagstaff:* Your surgeon's office will tell you of your pre-admissions appointment date and time, which will be two to three weeks before your surgery. This can be over the phone or in person at the hospital. If you have questions about your surgery date and time, you may call (928) 773-2048.

## ☐ Step 2

**Complete paperwork sent from your surgeon's office.** (*Cottonwood* location only). There will be paperwork to complete inside your Guidebook. Bring the completed papers and your Guidebook to your Joint Replacement/Spine Class.

## ☐ Step 3

**Attend Spine Surgery Class.** Please attend the mandatory class (*Cottonwood* patients are **highly recommended** to attend in-person class) or take the online class one to three weeks before your surgery. The online class can be found at the following link: <http://tinyurl.com/nahlearn> or scan the QR code. ➔



## ☐ Step 4

**Start asking people to help care for you** for the first weekend and up to two weeks or longer after surgery. This may include people traveling to town to help you, creating a rotation of helpers or paying a private caregiver. Research shows that going home is the best place for you to recover.

## ☐ Step 5

**Prepare your home.** Prepare your home for your return from the hospital. Remove throw rugs and tack down loose carpeting. Remove electrical cords and other obstacles from walkways. Install night lights in bathrooms and hallways. Prepare meals at home that can easily be reheated. Set up any adaptive equipment (toilet seat, shower chair, etc.)

## ☐ Step 6

**Stop all vitamins and herbal supplements 7 days before surgery.** You will receive other written medication instructions from your nurse navigator in class (*Cottonwood*) or during your pre-admissions appointment (*Flagstaff*).

## □ Step 7

### **Pack for your hospital stay.**

- Insurance cards.
- Copy of advanced directive (if you have this).
- Your Spine Guidebook.
- Personal hygiene items.
- Glasses, hearing aids and dentures with your name on containers.
- A few **loose** fitting shirts and stretchable pants or shorts, under garments, a pair of safe shoes (closed back walking/gym shoes with or without laces).
- Your front wheeled walker if directed (**not** a four-wheeled walker) and adaptive equipment purchased in Spine Class (if you have this).
- Do not bring valuable items (jewelry, large amounts of money, medications unless told to).

## □ Step 8

**Follow the pre-operative instructions.** Please review and carefully follow the pre-operative instructions you received in the Joint Replacement Class (*Cottonwood*) or from your pre-admissions appointment (*Flagstaff*). The instructions will include using a special shower soap/wipes before surgery.

## □ Step 9

**Carefully follow fasting and food/drink instructions.** This is important to avoid problems or cancellations of your surgery.

### **Tips**

Prepare yourself for surgery.

- Stop smoking as this slows healing and increases risk of infection. For help contact:
  - Coconino County Health Department (928) 679-7222
  - Yavapai County Health Department (928) 639-8130.
- Stop drinking alcohol as this can mix poorly with anesthesia, cause bleeding or dehydrate you. For help contact:
  - Flagstaff Guidance Center (928) 527-1899
  - Cottonwood Spectrum Healthcare (928) 634-2236
- Do not bring your home medications with you to the hospital unless otherwise instructed. This is for your safety.



