

An introduction to

Spinal surgery guide for caregivers

A caregiver has an important role in assisting in the recovery of a spinal surgery patient. The purpose of this guide is to help caregivers better understand the spine and what their loved ones are experiencing, as well as provide tips in preparing for surgery and the care required afterward.

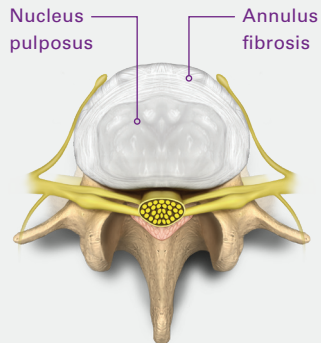
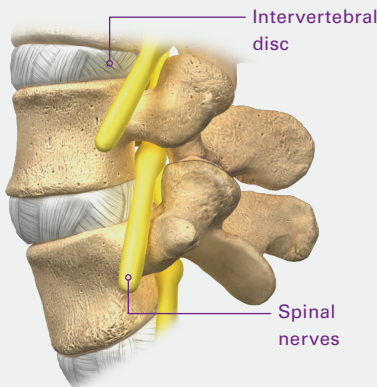
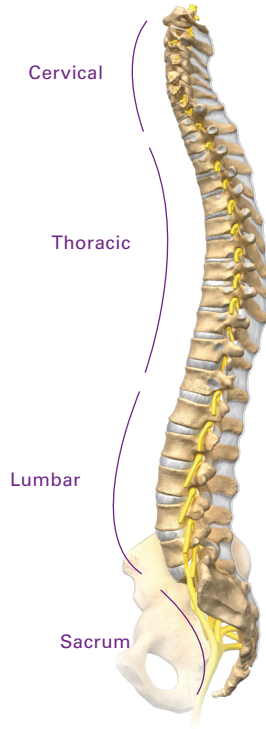
This brochure is not meant to replace any personal conversations that the caregiver and/or the patient might wish to have with the physician or healthcare team. Not all information here will apply to the patient's individual treatment or its outcome.



About the spine

The human spine is made up of 24 bones or vertebrae in the cervical (neck) spine, the thoracic (chest) spine, and the lumbar (lower back) spine, plus the sacral bones.

Vertebrae are connected by several joints, which allow you to bend, twist and carry loads. The main joint between two vertebrae is called an intervertebral disc. The disc is made of two parts, a tough and fibrous outer layer (annulus fibrosis) and a soft, gelatinous center (nucleus pulposus). These two parts work in conjunction to allow the spine to move, and also provide shock absorption.

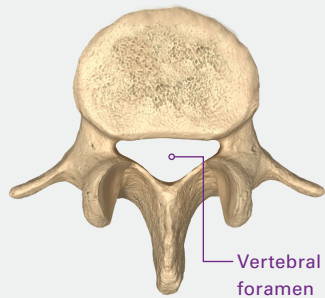
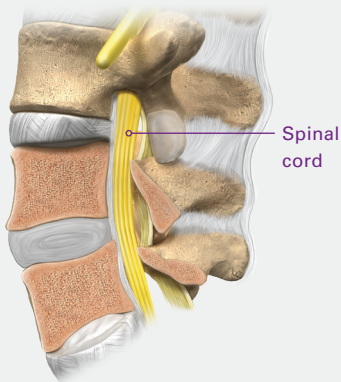
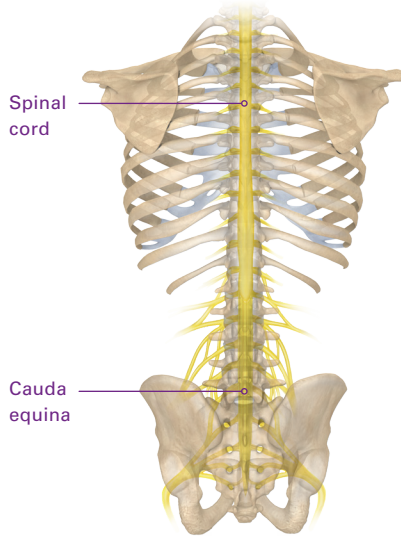


About the spinal cord and cauda equina

Each vertebra has an opening (vertebral foramen) through which a tubular nervous structure travels. Beginning at the base of the brain to the upper lumbar spine, this structure is called the spinal cord.

