



SPINE SURGERY GUIDE BOOK



Hackensack Meridian
Hackensack University
Medical Center



The Spine Surgery Guidebook

You have chosen to have spine surgery. Before your surgery, you will have to prepare yourself and your home. After your surgery, there is also a lot you must do as you return to a healthy and active lifestyle.

This guidebook provides you with the information and tools needed to prepare for and recover from your spine surgery:

- What to expect every step of the way
- What you need to do
- How to care for your back or neck after surgery

It is divided into sections to provide information at each stage of the process. Remember, this is a guide. Your physician, physician’s assistant, nurse practitioner, nurse or therapist may add to or change recommendations.

Please bring this guidebook with you to the hospital to use as a reference tool and to make additional notes.

Hackensack University Medical Center is pleased to provide access to the resource material contained herein. This material is provided for informational use only and is not intended to be medical advice. It is important that you discuss any questions you may have with your physician or health care provider.

IMPORTANT CONTACT NUMBERS AND INFORMATION

In the case of an emergency, call 911 or visit the Hackensack University Medical Center Emergency Room or the closest hospital. Tell the emergency room physician/nurse that you recently had spine surgery.

Hackensack University Medical Center.....	551-996-2000
Pre-admission Testing	551-996-2099
Case Management	551-996-2080
Plaza Pharmacy	551-996-8744
Inpatient Dining	551-996-6325

TABLE OF CONTENTS

I. WELCOME

Hackensack University Medical Center	4-5
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II. BEFORE YOUR SURGERY

Your Spine Surgery Appointment Calendar	6
Prior to Your Surgery.....	8
What to Bring to the Hospital.....	8
Insurance Benefits.....	9
Preparing Your Home Prior to Surgery.....	10

III. YOUR SURGICAL EXPERIENCE

Admission Suite	12
Prior to Surgery	12
Pain Management.....	14
Day of Surgery.....	16
Day After Your Surgery	17

IV. YOUR DISCHARGE

Expectations of Discharge	18
Discharge Equipment for Your Home	19
Postoperative Care.....	20
Prevention of Complications.....	21
Post-surgery Precautions	22

V. RESOURCES

Advance Directives	24
Visiting Hours & Parking.....	25
Directions	26
Visitor Dining Options.....	27
Notes	43





Welcome to Hackensack University Medical Center

Thank you for choosing Hackensack University Medical Center for your spinal surgery. We have assembled a dedicated team of health care professionals who take great pride in ensuring that you receive the best quality care available.

Hackensack University Medical Center Orthopedic Institute and Neurosurgical department are committed to delivering the highest standard of care. Each year thousands of people make us the provider of choice for all of their orthopedic and neurosurgical needs. This includes joint replacement, spine treatments, sports medicine and specialized surgery.

Hackensack University Medical Center brings together a specialty-trained team of orthopedic surgeons, neuro surgeons, and clinicians who use the latest technology and advanced procedures to deliver excellent patient results.

We offer one of the most comprehensive spine programs in the region. Our highly trained spine specialists work together as a team to diagnose and treat neck and back conditions of all types. We treat many spinal problems for those that have not been helped by previous treatment. This includes the difficult-to-diagnose and complex diagnosis. Our spine specialists will find the source of your pain and develop a plan of care for you. If you require surgery, it will be using the latest surgical techniques

Latest Technology and Advanced Procedures

Hackensack University Medical Center has made a commitment to deliver proven technology and advanced procedures to the area. Our investment in facilities, technology and procedures is an important part of our commitment to providing the highest level of patient safety and care outcomes.

Specialty-Trained Team of Orthopedic Surgeons, Neurosurgeons and Clinicians

At every step of your care experience, you will be treated by a team of specialty-trained clinical experts. This expert team includes physicians, pain specialists, physician assistants, nurse practitioners, nurses, nursing assistants, case managers, and physical and occupational therapists specializing in your type of surgery.

Our team of surgeons are board-certified and fellowship-trained, specializing in spine surgery.

Nursing care is provided by our team of nurses, many of whom have specialized certification. Hackensack University Medical Center has achieved Magnet® designation, the most prestigious nursing recognition.

Clinical And Research Leadership

Hackensack University Medical Center is nationally and internationally recognized for clinical and research excellence. Our Orthopedic Institute and Neurological surgeons have been published in many prestigious medical journals including *The Spine Journal*, *Clinical Spine Surgery*, *International Journal of Spine Surgery*, *Journal of Neurosurgery Spine*, *Journal of Spinal Disorders and Techniques*, *Journal of Orthopedic Trauma*, *JBJS Reviews* and *World Neurosurgery*.

Our surgeons hold memberships in prestigious national specialty societies as well, such as the American Academy of Orthopedic Surgeons, North American Spine Society and the American Association of Neurological Surgeons.

