



WELCOME TO THE SPINE SURGERY ORIENTATION CLASS

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IMPORTANT CONTACT NUMBERS

- Surgeon's Office Number
- Orthopaedic Service Line Nurses:
 - Melissa Heldreth, RN,
 - Betty Hughes, RN
 - (302) 645-3104



SPINE ANATOMY

- The spinal column (or vertebral column) extends from the skull to the pelvis
- Made up of 33 individual bones termed **vertebrae**
- The vertebrae are stacked on top of each other and grouped into four regions:
 - Cervical- 7 vertebrae C1-C7
 - Thoracic-12 vertebrae T1-T12
 - Lumbar-5 vertebrae L1-L5
 - Sacral- S1, 5 bones fused



DEFINITIONS

- **Vertebrae-** Bones that make up the spine
- **Discs-** Cushions between the vertebrae, the body's shock absorbers
 - **Annulus-** tough fibrous covering of disc that protects the inner soft center called the nucleus
 - **Nucleus-** Jelly-like center of the disc
- **Lamina-** part of the vertebrae that form the back of the spinal canal
- **Spinal Canal-** the space between the vertebrae in which the spinal cord passes

MUSCLES AND LIGAMENTS

- These provide support and stability for your spine and upper body
- Strong ligaments connect your vertebrae and help keep the spinal column in position

COMMON DISC PROBLEMS

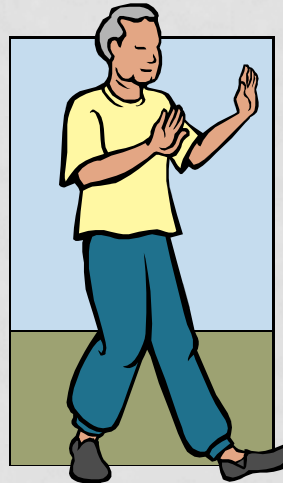
- Herniated Disc- A disk herniates when its jelly-like center (nucleus) pushes against its outer ring (annulus).
- If the disk is very worn or injured, the nucleus may squeeze all the way through.
- When the herniated disk bulges out toward the spinal canal, it puts pressure on the sensitive spinal nerves, causing pain.

OTHER COMMON PROBLEMS

- **Spinal stenosis-** occurs when the space around the spinal cord narrows
- This puts pressure on the spinal cord and the spinal nerve roots, and may cause pain, numbness, or weakness in the legs

ADLS- REGARDLESS OF THE TYPE OF CONDITION MOST PATIENTS EXPERIENCE PAIN AND DIFFICULTY PERFORMING ACTIVITIES OF DAILY LIVING INCLUDING:

- Walking
- Sitting
- Bending
- Sleeping
- Driving
- Dressing
- Bathing
- Toileting
- Household tasks



SURGICAL TECHNIQUES

- There are many surgical techniques used to treat conditions of the spine
- It is important that you are aware of the surgical procedure that is planned for you.
- Your surgeon will determine the appropriate technique specific to your condition
- Talk to your surgeon if you have any questions regarding your surgical procedure

SURGICAL PROCEDURES/HELPFUL TERMS

- **Laminectomy**- Removal of part or all of the lamina to relieve pressure on a nerve
- **Discectomy**- removal of the portion of the disk that puts pressure on a nerve
- **Spinal fusion**- locks two or more vertebrae together to decrease pain.
 - *Bone graft* used may be your own bone stock or bone from a bone bank. Your surgeon will choose what is best for you.
 - *Instrumentation*-extra support used if necessary during a spinal fusion. May include: plates, screws, rods, or cages. Your surgeon will discuss this with you.



QUESTIONS?

PREPARING FOR YOUR SURGERY

- Pick up throw rugs
- Chair with arms
- Move frequently used items to waist level
- Remove clutter/ arrange furniture
- Keep areas well lit
- Prepare food ahead of time
- Set up your support system for when you are discharged to home.
- Eat a healthy well balanced diet for optimal healing

IF YOU SMOKE, NOW IS THE TIME TO STOP

- Smoking decreases your body's ability to heal
- Talk with your surgeon now about quitting smoking
- BMC is a smoke free campus



MEET YOUR MULTIDISCIPLINARY TEAM!