Below the spinal cord, in the lumbar spine, the nerves that exit the spinal cord continue to travel through the vertebral foramen as a bundle known as the cauda equina.

At each level of the spine, spinal nerves exit the bony spine then extend throughout the body.



What can cause back pain?

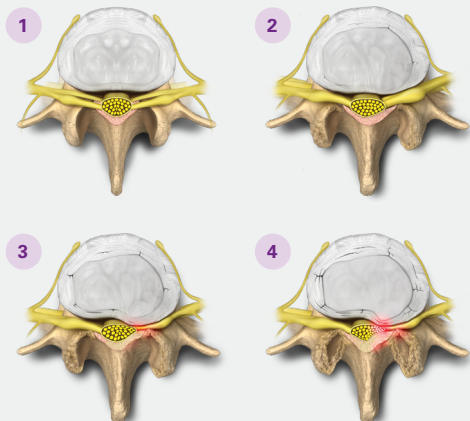
Back pain is typically a result of an injury or trauma, a disorder such as degenerative disc disease, a tumor, osteoporosis or arthritis.

This may cause:

- Back, muscle or ligament strain
- Spinal instability or scoliosis
- Bulging or herniated discs
- Spinal stenosis and bone spurs
- Spinal nerve impingement

The root cause of back pain may vary from complications during daily activities, a hereditary or congenital abnormality, or anatomical changes that take place during the natural aging process.

One possible process of degeneration from healthy to degenerated disc with nerve impingement