Industry Achievements

Hackensack University Medical Center, part of Hackensack Meridian Health, has consistently received national recognition for providing high-quality and safe care:

- Ranked among America's 50 Best Hospitals in Orthopedics by *U.S. News & World Report*
- Among *Becker's Hospital Review* 100 Great Hospitals in America



II. BEFORE YOUR SURGERY

Before your surgery there are a number of things to coordinate and complete. The checklist below is designed to help you with this.

Obtain Medical and/or Specialist Clearance

Now that you are scheduled for surgery, you will receive instructions from your surgeon’s office regarding medical clearance. Medical clearance is provided by your primary care physician and/or a specialist. It is required prior to undergoing anesthesia. Medical clearance needs to be complete seven to 28 days prior to your surgical date.

Watch the Preoperative Education Video

The preoperative video provides you with the opportunity to learn about what to expect over the next few weeks along with key points to a successful recovery. The video is free and is taught by our nurse practitioner. We recommend watching this video prior to surgery. We encourage a family member or another support person to watch it with you. We fully support their involvement and assistance through this process.

Before surgery you will be contacted and sent a link to view the preoperative education video or participate in a preoperative spine education zoom class.

Topics covered during the video:

- Admission procedure
- Surgical experience
- Hospital stay
- Pain management
- Discharge planning
- Postoperative medications (such as pain medications)

Your Spine Surgery Appointment Calendar

APPOINTMENT	DATE	TIME
Medical Clearance		
Pre-admission Testing		
Preoperative Video		
Surgery		
Follow-up with Surgeon		

Obtain Pre-admission Testing at Hackensack University Medical Center

Prior to surgery, in addition to your medical clearance appointment, you will need a blood test to verify your blood type. If you smoke and will be having a spinal fusion, you will also be required to have a urine test to check your nicotine levels.

The Pre-admission Testing (PAT) department will call to schedule these tests. If your surgeon wants additional testing done at this location that will be arranged as well. This appointment takes approximately 60 minutes.

This PAT appointment is in addition to your medical clearance appointment.

Our PAT Department is located in the **Hackensack University Medical Center Medical Plaza, 20 Prospect Avenue, Suite 400**. Parking is available in the main parking garage. In addition, valet parking is available in front of the Medical Plaza building.

Your PAT Appointment includes:

- Completing necessary medical testing as requested by your surgeon
- Confirming insurance card information
- Confirming photo ID
- Confirming patient information
- Reviewing and paying of any copays or out of pocket expenses not covered by insurance

Identify a Support Person

We encourage you to choose a family member or close friend to be your coach as you go through your surgical experience. Your coach will work with you during each step of your surgical process – from preoperative preparation, to inpatient recovery and then discharge home. His/her help and support will make your experience easier.

Your coach's role is to:

- Provide motivation and encouragement
- Assist with preparing your home for safe return
- Understand discharge instructions and medications
- Recognize signs and symptoms of complications
- Encourage attendance at all follow-up physical therapy appointments

Prepare Your Body

- Eat healthy foods such as vegetables, fruits, nuts, whole grains and lean protein.
- Quit Smoking: Smoking prevents oxygen from reaching your healing bones. If you need assistance to quit smoking, please notify your primary care physician or call 551-996-2038 for the free Quit Smoking Tobacco Dependence Treatment Program.

Prior to Your Surgery: (Check with your surgeon for specific timeframes)

Stop Medications that Increase Bleeding

Stop taking all **anti-inflammatory medications** such as ibuprofen (Motrin[®], Advil[®]), naproxen (Aleve[®], Naprosyn[®]), and vitamin E. These medications may cause increased bleeding. Speak with your surgeon for instructions on what you can take for discomfort or pain. Stop taking anti-inflammatory medications **7 days** prior to surgery.

If you are taking a blood thinner such as warfarin (Coumadin[®]), clopidogrel (Plavix[®]), prasugrel (Effient[®]), ticagrelor (Brilinta[®]), apixaban (Eliquis[®]), dabigatran (Pradaxa[®]), rivaroxaban (Xarelto[®]), enoxaparin (Lovenox[®]), fondaparinux (Arixtra[®]), aspirin or any other blood thinning medication, speak with your surgeon and medical physician for instructions on stopping the medication.

Stop Taking Herbal Medicines

There are herbal medicines that can interfere with other medicines. Please stop taking any herbal medicines **7 days** before surgery.

Examples of herbal medicines include, but are not limited to: echinacea, ginkgo, ginseng, ginger, licorice, garlic, St. John's wort, ephedra, feverfew, saw palmetto, and kava-kava.

Discuss all medicines that you are taking, whether prescribed, herbal or over-the-counter, with your surgeon.

Stop Taking Weight Loss Medications

Medications that are used to treat weight loss and diabetes (i.e. GIP and GLP-1 agonists) have been shown to delay gastric emptying despite preoperative fasting. This poses a risk for pulmonary aspiration. These medications should be stopped **2 weeks** prior to your surgery date.