## Hospital Maps

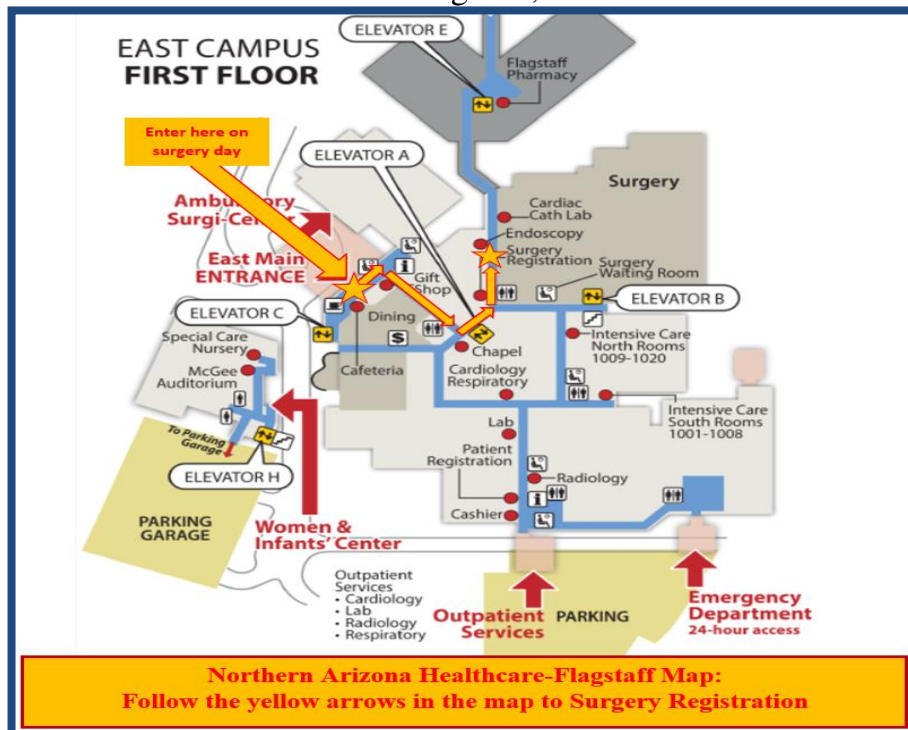
### Northern Arizona Healthcare- Cottonwood

269 S. Candy Lane in Cottonwood, AZ 86326



### Northern Arizona Healthcare-Flagstaff

1200 North Beaver Street in Flagstaff, Arizona 86001



Visit [NAHealth.com/jrp-spine](http://NAHealth.com/jrp-spine) to access valuable resources.



# Pre-operative Spine Class

The purpose of class is to prepare you and your loved ones for this surgery.

You will be **required** to attend Spine Class one to three weeks before your surgery. Depending on the location of your surgery, you will need to attend in-person or online. The online class can be found at the following link: <http://tinyurl.com/nahlearn> or by scanning the **QR code on page 8**. It is available any time and you can take the class as many times as you would like. Call (855) 624-4855 if help is needed with the online class.

The class schedule is as follows:

- An overview PowerPoint of the Joint Replacement Program
- Physical therapist presentation
- Occupational therapist presentation
- (Online class) To receive credit for attending class, you must complete the test at the end.

## **Northern Arizona Healthcare-Cottonwood**

NAH-Cottonwood will be held in-person, staying safe distances from each other. If unable to attend in-person, you may attend online. For the in-person, you will meet your nurse navigator who will help you walk through this journey. Class is held Tuesdays in one of the Conference Rooms at Northern Arizona Healthcare-Cottonwood. Class may last one to two hours. This class will also include:

- One-on-one instructions with your nurse navigator and medication technician
- Pre-operative tests completed after class, pending your surgeon's request.

## **Northern Arizona Healthcare-Flagstaff**

The online class is available for you and your helper to attend at anytime and as many times as you would like. Due to community health, there may not be an in-person class available for NAH-Flagstaff. Your pre-operative tests are scheduled through the surgeon's office. This includes your pre-admissions appointment where a nurse will review your health history and medication list. You will be given important instructions to follow before surgery.

Please bring the person who will care for you after surgery to class so he or she can hear the same information you do. This will prepare him or her to best help you during your recovery.

**If you have any questions regarding the pre-operative class, contact the nurse navigator: Cottonwood (928) 639-6297 or Flagstaff (928) 213-6433.**



# Checklist for Joint Replacement Class

If having surgery at Northern Arizona Healthcare-*Cottonwood*, please bring the following with you to the pre-operative class:

- ☐ The person who will help you after surgery
- ☐ This Guidebook
- ☐ Your **completed** paperwork from this Guidebook
  - a. History and Physical Questionnaire
- ☐ Medication and Allergy List (See example below)
- ☐ A copy of your Advanced Directive (if you have this)
- ☐ Card or cash if you plan on purchasing adaptive (helping) equipment
  - Reacher
  - Sock Aid
  - Dressing Stick
  - Long Handle Shoe Horn

## Example of a Medication and Allergy List

Allergy/Reaction: Penicillin (rash on chest), morphine (difficulty breathing)

Medications:

- Aspirin - 325 mg tab – 1 tab at 9 a.m. and 1 tab at 9 p.m.
- Lasix - 10 mg tab – 2 tabs at 9 a.m.
- Vitamin E - 100 units – 1 capsule at 9 a.m.
- Milk of Magnesia – 2 tablespoons at 7 a.m.
- Glucosamine - 500 mg tab – ½ tab at 9 a.m., noon and 5 p.m.
- Warfarin - 2 mg tab – 1 tab on M, W, F and 2 tabs on T, TH, SA, SU

Your medication list should include all prescription medications with the dosage, time and how often you take the medicine. It should also include over-the-counter medications; vitamins; food supplements such as glucosamine; and natural herbs.

# Daily Events/ Schedule while Hospitalized

## Evening before surgery

- Shower the evening before surgery with the soap/wipes you received at your pre-admissions appointment or Spine Class.
- Do not eat solid foods or drink dairy products/ juices with pulp after midnight.

## Surgery day

- Complete your final shower with the special soap/wipes at home.
- Follow the instructions you were given that tells you which medications, if any, are OK to take with a sip of water.
- Arrive at the pre-op waiting room at the time given to you on your instructions.
- Wait in the holding area, meet the anesthesiologist and see your surgeon.
- Go to the operating room.
- Wake up in PACU (recovery room); loved ones updated.
- Transfer to your room, or complete your recovery in PACU and discharge home.
- Diet will be increased as you can tolerate, starting off with ice chips or clear liquids.
- Pain will be managed with oral and IV medications; communication with your nursing staff is key.
- Sit at edge of bed, stand, or transfer to a straight back chair in the care of a therapist or nursing staff (if medically stable).
- Vital signs will be taken frequently; you may rest in the straight back chair for the evening.
- **If OK'd by your surgeon, you may discharge home the day of surgery.**

## First day after surgery/ Discharge day

- Early morning lab work.
- Get up to sit in straight back chair before breakfast arrives.
- See and talk to the physician assistant and/or surgeon.
- Eat breakfast.
- Individual/ group therapy services in room dependent on schedule and facility.
- Eat lunch sitting up in recliner.
- Physical/occupational therapy may work with you before discharge home.
- Rest, ice and ankle pumps.
- Discharge home when allowed by medical team.

### Helpful Reminders

Visit [NAHealth.com/jrp-spine](http://NAHealth.com/jrp-spine) to see helpful hints from staff and a pain management and safety overview.





## Discharge day

- Your surgeon and/or your physician assistant will write discharge instructions and talk about them with you. Plan to go home with a loved one/helper staying with you through the first weekend up to two weeks or longer. Your loved one can help with light activities at home.
- When going home, your discharge time may be late morning to afternoon. Please plan and talk with your loved one/helper to have a ride home ready, before your surgery.
- New prescriptions may be filled at our retail pharmacy for your ease. Plan to bring cash or card to pay for what insurance may not cover.

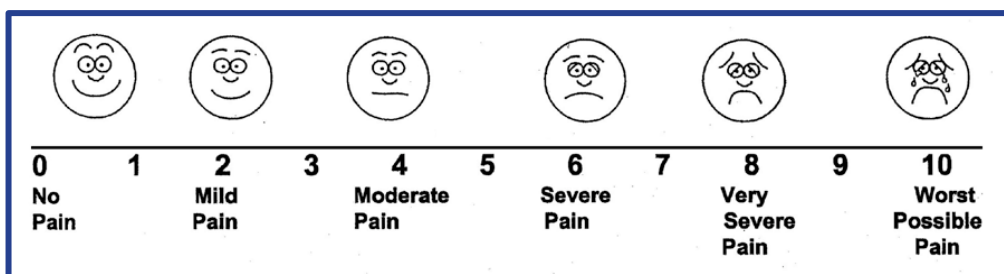
## Plan to discharge home the day of surgery or the day after surgery.

### Call! Don't Fall!

After your surgery, there is a greater chance to fall when you move. Do not get out of bed or up from the chair by yourself. We will help you move from the bed, to the chair, or to the bathroom. There will be a call light within reach to use to call for help.