Normal disc

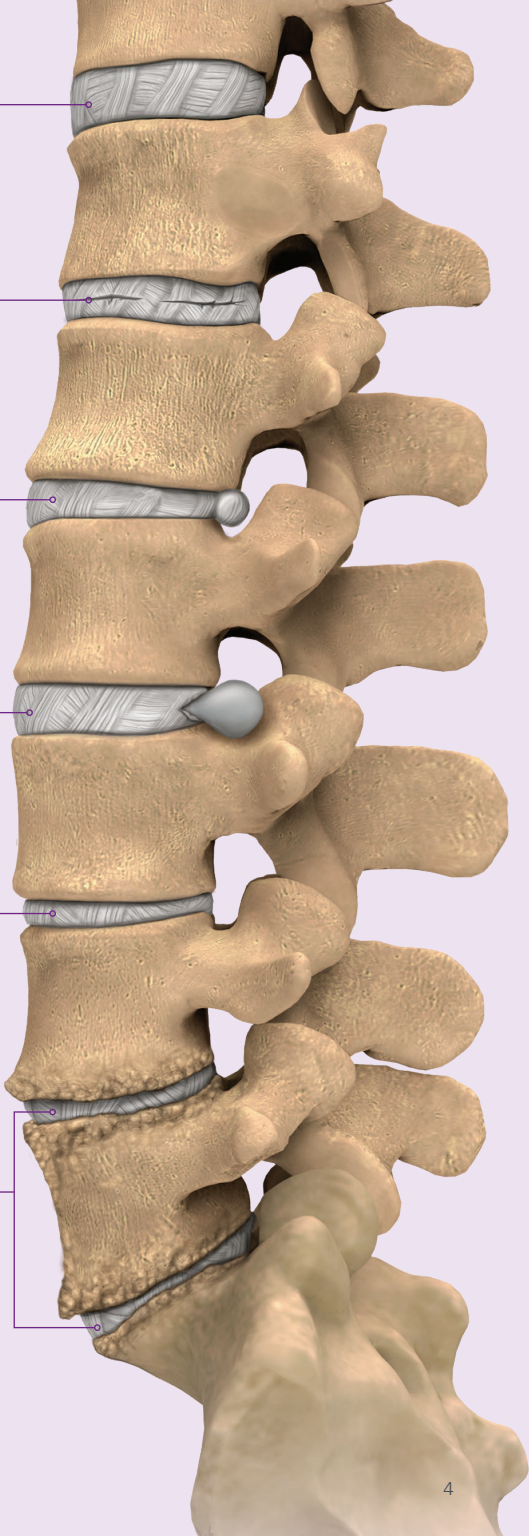
Degenerated disc

Bulging disc

Herniated disc

Thinning disc

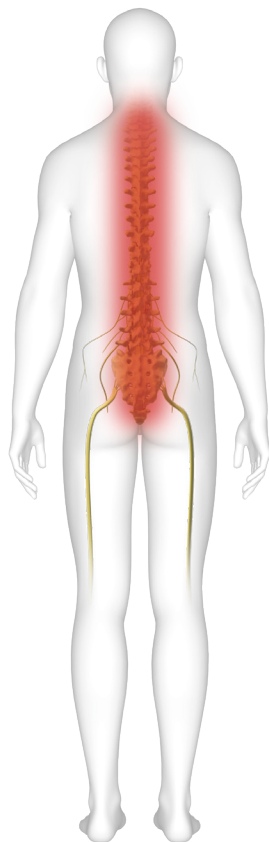
Disc degeneration with osteophyte formation



About back pain

Many patients with back pain do not require surgery and find pain relief from conservative methods such as physical therapy and strengthening exercises, corticosteroid injections, anti-inflammatory medications, rest and a restriction of physical activity.

If these methods prove ineffective and back and limb pain continues to diminish the patient's quality of life, the physician may recommend spinal surgery.



Prepare for the surgeon consultation

If you are able to attend the surgeon consultation, your presence may provide comfort to your loved one. It is helpful to prepare questions with him/her prior to the appointment. Bring a notebook to record the doctor's responses. This simple process can help alleviate a patient's potential stress to remember details during what can be an emotional experience.

Potential questions to consider asking the surgeon may include:

- What is the name of the medical procedure?
- Can you please explain the procedure in detail, including where the incision will be located?
- How long will the surgery take?
- What are the benefits of the procedure?
- What are the risks and potential complications?
- Are there any long-term consequences?
- How long will the patient be in the hospital post surgery?
- Are there any medications or vitamins the patient should discontinue using prior to surgery?
- What level of pain may the patient expect following the operation? How will it be managed? How long does it typically last?
- Will any postoperative medication cause serious constipation and how can that be treated?
- Will the patient need any durable medical equipment following surgery for the home and how should that be used? (i.e., walker, cane, crutches, toilet riser, shower chair, lift chair, etc.)
- Should the patient follow a specific diet before or after surgery?
- How soon can the patient shower after surgery?
- What is the proper way to care for the incision(s)?
- What type of scarring might the patient expect?
- If a back brace is to be worn, at what times and for how long?
- What can he/she expect as far as physical therapy?
- In what position should the patient sleep?
- What are the lifting or other exercise restrictions and how long will they likely be in place?
- What is the expected recovery time?
- When can the patient return to work?
- When can the patient drive again?