- Surgeon
- Anesthesiologist
- Nurse
- Case Manager
- Nursing Assistant
- Physical Therapist
- Occupational Therapist
- Chaplain
- Registered Dietician
- Integrative Health

STRESS-LESS SURGERY



Integrative Health Complementary and Alternative Medicine



302 645-3528



STRESS-LESS SURGERY PROGRAM

Many people are apprehensive about surgery. To help ease stress associated with surgery, Beebe Healthcare's Integrative Health service offers a stress-less surgery program with three components:

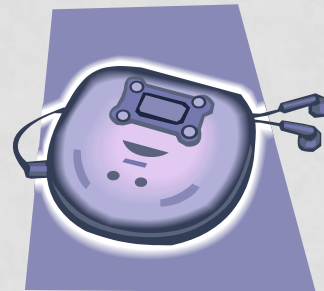
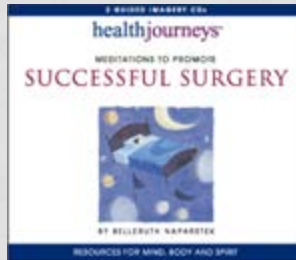
1. A relaxing guided imagery CD with music
2. Aromatherapies for stress and nausea
3. Self-applied acupressure for post-surgical nausea

A review of the medical literature indicates that the people who prepare for surgery have less pain, fewer complications and faster recovery. This results in reduced hospitalization costs and other medical expenses.



SUCCESSFUL SURGERY CD

- The Successful Surgery CD by Belleruth Naparstek may be purchased for under \$20 in the Beebe Auxiliary Gift Shop on the first floor of the hospital.



- Listen before surgery for the best results.
- An individual CD player may also be purchased for under \$20.
- Other relaxation CD's are also available.



AROMATHERAPY

- Individual vials of Lavender Essential Oil for relaxation and Peppermint Essential Oil for nausea are available *free of charge* at the Integrative Health office on the first floor of the hospital.
- *Call 302-645-3528 to arrange for pick-up.*



ACUPRESSURE PATCH

- Though few people have post surgical nausea, some sensitive people may choose to use a self-applied acupressure patch to aid in recovery.
- The patch is a small piece of adhesive covering a tiny ball placed over a Korean K-K9 acupressure point for chemical nausea. The point is on the palm side of either ring finger just below the end joint. The patch is self-applied and pressed for one minute about thirty minutes before surgery, then as needed after surgery for up to two days.
- The acu-patch is available *free of charge* at the Integrative Health office on the first floor of the hospital. *Call for pick-up.*



VEGETARIAN MENUS

- Vegetarian - vegan meals are available.
- Be sure to make your preferences known to staff or contact Diet Office x5153.



PRE-SURGERY CAUTION FOR HERBAL SUPPLEMENTS

- Tell your surgeon and anesthesiologist about all the herbs and supplements you are taking.
- For further information about herbs and supplements contact Integrative Health 302 645-3528 or go to:
- <http://www.beebehealthcare.org/patient-care-services/integrative-health>

Then scroll down to natural medicine database and click to look up any herbal product.



OTHER SERVICES

- In-Patient Services by Physician agreement:
 - Acupuncture
 - Massage
 - Reiki
 - Chiropractic
- There is an “out-of-pocket fee” for these services and service must be scheduled in advance.
- Contact Integrative Health for more information at **302 645-3528**



SO YOU HAVE A SURGERY DATE.... WHAT HAPPENS NEXT???

You will be contacted by hospital personal:

- Pre-op Nurse
- OR Registration Staff



PRE-OP NURSE

Will gather your health history and medication list.

Nurse will receive your health records from your primary care doctor or cardiologist

OR REGISTRATION STAFF

Will verify demographic information over the phone
Name, address, date of birth, insurance etc

May seem a duplication of the Pre-op questions but...

Accuracy equals Safety!!

On the day before your surgery (or on Friday if your surgery is Monday...

Between 2:00pm and 4:00 pm call 302-645-3502 to find out what time to arrive for your surgery



NOTHING to eat or drink after midnight
before your surgery...