Examples of these weight loss medication include, but are not limited to: dulaglutide (Trulicity), exenatide extended release (Bydureon bcise), exenatide (Byetta), semaglutide (Ozempic), liraglutide (Victoza, Saxenda), lixisenatide (Adlyxin), semaglutide (Rybelsus), or tirzepatide (Mounjaro).

What to Bring to the Hospital

- Bring in your medication list (both prescribed and over-the-counter).
 - Do not bring medications from home unless told to do so by your physician.
 - Check with your physician regarding which medications to take on the day of your surgery.
- Bring loose-fitting, comfortable clothes such as sweatpants, shorts and T-shirts for therapy.
- Bring comfortable, low-heeled shoes that have an enclosed heel and toe, such as walking shoes or sneakers. No open heel/toe shoes or slippers. Non-skid or rubber-soled shoes are preferred.
- Bring personal hygiene toiletries and incontinence products. Hackensack University Medical Center will provide basic toiletries. If you would like specific products, please

bring them from home. You may want to include lip balm and deodorant.

- Bring any special equipment that you have at home, such as wrist splints, back brace, orthopedic shoes or devices, CPAP machine.
- Bring an iPad, book, magazine or hobby item to help you relax.
- Bring your cellphone and charger.

What Time to Arrive at the Hospital

Our surgical admitting suite nurse will contact you after 4:30 p.m. on the evening prior to your surgery (or Friday evening if your surgery is scheduled for Monday). You will be told what time to report to the hospital before your surgery. In general, that time is two hours prior to your scheduled surgery.

If you do not receive a phone call by 7 p.m., please call 551-996-2405.

When to Stop Eating and Drinking

Follow instructions given to you regarding when to stop eating or drinking before your surgery time. No eating after midnight the day of surgery. You may drink clear liquids up until 3 hours prior to your surgery time.

Take Medications as Instructed by your Surgeon or Primary Physician

Your physician will tell you if you are to take any of your medications on the morning of surgery. This usually includes heart, blood pressure, or thyroid medicine. It is important to swallow these medications with only a small sip of water.

Insurance Benefits

Health care benefits change constantly. Therefore, it is important for you to review your insurance benefits and/or any alternative plans for payment before you come to the hospital.

Find Out About Your Health Insurance Coverage

Before your surgery, be sure you understand the limits of both your inpatient and post-hospital medical insurance and rehabilitation coverage. No individual insurance program or combination – federal, state or private – covers all types of care and expenses. You need to know your limits and your benefits so that you can make informed decisions about your care, both while in the hospital and during recovery.

Read the written information you have at home regarding your insurance coverage. Call the number on the back of your insurance card if you have any questions. Let the insurance representative know that you will be having surgery.

Keep in mind that the person answering your questions is a service representative who will speak in general terms and will not know all the details about your surgery.

Qualifying for Benefits

There may be a difference between having a benefit and qualifying for a benefit. Qualifying for an insurance benefit is not a surgeon or primary care physician's decision. Your insurance company will determine your qualification for benefits based on its standards and policies.



Preparing Your Home Before Surgery

Most patients wish to and can safely return directly to their homes after spine surgery. You will be most comfortable and able to move around easily at home. To help make your recovery as smooth as possible, planning should begin well before your surgery. You and your family can prepare your home prior to surgery, in order to make your discharge to home easier. It is recommended that you have a safety network of friends, family or neighbors. They can provide a daily check-in, either by phone or in-person once you reach home.

Suggestions To Make Your Return Home An Easier One

Around your Home

- Ensure that hallways and rooms are free of clutter and tripping hazards.
- Remove throw rugs.
- Tuck away electrical cords.
- Organize your living areas to avoid excessive lifting, bending or reaching.
- Set up a firm chair with armrests.
- Consider installing handrails on stairs.
- Arrange care for your pets while you are in the hospital and when you first get home.

In your Kitchen

- Store heavy and frequently used objects at or above waist level (counter height).
- Consider moving items in the lower parts of the fridge/freezer to a higher shelf.
- Prepare meals ahead of time and freeze them.
- Shop for enough food to last you a few weeks.

Your Bedroom

- Consider preparing a bedroom area on the main living level for short-term use upon your return home.
- Have a lamp at your bedside.
- Keep a clear path from your bedroom to your bathroom.
- Keep a portable phone or your cellphone at your bedside.
- Move a chair into your bedroom for use for while you get dressed.

Your Bathroom

- Install skid-resistant strips or a rubber mat.
- Consider installing removable grab bars.
- Consider installing a handheld shower hose.
- Make sure shower products are within reach and not on the floor.

Your Stairways

- Make sure that stair treads are in good condition.
- Make sure that there is a sturdy hand rail.
- Make sure that stairs are brightly lit.