What to expect before surgery

Prepare the home

Following surgery, patients should return home to a safe environment that minimizes the risk of tripping and excessive movement. Consider assisting your loved one in preparing his/her home prior to surgery. Here are some ways to prepare:

- Clear walkways by removing rugs and cords, and rearranging furniture if necessary
- Move commonly used items to easy-to-reach places (waist level)
- Prepare and freeze meals for at least the first week post operation
- Consider preparing a room or location on the first floor for the patient to sleep
- Secure stair railings
- Have slip-on shoes with non-skid soles
- Place skid-resistant strips in the bathtub
- Have large beach towels available for after the shower
- Have loose and comfortable clothing easily accessible
- Prepare any medical equipment recommended by the surgeon so that it is ready-to-use

Manage offers of help

Prior to the procedure, it is normal for patients to feel anxious and overwhelmed. Discuss your loved one's concerns and reassure him/her of your support. One practical way to ease worry is to manage offers of help prior to surgery. Preemptively create a checklist of tasks that will need to be completed while the patient is recovering and assign items to those who have offered assistance. This can provide patients with peace of mind that chores will be covered and you will not be overburdened.

The checklist can include tasks like:

- Washing the dishes
- Doing a load of laundry
- Cleaning the bathroom
- Changing the sheets
- Mowing the lawn
- Grocery shopping
- Meal delivery

Pack the hospital bag

Another way you can help your loved one prior to the procedure is by assisting them in packing a bag for the hospital. Many items will be provided for the patient, but he/she can bring toiletries and comforts from home.

Personal items

- Toothbrush and toothpaste
- Hairbrush/comb
- Deodorant
- Lip balm
- Robe
- Socks
- Eyeglasses
- Loose-fitting clothes
- Comfortable-flat shoes
- Phone charger

Paperwork

- Copy of driver's license
- Copy of insurance card
- Copy of medication list
- Copy of family phone numbers
- Copy of advance directive

What to expect after surgery

Postoperative assistance

If your loved one is required to stay in the hospital following the operation, this can be a difficult time for him/her. Following the procedure, the patient is adjusting to the pain and medication, becoming familiar with new nurses each shift, and most likely finding it difficult to get quality rest. Things like eating and using the restroom can be a large task. Your support and patience will go a long way.

Before leaving the hospital, discuss the following with the surgeon and or medical staff:

- Incision care
- Home rehabilitation
- Pain medication—If the patient has been on narcotics for back pain prior to the procedure, notify the staff as this could be important for pain management moving forward.

Write this information down for you and your loved one to reference later as it is likely you will need to assist him/her in these areas. Expect to help your loved one for at least one to two weeks post-surgery and gently encourage him/her to accept your assistance. It is important the patient is aware of his/her limitations and follows the surgeon's recovery instructions.

Ask the surgeon if there are any symptoms the patient may experience that would warrant contacting him/her upon the patient's return home.

These symptoms may include, but are not limited to:

- Fever over 101.5° F
- A large amount of drainage from the incision
- Abnormal incision irritation, such as swelling or warmth
- Swelling in the legs that does not decrease with elevation
- Additional symptoms per the surgeon

Confirm the best way to reach the surgeon should these arise.

Surgeon's name_____

Surgeon's emergency contact number_____

Notes

Resources

For more information about neck and back pain please visit:

nuvasive.com

If you would like to learn more about patient support and education for chronic back and leg pain sufferers and their loved ones, please visit: **thebetterwayback.org**

If you have any questions about neck and back pain or spine surgery in general, please call or see your physician, who is the only one qualified to diagnose and treat your spinal condition. This patient information brochure is not a replacement for professional medical advice.

About **The Better Way Back**[®]

The Better Way Back is a nationwide patient support program created by NuVasive[®], a leader in developing minimally invasive, procedurally-integrated spine solutions. The Better Way Back is a free community built on the power of empathy, and is dedicated to providing hope, support and information to individuals suffering from chronic back, leg or neck pain.

Through its Patient Ambassador Program, The Better Way Back pairs patients considering spine surgery with patients who have previously undergone a spine procedure. Ambassadors volunteer their time to discuss their experiences in order to provide additional, first-hand perspectives.

To learn more about The Better Way Back, please



call **1-800-745-7099**



visit **thebetterwayback.org**



text "TBWB" to **858-360-8292**

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