EXCEPT ---

If you have been instructed to take any of your medications the morning of your surgery, you may have the **smallest** amount of water necessary to swallow the pills.... That means a ***sip*** of water, not coffee, not juice!



BEFORE YOU COME TO THE HOSPITAL.....

Use Safeguard soap and a special soap called chlorhexidine gluconate (CHG). A common name for this soap is *Hibiclens®*, but any brand of 4% CHG is ok to use. Do the preoperative bath/shower, one time a day, for **4 days** before surgery and then take your last bath/shower the day of your surgery, before coming to the hospital. If you have any questions, please call your doctor.

*After cleansing, dry with clean towels, wear clean pajamas, have clean sheets



ITS MY SURGERY DAY - NOW WHAT DO I DO?

Enter the
parking
garage using
the **MAIN**
entrance,
(See page 10)

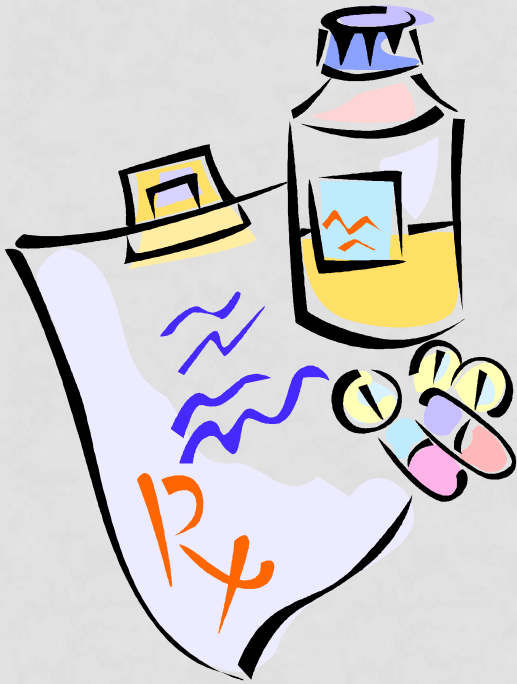
REGISTRATION



You will need

- Picture ID
- Insurance Cards
- Lab envelope (if applicable)

MEDICATIONS



- Bring ALL of your medications with you the day of surgery
- Bring them in original prescription containers
- They will be noted and then sent home

WHAT ELSE DO I NEED TO BRING?

Clothing: You will be getting dressed!

- Slippers (do not bring open back slippers)
- Comfortable clothes (large sweat shorts & t-shirts)
- Large collar or V-Neck shirts for cervical
- Bring the brace (if ordered by surgeon)

Not like these



Toiletries

Hairbrush

Toothbrush

Toothpaste

Deodorant



WHAT DO I LEAVE AT HOME?

All Jewelry

Money

Credit Cards

Anything of value



SURGERY PREPARATION

SAME DAY SURGERY

- Weight on admission
- IV will be started
- Vital Signs... Temperature, Pulse, Resp
Blood Pressure
- ID Band/ Allergy Band/ Blood Band
- Visit from Anesthesiologist prior to surgery to discuss your options



ANESTHESIA

- Will meet with you the morning of your surgery to discuss anesthesia
- Tell the anesthesiologist any prior anesthesia history, any anesthesia related problems, or any preferences you have regarding your anesthesia.

SURGERY PREPARATION

SAME DAY SURGERY CONTINUED

- How do we identify you?
 - We use two identifiers, name and birth date.
 - You will be asked prior to receiving any medication or treatment
- This is done to ensure the correct medication and/or treatment is being provided.
- This complies with the National Patient Safety Goals

HOW IS MY SURGICAL SITE IDENTIFIED?

Same Day Surgery

- You will be asked many times what procedure you will be having

Operating Room

- “Time Out” in the OR
- Prior to surgery the OR team takes a ‘time out’ and all identifying information is reviewed with the entire team

PRE-OP MEDICATION



After preparations are completed, you will receive some medication through your IV to help you relax prior to surgery.

You may not remember much from this point!

WHERE DO FAMILY AND FRIENDS WAIT?