You will need assistance with meals, cleaning, laundry and shopping for at least the first several days and should plan for these needs. Arrange for pet care. Also, arrange to have someone drive you home from the hospital. When your health care team and surgeon feel you are ready, we will work with you and your family to achieve as smooth a discharge as possible.

NOTES



III. YOUR SURGICAL EXPERIENCE

Our team is always available to answer any of your questions. Throughout your hospitalization, please inform the staff if we can do anything to help you have the best hospital experience possible.

Admission

Entering the Hospital - 59 2nd Street, Hackensack, NJ 07601

The address for the parking garage is 50 2nd Street, Hackensack, NJ 07601. Enter the main hospital entrance and report to the Visitors Desk to obtain a visitor's pass and directions to our Surgical Admitting Suite.

Prior to Surgery

What to expect in our Surgical Admitting Suite

- You will change into a hospital gown.
- Your health history and medication history will be reviewed by our nursing staff.
- An intravenous (IV) line will be started to provide you with fluids and medications.
- Your surgeon will visit you.
- A member of our anesthesia team will visit you to discuss the anesthesia plan and treatment.

What your family member or friend can expect the day of your surgery

- Once you are brought into the operating room, our staff will guide family members and friends to the surgical lounge.
- The surgeon will come out to the surgical lounge to speak with family members or friends who are awaiting the completion of the operation.
- If your family member or friend will not be waiting at Hackensack University Medical Center, please provide the nursing staff with the name and phone number of the person whom your surgeon should call at the completion of the operation.
- Family members and friends should take care of themselves while you are having surgery. They should be sure to drink fluids and get something to eat (see the RESOURCE section for Visitor Dining Options at Hackensack University Medical Center).

What to expect in the Operating Room

- Anesthesia will be administered.
 - Your anesthesiologist is responsible for your comfort and well-being during and immediately after your surgical procedure. In the operating room, the anesthesiologist will manage vital functions, including heart rate and rhythm, blood pressure, body temperature and breathing. The anesthesiologist is also responsible for fluid and blood replacement when necessary.
- A Foley catheter may be placed in your bladder.
- Your back will be cleansed with anti-microbial solution.
- You will undergo your surgery.

Your surgeon will speak with your family members immediately following surgery either in the waiting area or via telephone.

What to expect in the Post-anesthesia Care Unit (PACU)/recovery room

You will be in the PACU for two to three hours until vital signs are stable for a safe recovery. It is possible you will need to stay longer for further monitoring.

- You may feel groggy.
- The nurse will ask you to pump your feet up and down to make sure you have feeling in your legs and feet and to help with circulation.

You will begin your postoperative pain management regimen.

Visiting hours are limited here. Our patient care representative in the surgical lounge will be available for status updates to your family or friends.

Once you are fully awake and stabilized, you will move to a room on one of our Nursing Units.



Pain Management

The staff at the Hackensack University Medical Center is concerned with managing your pain after surgery. Pain that is poorly controlled can interfere with recovery, sleep, appetite, activity, relationships and your emotional outlook.

Pain is to be expected following spine surgery. Your physicians, nurses and therapists have developed a pain management plan for you. The pain management approach uses medications and treatments to help in your recovery. Together, we will be able to control the pain enough for you to participate in your recovery.

Do not let your pain get out of control. As pain becomes more severe, it is harder to treat. Ask for assistance from your nurse if you feel your pain level is increasing.

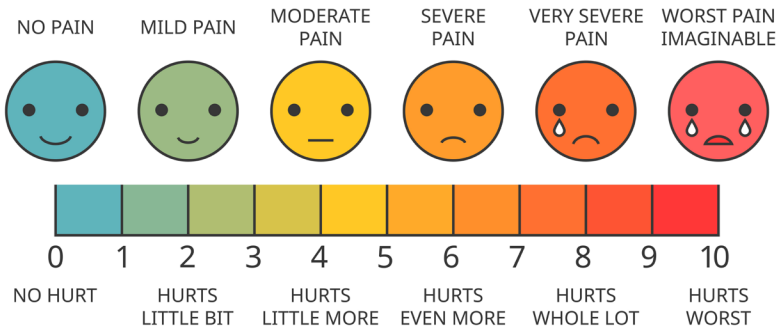
Ways for You to Help Us Manage Your Pain

- You can give us a rating on a 0-10 pain scale. A rating of 10 reflects the worst pain you could ever imagine, a rating of 5 means you feel a moderate amount of pain and a 0 rating reflects no pain.
- Your therapists and nurses will ask you to rate your pain after activity, therapy and at rest.
- When you are able, describe what type of pain you are having such as throbbing, shooting, aching, burning, or pressure. This will assist the medical staff in getting you the right type of pain control.

Pain Scales and Faces

The Hackensack University Medical Center nursing team will give you more specific information on how to use these scales and identify a positive goal for your pain control.

