

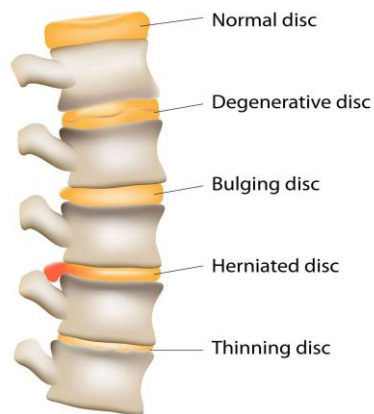


In the name of God

Shohada Educational & Treatment Hospital

Lumbar disc surgical care

DISC DEGENERATION



Patient and public education committee

- Increase the activities gradually and within tolerance. Your activity should be to the extent that you do not get tired.
- Because it takes 6 weeks for the ligaments to heal, excessive activity leads to muscle cramps near the spine.
- Bending and straightening, lifting objects, driving and climbing stairs are prohibited for you for at least two months.
- Be sure to use the toilet at home.
- You can open the medical belt during rest and immobility.
- To prevent blood clots in the legs, use special socks until walking and full activity.
- Avoid sitting as much as possible.

Attention at home

- The dressing of the operation site is changed every other day by a trained person. You should pay attention to the signs of infection (redness, itching, discharge, increased pain and fever) during the change, and inform the attending physician if it occurs.
- If there is a lot of secretions and the operation site gets wet, you should change your dressing sooner and keep the surgical site dry, and inform the doctor. Your stitches are usually removed 14 days after the operation.
- Before removing the stitches, you should use a waterproof dressing at the surgery site while taking a bath.
- One or two days after removing the stitches, you can take a normal bath without dressing.
- Get the prescription for taking medicines from the doctor before discharge. You must use the prescribed medicines regularly.

- ❖ In case of removing the drain, be sure to clamp the drain and pay attention to the amount of secretions.
- ❖ If the doctor orders you to walk, be sure to use a belt with the right size and be sure to walk with help.
- ❖ Before walking, get the right amount of fluids so that you don't have a drop in blood pressure while walking.
- ❖ To get off the bed, first fasten your belt, then turn to the side (with the help of a companion and in the form of a log with the head, trunk and legs in the same direction), then by pressing the palms on the bed, get into a lying position. When the nurse brings your feet to the bottom of the bed, after a brief rest on the edge of the bed, if you are not weak or dizzy, get off the bed and you will be walked with the help of the nurse. The first walk should not be long.
- ❖ You must use the toilet.
- ❖ Use a diet containing plenty of fluids and vegetables to prevent constipation.

- ❖ The side should be reversed so that the patient does not suffocate in case of vomiting.
- ❖ Bend and straighten the legs up to the knees.
- ❖ You can sleep on any side, side to back and turn every two hours.
- ❖ Pay attention to the dressing of the operation site, inform if severe bleeding occurs.
- ❖ After the operation, you must be able to urinate. If you do not function after a few hours after receiving the serum and have urinary retention, according to the doctor's order, a Foley catheter should be inserted for you.
- ❖ Take off the socks two or three times for half an hour and examine the body in terms of skin health, color, swelling.
- ❖ After the operation, you may feel pain and bruising in the abdomen and sides due to lying on your stomach during the surgery, which will gradually disappear.
- ❖ On the second day, you can start consuming liquids and a normal diet at the discretion of the doctor.

Admission and preparation for surgery:

With the doctor's order, be admitted to the neurosurgery department, fast for the tests, eat after sampling. Blood pressure, vital signs and heart rate are controlled by the nurse in the ward. If you need advice, you will be visited by an internal specialist, which usually takes place during the night shift. (Of course, sometimes the patient also brings the consultation sheet with him from outside).

Do not eat anything from 12:00 PM onwards. In the morning, wear anti-embolism socks and surgical gowns

Care after surgery in the ward:

- ❖ You should not eat anything for 8 to 12 hours after the operation.
- ❖ A drain (tube) is placed in the surgery area to drain the secretions of your operation area, which must be controlled in terms of functionality and you must pay attention to the clamp being open.
- ❖ After the operation, the patient may have nausea and vomiting, in which case, the patient's head must be placed on a bed