Loved ones can wait in the same waiting area in the Same Day Surgery Area.

Preparation, Surgery and Recovery takes between 3 and 4 hours, but *may be longer depending on your procedure*



TELL THE VOLUNTEER IF YOU
LEAVE THE WAITING AREA TO GET
SOMETHING TO EAT



THE VOLUNTEER CAN DIRECT YOU
TO THE SUNSHINE CAFE

OPERATING ROOM

- You may not remember much about the Operating Room (OR)
- The temperatures are kept cool to prevent infection

POST ANESTHESIA CARE UNIT (PACU)

- You will be monitored closely in the PACU (recovery room), for at least an hour
- Family is NOT allowed to visit in PACU
- You may have to wait there longer if your room is not yet available.



Questions?

REHABILITATION

PHYSICAL THERAPY (PT)

- Mobility
- Positioning
- Precautions
- Safety Awareness

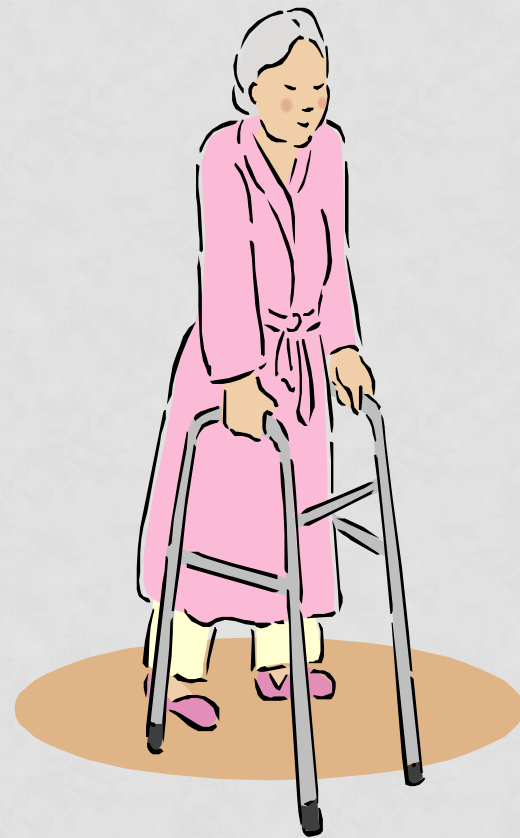


PHYSICAL THERAPY

Physical Therapy evaluation at bedside day of surgery or first post op day depending on the time of your surgery

PHYSICAL THERAPY

Progress from sitting at
bedside to standing to
ambulating



PHYSICAL THERAPY

Instruct in spine precautions as ordered by your surgeon

Transfer training

Ambulation

Learn stair climbing prior to discharge

Log Rolling- can start practicing now



SPINE PRECAUTIONS

- Lumbar- No bending, Twisting, Lifting.
- Cervical- Avoid extreme head movement, no heavy lifting
- Your therapist will review your precautions with you

PT DISCHARGE GOALS

- Get In & Out of bed with minimal help
- Get on & off a toilet
- Walk a safe household distance -may or may not use a walker
- Go up and down stairs

OCCUPATIONAL THERAPY

- Help you modify your activities of daily living if needed in order to increase your independence while maintaining your spine precautions
- Provide adaptive equipment for dressing, bathing, and/or toileting if needed to promote proper and safe body mechanics
- Surgeon and PT will assess need for OT depending on your progress during your hospital stay

OT DISCHARGE GOALS

By day of discharge you will be able to:

- Perform self-care needs independently while safely following your spine precautions
- Understand basic techniques for performing household tasks with proper body mechanics



Questions?

CASE MANAGEMENT

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WHAT DOES A CASE MANAGER DO?