PAIN MEASUREMENT SCALE



Things to Keep in Mind

- It is easier to treat pain when it is mild or moderate rather than waiting until it is severe. Take your pain medications on a regular schedule to prevent severe pain.
- Our team will work with you to control your pain at a level that allows you to rest and participate in your physical therapy for recovery.
- Pain will gradually diminish or decrease in the days after your surgery. You should expect to have good days and bad days with regard to your pain and your ability to perform activities.

Studies have shown that when pain medications are used appropriately to treat surgical pain, addiction to the medication occurs in only a small number of patients. Please let us know if you have a history of addiction or intolerance to pain medications.

Medications Used to Treat Pain

There are many forms and types of medications used to treat pain. You may be on a combination of pain medications with some taken orally (by mouth) and some through your intravenous (IV) line.

Some common side effects from the pain medication include nausea and itching. These side effects will improve after taking the medication for a period of time.

The side effect of constipation may be felt during the time you are taking pain medication. This will be controlled with our bowel regimen. Pain medication can cause sedation and confusion. If you experience these side effects or any others that concern you, tell your health care professional right away.

Additional Treatments for Managing Pain

- Anti-inflammatory medications
- Physical/occupational therapy
- Deep breathing and guided imagery

What to Expect on the Nursing Unit

Because we want you to receive excellent care, our nursing staff is going to round every hour from 6 a.m. - 10 p.m. and every two hours from 10 p.m. - 6 a.m. We will not wake you if you are sleeping, unless your physician has asked us to do so. During this time we will check on your pain, comfort, and ask if you need to use the bathroom. We will also make sure your personal items are within reach.



Day of Surgery

Nursing Staff Will:

- Closely watch your vital signs (blood pressure, pulse, breathing and temperature).
- Check your feet and legs for circulation, motion, and sensation.
- Check your surgical dressing.
- Frequently monitor your pain level by asking you to rate your pain on a scale of 0 – 10 (10 being the worst).
- Ask you to cough and breathe deeply every hour while awake to keep your lungs clear. The respiratory therapist and nurses will teach you how to use of the incentive spirometer. This device will help you with deep breathing.
- If your vital signs are stable, the nursing staff may get you out of bed to a recliner chair.

Medication and Pain

- Nursing staff will give you all of your medications.
- **Notify the nurse when experiencing pain and/or feeling nauseous. Do not wait.**
- Pain medication will be given based upon your need and physician's orders.
- Your intravenous (IV) line is used to receive fluids and antibiotics.
- Some of the medications you were taking at home may be restarted.

Activity

- Do not attempt to get out of bed without help. Our staff is specially trained to help you. PLEASE CALL our staff for help.
- Depending on the time your surgery ends, a physical therapist or one of our team members will assist you in ambulation.
- Early physical therapy and movement is as important as the operation itself for regaining function. The success of your rehabilitation depends on your participation.

Nutrition

- You will start with clear liquids, progressing slowly to food.

You May Have the Following after Surgery

- A Foley catheter in your bladder.
- A drain that the surgeon places near your incision to collect blood.
- Oxygen as ordered may be used overnight.
- A breathing exerciser (incentive spirometer) is used every hour while awake.
- Sequential compression devices (SCD) will be on your legs to help prevent blood clots (must always be used while in bed).
- Cold therapy/ice will be applied to help prevent swelling and help reduce your pain.

Day After Surgery

Nursing Staff Will:

- Remove your Foley catheter if you have one. You will then walk to the bathroom with assistance.
- Disconnect you from your intravenous (IV) line.
- Check your surgical dressing and possibly change your dressing.
- Start teaching you about discharge and medication instructions.
- Discuss different ways to relieve your pain.

A Provider Will:

- Assess your drain if you have one and remove when appropriate.
- Review plan of care.

You Should

- Begin dressing and bathing activities with staff assistance.
- Dress in comfortable loose-fitting street clothes, such as shorts and sneakers.
- Be out of bed to recliner most of the day.
- Perform ankle pumps every hour while awake.
- Use the bathroom with help.
- Continue use of sequential compression devices, which help prevent blood clots (must always use while in bed).
- Be visited by a discharge planner to have an assessment done of your discharge needs/plans.

Activity

- Physical therapy
 - Learn how to get in and out of bed.
 - Learn how to log roll to avoid twisting (turn with shoulders and hips together).
 - Learn to walk with a walker, or a cane , if applicable.
 - Learn how to walk the stairs.
 - Begin your exercise program.
- Identify equipment and home safety needs with an occupational therapist.
- Work on activities of daily living (ADLs) with an occupational therapist.
- Learn how to regain independence with your activities of daily living.
- The occupational therapist will teach you how to complete your activities, using a grabber and a shoehorn.
- A physical therapist will teach you your home exercise program. He/she will continue to work with you on improving your walking distance and stair climbing.
- Activities of daily living include: Dressing, Bathing, Homemaking tasks, Training in the use of durable medical equipment such as walker, crutches or cane.