## Managing your Pain

While you are in the hospital, open communication between you and your health care team is the **key** to better pain management. Everyone handles pain differently. Expect some discomfort/pain after your surgery. Our goal is to lower your pain to an OK level so you can do therapy and live your life. As your pain level increases slightly, tell your health care team so they can help you in ways to lower your pain: medications, positioning, cold therapy and relaxation techniques. We may use a number scale, as seen below, to help better communicate your pain level.



## Coughing and Deep Breathing

You will receive directions to take deep breaths **ten times every hour** while awake, with a device called an Incentive Spirometer. You will learn more about the importance of coughing and deep breathing while in the hospital. These activities will help fully open your lungs and avoid post-operative respiratory infections. Use your Incentive Spirometer for two weeks after discharged from the hospital.

# Post-Operative Activity

As listed on your “Daily Schedule” section, you will *likely* have physical and/or occupational therapy sessions while you are in the hospital. You will begin approved exercises following your surgery.

Depending on our visitor rules, please have a loved one at one of these sessions, so he or she understands your exercises and precautions (safety limits) as well.

## Activity Guidelines

Keeping your back healthy will take some work on your part. Your surgeon may want you to walk as your number one exercise. Your surgeon may ask you to wait six to eight weeks before going to outpatient physical therapy. At these visits, you will work on restoring strength, independent walking and movement, endurance and more exercises. Always check with your surgeon before you start an exercise program. If you have a lot of pain doing an exercise, **STOP**. Be sure to follow your spine precautions/limits given to you by your surgeon and medical team.

## General Activities

- Walking is the best exercise. Start the night of surgery and focus on many, short walks, at least four times a day. Increase your walking distance slowly as your pain level gets better.
- Log roll when getting in and out of bed.
- Limit your sitting time and use a straight back chair. May use a recliner if your surgeon allows.
- Change your body position every 45 minutes.
- Shower as your surgeon gives you the OK.
- Ask your surgeon when you can start driving. It is illegal and dangerous to drive while taking prescription pain medication.

**Safety is first. Your surgeon and/or therapists must give you the OK before doing any exercises.**

## Exercise Options

- Regular walks
- Home treadmill

## Exercises to Avoid

- Do not run or do high-impact activities.
- Do not do high-risk sports such as downhill skiing, sky diving or mountain biking, etc.
- Golf should be OK'd by your surgeon.



# Activities of Daily Living

## Using a walker

- Front-wheeled walkers are the **only** walkers safe for this surgery.
- Before walking, make sure you are balanced and not light-headed.



**Step 1:** Move the walker one step in front of you.

**Step 2:** Step forward with one leg.

**Step 3:** Follow through with your other leg.

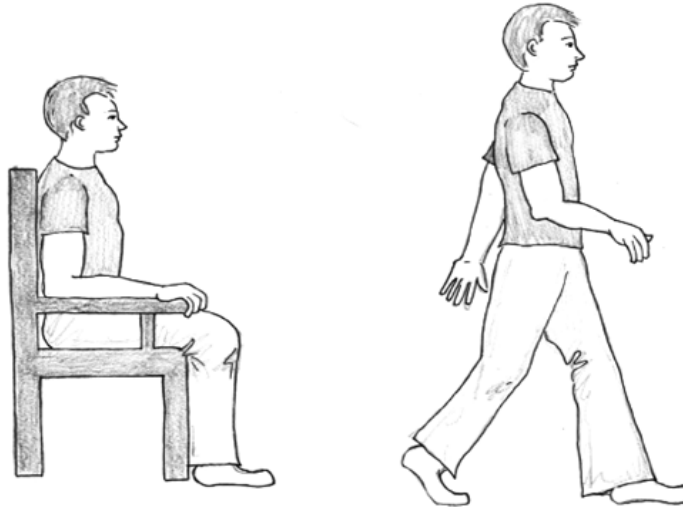
### Tips

- Allow your arms to take some of the weight off when you are standing on one leg.
- Keep your home safe for walker use: remove rugs, have well-lit rooms, minimize electrical cords and move unnecessary furniture.
- Be sure to search for a front-wheeled walker appropriate to your height and/or weight:
  - Junior Walker: less than 5'4"
  - Adult Walker: 5'4" - 6'5"
  - Bariatric Walker: greater than 6'5" or 300 lbs.
- Keep your body positioned between the back two legs of the walker.



