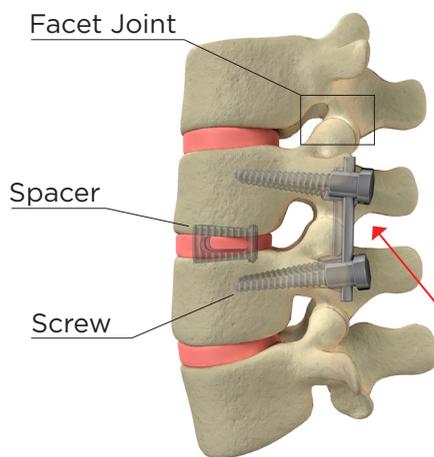
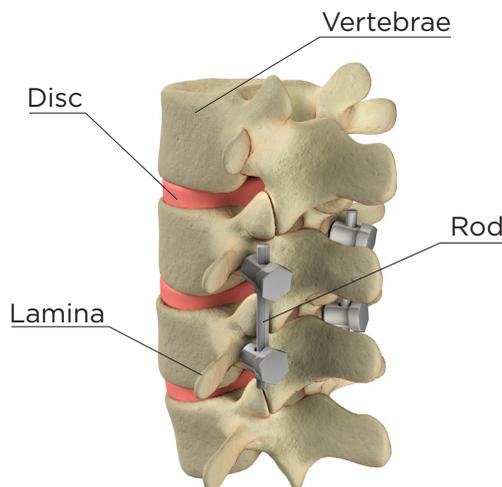


HELPING YOU UNDERSTAND LUMBAR FUSION

A **lumbar fusion** is a surgical procedure that is performed in the area of the lower back known as the lumbar region. This procedure, when performed at the BioSpine Institute, will be performed using the minimally invasive approach. With their skill and experience, they are able to perform your entire surgery through 3/4" incisions. There is no cutting of valuable back muscles, minimal blood loss, allowing for the absolute shortest recovery time. The average length of surgery is 45 minutes.



The **entire surgery** is performed through two 3/4" incisions.

Why is this type of procedure recommended?

A spinal fusion procedure is recommended as a potential option for patients suffering from spinal disorders such as degenerative disc disease and spinal stenosis combination with spinal instability such as spondylolisthesis which has not responded to previous conservative treatment. The symptoms of spinal instability may include pain, numbness and/or muscle weakness in the low back, hips, and legs. The surgeons at BioSpine will take a number of factors such as age, overall health, lifestyle, and anticipated level of activity before recommending this procedure.

How is this procedure performed?

First your surgeon will make a small 3/4" incision in the skin of your back directly over the treatment area. The muscle surrounding the spine will then be dilated to allow access to the section of the spine that is being stabilized. After the spine is accessed, the lamina (the roof of the vertebra) is removed to allow visualization of the nerve roots. The facet joints, which are directly over the nerve roots, may be trimmed to allow for less future impingement of the nerve roots. The nerve roots are moved to one side and the disc material is removed. A bone graft is then inserted into the disc space which acts as a bridge, or scaffold on which new bone can grow.

Screws and rods are inserted to stabilize the spine while the treated area heals and the fusion occurs. The ultimate goal of the procedure is to restore spinal stability.

How will I feel following surgery?

The skill of your surgeon and the efficiency of the minimally invasive approach allows patients to be discharged the same day as your surgery. The majority of our patients feel immediate improvement of some or all of their symptoms, however, other symptoms will improve more gradually. A positive attitude, reasonable expectations, and compliance with your doctor's post surgical instructions are all key factors to ensure a satisfactory outcome. Most patients are able to return to their regular activities within a few weeks.

PRE & POST PROCEDURE LUMBAR FUSION

- Our nursing staff will call you the day prior to your surgery to confirm your scheduled arrival time.
- Patient **must wear** brace at all times when sitting or standing for 3 months.
- You must take brace off at night. You may sleep on your back or side without brace. Stomach sleeping not recommended.
- As part of our protocol, home health will see you the day after you arrive home from your surgery. They will be checking on your well-being, your incision, and they can also perform ultra sound massage if needed after surgery.
- You will be given a post-op pain medication prescription, when you feel you no longer need pain medication and start to wean off, then you may switch to Extra Strength Tylenol. Use over the counter stool softner with pain medication.
- Anesthesia and pain medication are very constipating. You should increase your fluid intake and utilize MOM (milk of magnesium) for constipation. You can also try warm prune juice or stool softeners.
- Medication on an empty stomach can also cause nausea, so please take medication with food if needed.
- To reduce internal swelling and sore throat, use ice chips, popsicles or milkshakes.
- NO Advil, Aleve, Ibuprofen, Mobic, Celebrex or any anti-inflammatories unless approved by surgeon.
- NO spinal mobilization exercises, no lifting over 5 lbs., and no bending at the waist and no twisting, stooping, squatting, pushing or pulling, or prolonged sitting or standing.
- NO lower extremity exercises, NO bicycle, NO treadmill. Walking is the only safe and permissible exercise in moderation, start slowly.
- You should be changing your position frequently, staying in one position can cause stiffness which can lead to discomfort, please remember this especially when traveling. (A small walk every hour is recommended).
- NO driving until after 2-week post op visit unless released by physician and no driving while under the influence of pain medication.
- If you had a multi-level fusion you will receive a bone growth stimulator.
- After surgery you may shower with a water tight dressing. (No soaking or exercising in water i.e. pool, tub, and hot tub for 3 months.)
- Please leave incision open to air when no drainage is evident, incision should be kept dry (no ointments)
- A cane is **not preferred** if help is needed for stability, please use a walker.
- At some point you may have muscle tightness / spasms. This is common after surgery, if this becomes constant or uncomfortable, please call us.
- Notify us immediately of any signs or symptoms of infection. (ie: redness, swelling, drainage, warm to touch).
- If your legs become red, hot, or swollen or you develop chest pain with or without shortness of breath you should call 911 or report immediately to the emergency room.
- If you experience pre-operative weakness, numbness or tingling is worsening or you are experiencing new symptoms contact us, if we are closed, please report to the emergency room.
- Please remember SMOKING (nicotine) will hinder your bone healing, this could cause a non-union of your fusion or Pseudoarthrosis. Please stop all NICOTINE prior to surgery and 3-months after surgery.