# Posterior Cervical Foraminotomy Post Op Instructions

# **Description of Procedure**

A posterior cervical foraminotomy is an open, minimally invasive, or endoscopic surgical approach to remove compression on a cervical spinal nerve. Dr. Hanson typically chooses to perform this endoscopically, with use of an endoscope. An endoscope is a specialized surgical instrument, about the diameter of a fast-food soda straw, that is equipped with a camera on the end. First, a skin incision about 7mm long, is made on the back of the neck and a series of soft tissue dilators are placed to gently divide the skin and soft tissues, allowing enough space for the endoscope. Once the endoscope is in place, Dr. Hanson visualizes the spinal anatomy and uses specialized instruments, which fit through a working channel in the endoscope, to remove bone spurs, thickened ligament, disc material, etc. that may be putting pressure on the cervical nerve root. Once the nerve is free of surrounding compression, the endoscope is removed, and the wound is closed with stitches underneath the skin. Skin glue and skin tapes are applied to the top of the incision.

# What's Normal After Surgery?

- ⇒ **Neck Pain or Headache:** Achiness or neck pain is very common after neck surgery. However, if your neck pain is severe and not well-managed with acetaminophen and prescription pain medication, please call the office. Many times, neck pain can also cause headaches, so after neck surgery, headaches are relatively common.
- Arm or Shoulder Pain, Numbness, or Tingling: Many patients experience arm or shoulder pain, numbness, or tingling prior to surgery in the neck. It is common for these symptoms to temporarily worsen following surgery. Many times, this is because of postoperative inflammation, swelling, or remnants of nerve irritation from prior to surgery. Please let us know if these symptoms gradually worsen or are not improving after a few days.
- ⇒ Sore Throat, Hoarse Voice, or Difficulty Swallowing: The tube to help you breathe during the surgery can cause a scratchy or sore throat.

# What's Not Normal After Surgery?

- ⇒ Sudden onset severe headache.
- ⇒ New onset bowel or bladder dysfunction.
- ⇒ Difficulty breathing, chest pain, or inability to swallow.
- ⇒ Unilateral extremity swelling, warmth, and/or redness.
- ⇒ Fever/chills, purulent incisional drainage, and/or expanding redness around the incision(s).

## **Appointments**

Follow up after surgery begins 1-2 days after surgery when you receive a phone call or text message from Dr. Hanson checking in on how you are doing. Approximately 7 days later our office staff will contact you to answer any questions. You will meet with Dr. Hanson approximately 2 weeks after surgery. This will be done via telehealth or in office. This information is listed on your original surgery confirmation letter that was given to you.

Once the steri-strips have fallen off the surgical site, please send a picture of your incision to 612-670-4971 via text or you may email it to <a href="mailto:scheduling@msispine.com">scheduling@msispine.com</a>.

Typically, returning to clinic for routine follow up in the first 3-4 months is usually not necessary because of all the other follow up you will receive. If you have any concerns or do need to come to clinic then contact our staff to discuss any questions you may have.

# Restrictions

After surgery, limit lifting, pushing, and pulling to 10-20 pounds as tolerated for the first 2 weeks. Passive motion of the neck is okay but, avoid cracking your neck or using your hands to stretch your neck for 6-8 weeks. After two weeks, your provider will work with you to gradually increase your lifting back to normal.

<sup>\*\*</sup>If you have any of the above, call the office & consult with the emergency department immediately.

# ne Instituté Ainnesota

# Posterior Cervical Foraminotomy Post Op Instructions

### When Can I Go Back to Work?

If you are doing a low-impact desk, paperwork, computer-type job, you can go back to work within a day or two from surgery if you are doing well. If your job requires heavy lifting or requires you to be a full duty prior to going back to work, we will modify your restrictions accordingly.

### Can I Take Narcotic Pain Medication Prior to Surgery?

You can take pain medication prior to surgery, but please use it with caution. The dose and quantity you require prior to surgery can affect your recovery period after surgery. Patients who require high amounts of narcotic pain medication prior to surgery, have a more difficult time managing their postoperative pain. Preoperative narcotic pain medication will generally not be prescribed prior to surgery. Please consult with your primary care provider if you think you require narcotic pain medication to manage your pain prior to surgery.

# **Postoperative Prescription Medications**

Three prescription medications will be prescribed to you after your surgery. These include a steroid dose pack, pain medication, and a 2-day course of antibiotics. The specific medication itself is patient-specific and will be determined by Dr. Hanson at the time of surgery.

# **Medication Refills**

For medication refills, please call the office at 612-670-4971. Kindly allow 72 hours for us to refill the requested prescription. If you require longer management of your pain, we will help to find the right solution.

### **Incision Care**

The skin tapes should be left on for 5-10 days or until they fall off, whichever if sooner. The stitches are underneath the skin and will dissolve, so you will not need them removed.

# Signs of Infection

Monitor your incisions daily to ensure they are healing properly. Common signs of infection include fever and/or chills, purulent discharge from the incision, warmth on or near the incision, expanding redness coming from the incision site, and incisional pain. Although these signs of rare, please contact our office if you experience any of these signs.

### Can I Bathe?

You can shower the day after surgery. But avoid scrubbing or soaking the incision, this includes hot tubs and swimming.

### Should I Wear a Brace?

In many cases, wearing a brace after surgery is not necessary.

### Should I Use Ice or Heat?

Ice is the best option after surgery. Use an ice pack for 20 minutes, then remove for 20 minutes & repeat. Do not put the ice pack on bare skin – it can cause frostbite! Heat can worsen inflammation and swelling after surgery.

# Will I Need Physical or Chiropractic Therapy?

Most patients do well on their own and are able to get back to their normal activities without therapy. Some patients may require therapy to aid in regaining their strength. Those who have heavy lifting requirements at work/home may need their exercises adjusted to help them return to an active life.

### When Can I drive?

You should not drive after taking prescription pain medication.

### **Delayed Healing**

Smoking, tobacco use, diabetes, poor general health, advanced age, and/or obesity can increase your risk of delayed healing. Although some of these risks are unavoidable, quitting smoking or stopping tobacco use and keeping your diabetes under control can help to reduce your risk of delayed healing.