

Let's Talk About...

Spinal fusion

Posterior spinal instrumentation and fusion (PSIF), also called spinal fusion, is a procedure to put the bones of the spine (vertebrae) into the correct position. The surgeon straightens the spine by fusing some of the bones in the back together with bone grafts and implants (including special rods and screws).

Why do I need spinal fusion surgery?

You may need spinal fusion surgery if:

- You have scoliosis or kyphosis (spine curves sideways or rounds upward)
- You've injured the bones in your spine
- An infection, tumors, or injury have made your spine weak or unstable
- You had a spinal cord injury and developed musculoskeletal problems

What happens during spinal fusion surgery?

During spinal fusion, you will be sedated so you don't feel any pain. The surgeon will make an opening in the lower back and split the muscles at the back of the spine. They will then put spinal bone screws into bones that are being fused together. The surgeon will insert rods to link the screws and put bone grafts between the bones being fused.

Most patients stay in the hospital 4–5 days after spinal fusion surgery to recover.

How do I prepare for spinal fusion surgery?

To prepare for spinal fusion surgery:

- Avoid eating heavy foods 1–2 days before surgery.
- Follow instructions on when to stop eating or drinking before the surgery. If you eat or drink too soon before your surgery, it may be postponed or cancelled.

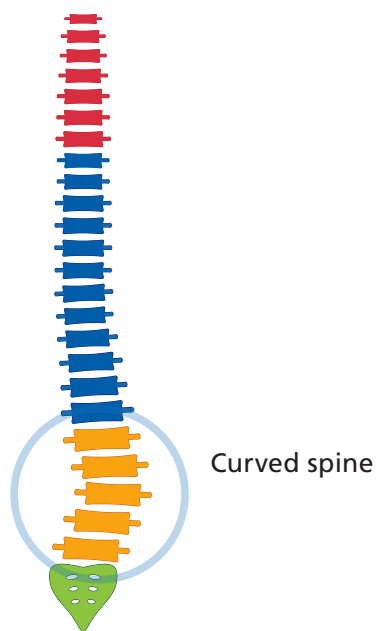


- Put together a bag with items that might help you recover at the hospital. This may include:
 - A robe
 - Button-front pajamas
 - Comfortable clothes to go home in
 - A toothbrush, toothpaste, shampoo, and body wash
 - A favorite blanket or pillow
 - Slippers
 - Music
 - Books or favorite movies

What problems might I have after spinal fusion surgery?

After spinal fusion surgery, you may have:

- Nausea and vomiting caused by not eating for a while, anesthesia (medicine the doctor used to make you sleep), or other medicine
- Dizziness when sitting up after lying down for a while



- Constipation (unable to poop) because of anesthesia, pain medicine, and less walking around

Tell your healthcare provider if you have any of these symptoms. You may be able to take medicine to help with nausea and constipation. Drinking plenty of water, walking, and putting warm heat pads on your abdomen can also help with constipation.

If you will be leaving the hospital soon and still haven't been able to poop, a nurse may give you a suppository or enema. These are medicines put directly into your bottom to help you poop.

Will I have any tubes after spinal fusion surgery?

When you wake up from surgery, you may have several tubes connected to you that you didn't have before surgery. These may include:

- **Urinary catheter (Foley):** This tube allows urine to drain from your bladder and is inserted while you are asleep in the operating room. A nurse will remove the catheter when they remove your epidural catheter.
- **Epidural catheter:** This tiny tube is inserted in your back during your surgery to put pain medicine directly into your back. A healthcare provider will remove the epidural catheter about 2 days after surgery, when you can take pain medicine by mouth.

- **IV:** An IV is a tiny, flexible tube put into a vein that will give you fluid and medicines. A nurse will remove all your IVs when you are ready to leave the hospital.
- **Hemovac:** A hemovac is a round, flat disk connected to a tube that removes any leftover blood from surgery. Your doctor will put the hemovac in your back next to your surgery site while you are sleeping to keep your bandage clean and dry. They will remove it 2–3 days after surgery.
- **Nasal cannula:** This tube sits just below your nose and gives you oxygen to breathe. You will use the cannula when you need it, but you may be able to take it off sooner by doing regular breathing exercises.

What can I eat after spinal fusion surgery?

After surgery, you'll start drinking clear liquids like apple juice and gelatin. Your diet will change slowly until you are eating regular meals. It is important to drink plenty of liquids and eat high-fiber foods like fruits and vegetables so you aren't constipated.

How will I manage my pain after spinal fusion surgery?

You will have some pain on your back from the surgery, but it will gradually decrease. Using a scale from 0–10, you and your nurse will set a goal for your after-surgery pain. Zero is no pain, and 10 is unmanageable pain.

To manage your pain, you may have:

- **IV PCA (patient controlled analgesia):** Pain medicine given through your IV with a machine that lets you control the medicine
- **IV PCAE (patient controlled analgesia epidural):** Pain medicine given through an epidural catheter with a machine that lets you control the medicine

Your nurse will tell you more about your individual pain management plan. Once you are eating and drinking enough, the pain team will change your medicines from IV or epidural medicine to pills or syrup you can take by mouth. You must take your medicine by mouth before you can go home.

What can I expect the first few days after spinal fusion surgery?

- **Positioning:** It may be hard to move by yourself just after your surgery. Your nurses will help you change position so you are as comfortable as possible. Changing position will also help your skin and lungs stay healthy while you're in the hospital.
- **Physical therapy:** You will start physical therapy about 24 hours after your surgery. The physical therapist will visit twice a day Monday-Saturday and once on Sunday. You will start sitting at the edge of your bed, and you will gradually increase activity to sitting in a chair, walking, and climbing stairs. The physical therapist will help you reach your goals before you go home and make physical therapy as comfortable as possible.
- **Breathing exercises:** After surgery, you will do breathing exercises using a small device called an incentive spirometer. This will help keep your lungs open and healthy while you are in the hospital. Your nurse will remind you to do these exercises regularly.
- **Bathing:** You can usually take a shower 4 days after surgery or when your doctor says it's okay. After you shower, pat the Steri-Strips™ (paper tape holding your incision closed) dry. They may start to fall off once you begin showering again, but this is normal. Don't get your whole body wet in a bathtub, pool, or hot tub until your incision completely heals and your doctor says it's okay.

What kind of activity can I do after spinal fusion surgery?

For 6 months after your surgery:

- Do not bend from the waist past 90 degrees.
- Do not lift anything heavier than 10 pounds.
- Do not twist excessively.

Ask your physical therapist how you can do your regular activities without bending, lifting, or twisting.



When should I see my surgeon again after spinal fusion surgery?

You should see your surgeon again about 1 month after surgery or as the surgeon tells you to.

What should I tell my dentist after spinal fusion surgery?

For the first year after surgery, you should take antibiotics if you are having a major dental procedure. Antibiotics are not needed for simple procedures like routine cleanings. Tell your dentist or oral surgeon you have a metal implant as well.

When should I call my healthcare provider?

Call your healthcare provider (or ask a parent to) if:

- Your pain suddenly gets worse
- Your incision is red, warm, more swollen, or starts to spread apart
- You have a fever higher than 101°F
- You have new muscle weakness
- You lose sensation in your legs or back
- You lose or have a change in bowel or bladder control

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