# Spine Precautions

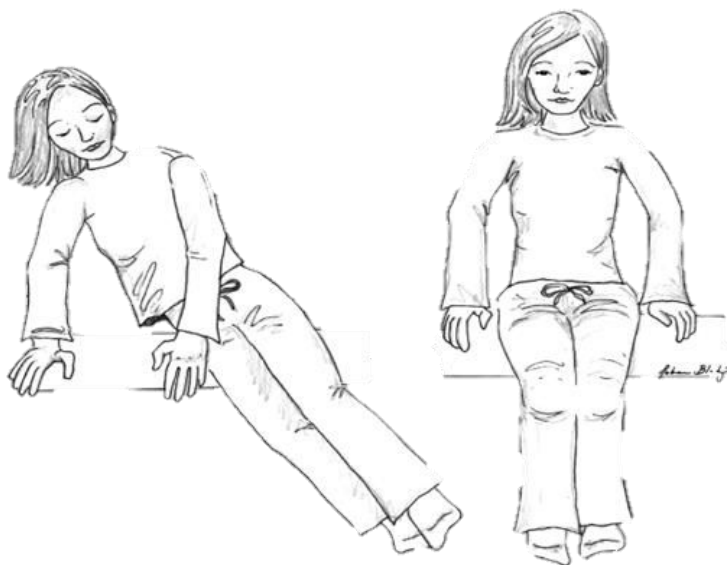
**Change position  
every 45 minutes**



**Log Roll**



**Getting Out of Bed**



## Tip

- If needed, raise the surfaces you are sitting on (toilet riser, chair risers) so your hips are above your knees.



# Discharge Planning

Discharge planning is an important part of your education. The hospital provides a safe place for patients. Going home may lead to feelings of fear or doubt. To look after your home needs, your medical team will follow your improvement and help with all the needed arrangements, including plans for therapy and guiding you to the right equipment.

Depending on your surgeon, you may need to have outpatient therapy or home health therapy after discharge.

Our team will help make your discharge and move back home as smooth as possible. **Most patients will go directly home after discharge.**

The nursing and therapy staff will give you word-of-mouth and written discharge instructions before you leave the hospital. These instructions will cover activities, follow-up appointments and home medications. Please ask your nurse and therapists any questions you may have about the discharge instructions. It is important you and your helper read over the written instructions word for word.

After your spine surgery, it is essential to follow up with your surgeon on a regular basis.

## Be on the Look Out

### 1. Tell your surgeon if:

- You have a fever greater than 101 F.
- You have *new* pain in the calf of your leg (blood clot).
- You have *sudden* pain or swelling at the operation site.
- You observe a change in the color or odor of the drainage from the operation site.
- Chest pain, difficulty catching your breath (call 911).

2. **Prevent blood clots** with walking, ankle pumps and compression stockings (may be for 6 weeks on both legs; take them off at least once per day to check your skin). Your nurse may give you an extra pair to take home, hand wash and drip dry. If your surgeon allows, you may buy extra compression socks at a pharmacy, store or online.

3. **Take the prescribed pain medication as directed** by your surgeon. If you are extremely sleepy, have shallow breathing, a slow heartbeat, or feel light headed like you might pass out, seek help and do not take more pain medication. Write down when you take medications. It is recommended you take pain medications 30 to 45 minutes before the start of therapy. As the pain

- lessens, take less pain medication. **Use ice for pain control**, no longer than 20 minutes per spot each hour.

**Nutrition is very important** for wound healing. Consider drinking a nutritional shake twice a day for one week before surgery and one week after surgery. Shake options may include Richocet, Nestle IMPACT Advanced Recovery Immunonutrition Shakes or Ensure Surgery Immunonutrition Shakes.

# Notes from Joint Replacement Class

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Thank you for trusting us with your care.



Northern Arizona Healthcare

Visit [NAHealth.com/jrp-spine](http://NAHealth.com/jrp-spine) to access valuable resources.