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Dr. Hirsch Lumbar Discectomy Post-Operative Instructions

Wound Care

- Keep the incision dry for 5 days after surgery. During this time shower facing the water with a waterproof bandage or saran wrap covering incision
- Change bandage daily or more often if needed due to drainage. Keep bandage clean and dry.
 - o Bloody to pink/clear drainage in the first few days after surgery can be normal
- After 5 days can shower allowing water and gentle soap to run over incision
- No soaking (bathtub, pool, hot tub, ocean, etc.)
- Allow Steri-strips (butterfly strips directly on top of incision underneath bigger bandage) to fall
 off on their own
- No bandage is needed once there is no drainage from the incision
- Call the office if there is any sign of wound infection
 - Excessive redness and swelling surrounding incision, purulent drainage (pus) with a foul odor

Medications

- No anticoagulation or antiplatelet (blood thinners) for 1 week after surgery
 - Aspirin, Coumadin (warfarin), Eliquis (apixaban), Xarelto (rivaroxaban), Pradaxa (dabigatran), Plavix (clopidogrel), Brilinta (ticagrelor), Effient (prasugrel) are some of the most common. Please contact your doctor or pharmacist if you are unsure if one of your medications is in this category
- Most patients are prescribed pain medication and a muscle relaxer for postoperative pain. The
 prescription for narcotic pain medications is expected to last the patient through the immediate
 postoperative period and is generally not refilled. There are refills available on the prescribed
 muscle relaxer.

Activity

- Ok to be up and around, walking, light activity
- No chores, heavy lifting, or strenuous activity
- No driving while taking narcotics
- If sitting upright patients should get up and walk every 20-30 minutes to relieve prolonged pressure on the spine in one position which can increase risk of re-herniation