Medication and Pain

- Pain medication will be given based on individual needs.
- You may be started on laxatives to help promote a bowel movement because pain medication and limited movement can be constipating.



IV. YOUR DISCHARGE

Your Discharge Day (11:00 AM if criteria is met)

- Hospital stay may be one to three days. Your stay in the hospital depends on the type of spine surgery and how your overall recovery is going. We will discuss your discharge plans with you as your recovery begins.
- You will continue to progress by walking further, a little faster and climbing the stairs to prepare for your discharge from the hospital.
- Before you leave the hospital, our team will review your discharge instructions concerning medications and physical therapy. Be sure to ask questions if you do not understand any of the instructions.

Expectation of Discharge

Going Directly Home

Most of our patients are able to be discharged directly to their own homes. You will need to arrange for someone to drive you home. Your physical therapy will continue to focus on improving your motion, strength and mobility. In addition, the physical therapist will assist you with adjusting to your home environment and continuing to walk on stairs. Your physical therapist will provide you with home exercises as well.

Going to a Rehab Facility

The decision to go to a rehab facility instead of to your home will be made collectively by your surgeon, you, the nurse practitioner or physician assistant, the physical therapist and your insurance company. Please remember that your insurance company must approve rehab stays. A stay in a rehab facility must be done within your insurance guidelines.

Although you may desire to go to rehab when you are discharged, your insurance company will monitor your progress while you are in the hospital. Upon evaluation of your progress, you will either meet the criteria to benefit from rehab, or your insurance company may recommend that you return home with other care arrangements. Therefore, it is important for you to make alternative plans before surgery for care at home. Keep in mind that insurance companies do not become involved in social issues, such as lack of a caregiver, pets, etc. These are issues you will have to address before admission.

The hospital can help you arrange for paid transportation, if requested. Transportation is not covered by insurance.

On Discharge Day

- Patients should make arrangements to be ready to leave the hospital by **11 a.m. on the day of discharge**.
- Have family take home excess belongings prior to discharge day if possible.

Discharge Equipment* (Optional)

- Long-handled reacher
- Long-handled shoe horn
- Sock aid
- Dressing stick

These tools will help you dress and pick up items. You may also decide to buy these items at a local surgical supply store or via the internet.

Optional items you may want to purchase prior to surgery for use at home:

- Long-handled bath sponge
- Non-slip bath mat
- Hand-held shower hose
- Grab bars (for bathtub) - removable grab bars are available
- Tub bench/shower seat

**These items are not covered by insurance.*



Postoperative Care

Caring for yourself at home

When you go home there are a variety of things you need to know for your safety, speedy recovery and comfort. You will receive specific instructions from your surgeon before you leave the hospital.

Caring for your Incision

- Do not put any ointments, creams or powder on your incision.
- Follow the directions given to you about your wound care. Depending on your surgery, your discharge and wound care instructions may vary.
- Notify your surgeon if there is any drainage, redness, an increase in pain, odor or heat around the incision or a fever greater than 101.5 degrees Fahrenheit.

Control your Discomfort

- Take your pain medicine only on “as needed” basis at least 30 minutes before physical therapy. Hospital staff will instruct you on how to safely take this medication.
- You may find that you need less pain medication as you recover.

Body Changes

- Your appetite may be poor. Drink plenty of fluids to keep from getting dehydrated. Your desire for solid food will return.
- You may have difficulty sleeping. This is normal.
- Your energy level will be decreased for the first month or so.
- Pain medication that contains narcotics can cause constipation. Use stool softener (Colace) or laxatives (Miralax, Dulcolax, Senna) if necessary. Please purchase over-the-counter prior to surgery.

Call Your Surgeon if you:

- Experience any severe calf pain, redness or swelling.
- Have a fever (temperature above 101.5 degrees Fahrenheit) for longer than 24 hours.
- Experience increasing redness, swelling, warmth, unpleasant odor or drainage coming from the wound.

Call 911 if you:

- Have sudden shortness of breath or chest pain.

Prevention of Complications

Blood Clots in Legs (Deep Vein Thrombosis)

Inactivity after surgery may cause blood flow to slow and pool in the veins in your legs, creating a blood clot. Your surgeon will prescribe blood thinning medication for you after surgery to prevent this.

Signs of Blood Clots in Legs

- Swelling in the thigh, calf or ankle that does not go away by elevating your leg.
- Pain, redness, and/or tenderness in calf.

Prevention of Blood Clots

- Do foot and ankle pump exercises.
- Be active and walk. Do not sit for more than 30 minutes at a time while awake or without getting up to change position.

Pulmonary Embolism

Rarely, a blood clot can break away from the wall of the vein and travel to the lungs. This is called a Pulmonary Embolism.

This is an **EMERGENCY! CALL 911** if you notice any of these symptoms:

- Difficulty breathing or rapid breathing at rest and when not active.
- Shortness of breath.
- Sudden chest pain.
- Unusual or significantly worsening confusion.

