Lumbar Spinal Fusion Discharge Instructions

Patient Name: [Insert Name]

Date of Surgery: [Insert Date]

Surgeon: [Insert Surgeon Name]

1. Activity Restrictions

- **No BLT:** Do not Bend at the waist, Lift more than 5-10 pounds, or Twist your spine.
- **Walking:** Walk short distances frequently. Gradually increase your distance every day as tolerated.
- **Sitting:** Avoid sitting for more than 20-30 minutes at a time. Use a firm, supportive chair.
- **Driving:** Do not drive until cleared by your surgeon and while taking narcotic pain medication.

2. Incision Care

- Keep the incision site clean and dry.
- If you have a dressing, change it according to the specific instructions provided: [Insert specific dressing instructions].
- Do not apply lotions, creams, or ointments to the incision.
- Do not soak in bathtubs, hot tubs, or pools until the incision is completely healed and cleared by your doctor.

3. Pain Management

- Take prescribed medications exactly as directed.
- Use stool softeners as recommended, as pain medications often cause constipation.
- Apply ice packs to the incision area for 15-20 minutes several times a day to reduce swelling.

4. Bracing (If Applicable)

Wear your back brace as follows: [Insert instructions, e.g., "At all times when out of bed"]

5. When to Call the Doctor Immediately

- Fever over 101.5F (38.6C).
- Increased redness, swelling, or foul-smelling drainage from the incision.

- Sudden increase in pain that is not relieved by medication.
- New or worsening numbness, tingling, or weakness in your legs.
- Loss of bowel or bladder control.
- Shortness of breath or chest pain (Call 911).

6. Follow-up Appointment

Your follow-up appointment is scheduled for: **[Insert Date and Time]** at **[Insert Location]**.

Signed,

[Hospital/Clinic Name]
[Contact Phone Number]