

Lumbar and Cervical Discectomy/Laminectomy/Microdiscectomy (Back Surgery)

The basic differences among these procedures are the amount of disc removed and how your surgeon reaches the disc. Discectomy is the surgical removal of all or a portion of the disc that is putting pressure on a nerve. Laminectomy is the removal of the lamina, or outer bony wall of the spinal canal.

Diet

- After surgery you will be offered clear liquids. Gradually advance to your usual diet.

Medications

- You will receive pain medications to keep you comfortable. Resume your medication as taken prior to surgery unless otherwise instructed before discharge.

Activities and restrictions

- A nurse will help you turn in bed using proper technique until you are able to do this yourself.
- Avoid prolonged sitting or standing.
- No heavy lifting. You will be instructed about weight limitations.
- Walking is the best exercise for you. Gradually increase the distance.
- Learn to bend at the knees and not at the lower back.
- Do not flex, extend or rotate your neck after cervical surgery.
- Sexual activity is allowed when comfortable.

Treatments

- You will have a bandage at the surgical site.
- You will receive instructions on wound care and when you may resume showering/bathing.
- You may wear a cervical collar after surgery. You will be told how long you must wear it.
- You may have white support stockings. Wear them until your doctor says it no longer is necessary. Remove them twice daily for 30 minutes and reapply. They may be machine-laundered.

Reasons to contact your physician

- Excessive swelling, redness, drainage or foul odor from your incision
- Discomfort not controlled with your pain medication
- Temperature elevation over 101 degrees
- Leg swelling, calf tenderness or significantly increased leg pain
- Chest pain, shortness of breath or breathing problems
- Burning, frequent or difficult urination