Returning to driving

- As per your surgeon's instruction.

Follow-up care with your surgeon

- Follow-up appointments with your surgeon are important to monitor your spine surgery recovery.
- Please make sure to schedule your follow up appointment in one to two weeks, as your surgeon advises.



Post-surgery Precautions

Do

- Walk often.
- Set up a firm chair with armrests.
- Set up a table beside your chair for frequently-used items.

Using the toilet

Prior to your surgery, set up your toilet paper at home where you will not have to twist to reach it.

Showering/Bathing

- Shower as instructed by surgeon.
- Do not use a towel rack or toilet paper holder to assist you in standing or sitting. Use only properly installed grab bars.
- Use a long handled bath sponge if needed to reach your legs.

Getting into and out of bed

- To move from lying on your back to sitting:
 - Bend knees up and roll to your side.
 - Slide legs off edge of bed with knees bent.
 - Push up with your arms as you lower your legs off the bed and sit up.

To move from sitting to lying down:

- Begin sitting on bed.
- Lower yourself down on to your side, using your arms to help guide and control the movement.
- Once you are lying on your side, you may slide your legs up on to the bed.
- To roll over on your back, keep knees bent and roll onto back.

Spinal precautions/lifting restrictions

- No bending, lifting, twisting at the spine.
- No sitting in the upright position for longer than 30 minutes.
- No lifting more than five to 10 pounds.

Reaching

- Do not bend down to reach items on the floor or in low storage areas.
- Use the self-help reacher device or ask for help.
- Avoid twisting or reaching across your body to pick up items. Turn and face the items as you reach for them.

Getting into and out of a car

- Move the front passenger seat all the way back to allow the most leg room.
- Turn frontward, leaning back as you lift your left leg and then your right leg into the car.

Resuming sexual relations

- Resuming sexual relations after surgery may take several weeks. You must allow enough time for the incision and the muscles around the spine to heal.
- You may discuss when to resume sexual activity with your surgeon at your follow-up visit. You may also discuss the safe positions for sex without causing any injury.



V. RESOURCES

Advance Directives

Put Your Health Care Decisions in Writing

The State of New Jersey, Hackensack University Medical Center, and the professionals who provide your care consider health care planning very important. For that reason, every patient is asked about and encouraged to prepare an advance directive. This allows a patient to place their wishes and individual considerations at the forefront of their care so the medical team can respect and uphold those wishes.

Under New Jersey Law, There Are Three Kinds of Advance Directives

- **Proxy Directive:** appoints a person (health care representative) and an alternate representative to make health care decisions when you are not able to do so. This is sometimes called a health care proxy or a health care power of attorney;
- **Instruction Directive:** states your treatment wishes and/or instructions. This is sometimes called a living will.
- **Combined Directive:** appoints a health care representative and states your treatment instructions.

An advance directive goes into effect when you are temporarily or permanently unable to make health care decisions. If and/or when you regain decision-making ability, you will resume making your own health care decisions. In the absence of an advance directive, your next-of-kin has the legal authority to make health care decisions for you (spouse, oldest adult child, etc.).

There is no specific form that must be followed in New Jersey and you do not need a lawyer to prepare an advance directive. In fact, the document is considered legal if it is witnessed by two adults (not named as a health care representative or alternate) or notarized. At Hackensack University Medical Center, health care professionals (with the exception of your attending physician) can serve as witnesses.

The Department of Patient Experience can provide notary services at no charge to you.

For more information or to request a form or assistance with completing an advance directive, please call our Department of Patient Experience at 551-996-2010, Monday - Friday, 8:30 a.m. – 5 p.m.

Hackensack University Medical Center Visiting Hours

Our visitor policy is subject to change in accordance to the patient's condition and/or emergency situations declared by the Medical Center.

All visitors must obtain passes from the Lobby Information Desk. While on the medical center campus, we request that all passes be worn and visible at all times. At the information desk, a way-finding map is also provided, as well as instructions to the designated location.

Visitor Hours: 24 hours a day, 7 days a week.

Quiet Time Hours: 9 p.m. - 8 a.m.

Quiet Time allows our patients to relax and sleep in a healing environment. During Quiet Time we ask for your cooperation in maintaining a quiet environment so all our patients can rest. We ask you to speak in a soft tone, silence cell phones, and reduce the volume of the TV.

Visiting Guidelines:

- For the safety and care of all patients, visiting is limited to two (2) visitors per patient at one time.
- Health Screenings, if required, may be conducted.
- Children under 12 years old are not permitted.
- Children must not be left unattended anywhere in the medical center.

Rooming-In Guidelines:

Sleeping in private patient rooms overnight is not encouraged as all our patients require rest and care during their stay. Please plan accordingly.

We support a quiet healing environment and respect the privacy of our patients.

Visitor Parking

Parking for surgical patients is located at **50 Second Street** for a nominal fee. If you require an all day pass where you leave the hospital and return, this may purchase pay kiosk on the 1st and 5th floor located by the elevator in the parking garage.

Visitor parking also provides Valet Services at the Medical Plaza Building for a nominal fee.



Directions

Hackensack University Medical Center
59 Second Street, Hackensack, NJ 07601
551-996-2000

While the Helena Theurer Pavilion's address is technically 30 Prospect Avenue, the building is located on Second Street between Atlantic Street and Essex Street. Therefore, patients and visitors should enter the campus via our Second Street entrance, not the main Prospect Avenue entrance.

For GPS purposes, patients and visitors should use the address of 50 Second Street, Hackensack, NJ 07601.

The parking garage connects to the Helena Theurer Pavilion's main lobby on the building's first floor where you will find our Welcome Desk.

Visitors and guests may use the ground floor lobby circular driveway to drop off patients or visitors.

Public Transportation

Hackensack University Medical Center can be reached by both bus and rail, with service from areas within Bergen County, as well as New York City. Please visit njtransit.com for both bus and rail service.

From George Washington Bridge and East

Follow Route 80 West, staying in local lanes, to Exit 64B. Turn right at light onto Polifly Road. Travel north on Polifly Road. At the second light, turn left onto Essex Street. At the first light, turn right onto Prospect Avenue. Hackensack University Medical Center is on the right.

From Paterson Area and West

Follow Route 80 East, staying in local lanes to Exit 63B for Rochelle Park and Paramus. (Exit ramp sign says Exit 63) Turn left off exit ramp and turn right at light onto Essex Street. Follow Hospital signs. At sixth light, turn left onto Prospect Avenue. Hackensack University Medical Center is on the right.

From Southern New Jersey on the NJ Turnpike

Follow Route 95-N.J. Turnpike North to the junction of Route 80. Take 80 West and stay in lanes for "Local Exits" to exit 64B for Hasbrouck Heights and Newark. Turn right at the light onto Polifly Road. Travel north on Polifly Road. At the second light, turn left onto Essex Street. At the first light, turn right onto Prospect Avenue. Hackensack University Medical Center is on the right.

From Northern New Jersey on Route 17

Follow Route 17 South to the Essex Street exit. Turn left onto Essex Street. At the fourth light, turn left onto Prospect Avenue. Hackensack University Medical Center is on the right.

From Southern New Jersey on Route 17

Follow Route 17 North to the Polifly Road turnoff. Go under the Route 80 overpass and turn left at the second light onto Essex Street. Turn right at the first light onto Prospect Avenue. Hackensack University Medical Center is on the right.

From the Lincoln Tunnel

Take Route 3 West to Route 17 North to the Essex Street exit. Turn right onto Essex Street. At the fourth light, turn left onto Prospect Avenue. Hackensack University Medical Center is on the right.

From the Garden State Parkway

From the Garden State Parkway, either north or south, take Route 80 East. Follow directions above for Paterson and West.

Parking

Parking is available in the Second Street Garage located directly across from the Helena Theurer Pavilion. There is a daily fee of \$8 or an all day multiple entry pass up until midnight for \$10 (please keep original ticket for each entry/exit). Please be sure to pull a parking ticket at the parking garage entry gate and validate the ticket at one of the pay stations. The pay stations are located as you enter the garage to the right, as you exit the garage to the right and outside the 5th floor entrance to the Helena Theurer Pavilion.

Visitor Dining Options

Lobby Coffee Shop: Monday – Friday 6 a.m. – 7:30 p.m., Saturday, Sunday, Holidays 7 a.m. - 7 p.m. Monday – Friday: Hot breakfast & lunch specials available.

Located off the main entrance on the first floor of the Link building, it offers light bistro fare - from gourmet coffees and teas, to salads, sandwiches, snacks and desserts.

The Second Street Café: Monday – Friday. 6:30 a.m. – 7:30 p.m. Saturday, Sunday, Holidays 7 – 10 a.m., 11 a.m. – 2 p.m. Daily 1 – 3 a.m.

Located on the ground floor of the Pavilion building, it offers a wide array of foods.

The Aquarium Café: Monday – Friday 6:30 a.m. – 6:30 p.m. Saturday, Sunday, Holidays 6 a.m. – 2 p.m. Monday – Friday: Breakfast Grill: 7 a.m. – 10 a.m.

Lunch Pizza/Pasta, Wok, Grill Stations open 11 a.m. – 2 p.m.

Located on the ground floor of the Donna A. Sanzari Women's Hospital/ Joseph M. Sanzari Children's Hospital, it offers light bistro fare - from gourmet coffees and teas to salads, sandwiches, snacks and desserts. Kosher and vegan food choices available.

Hours may vary and are subject to change.



Hackensack University Medical Center

59 Second Street

Hackensack, NJ 07607

551-996-2000

HackensackMeridianHealth.org