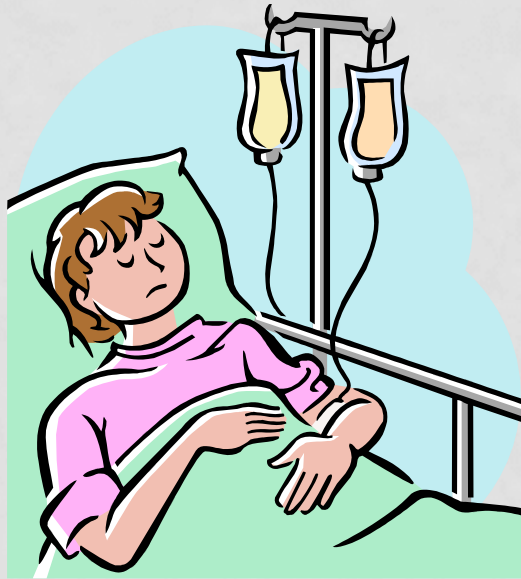
- Assist with discharge planning
- Obtain necessary equipment unless going to rehab
- Insurance liaison (while in hospital)
 - Approval
 - Benefits
 - Co-pay for services

EQUIPMENT

- The therapist will make recommendations for the appropriate equipment
- Case manager will order the equipment if needed
- Will be delivered to the room prior to discharge

LENGTH OF STAY

- Depending on how you are doing with PT and your recovery
- Typically 1-2 night stay in the hospital



WHAT HAPPENS THE MORNING OF DISCHARGE?

- Physician will write discharge orders
 - Receive morning therapy
 - May need to stay for an afternoon session
 - Most are ready for discharge by mid-day



Questions?

NURSING

POST OP CARE

- Vital signs assessed frequently first few hours after surgery
- Possible Foley catheter inserted in OR
- Possible drain from incision- removed prior to discharge
- Nasal Oxygen/Pulse Oximeter
- TEDS/EPC-- Compression stockings to help blood flow in legs
- To keep lungs clear: use the incentive spirometer 10x every hour while you are awake .Take deep breaths often

DIET

ice chips / water



clear liquids



full liquids



regular diet



- Let your Nurse know if you feel nauseous or have an upset stomach. Surgeon orders medicine just in case

INCISION CARE

- Your dressing will be changed according to the physician's order
- Nurses will teach you how to care for your incision and dressing



HAND WASHING

- Important to wash your hands with soap & water or use hand gel prior to touching your incision or changing your dressing
- Keep your wound clean & dry
- KEEP PETS AWAY FROM SELF AND INCISION UNTIL INCISION IS HEALED
- DO NOT ALLOW PETS TO SLEEP IN BED WITH YOU.
- Have a clean pair of sheets on you bed at home
- Use clean towels



PAIN MANAGEMENT

- You will be asked to rate your pain on a scale of 0-10

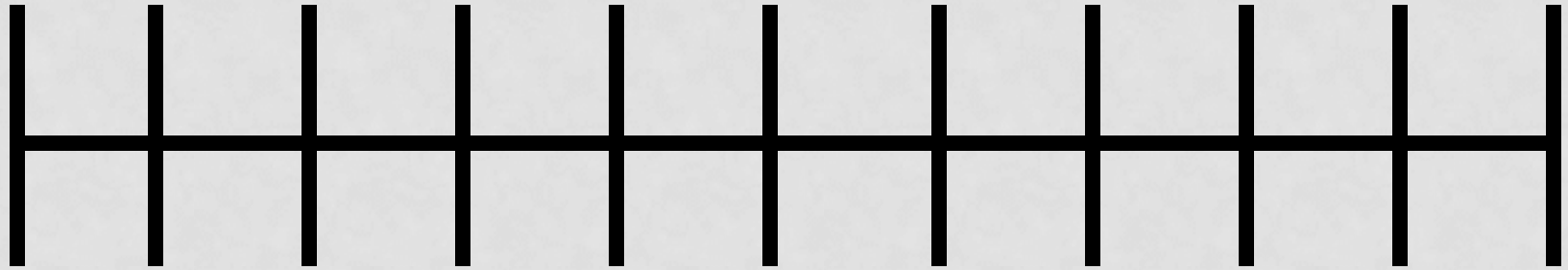
- 0 is NO pain

- 10 is the worst pain

You will be asked frequently what your pain score is from 0 to 10

Your pain control is important to us!!!!

0 - 10 PAIN INTENSITY SCALE



0 1 2 3 4 5 6 7 8 9 10



0= no pain 1-3= Mild pain 4-6=moderate 7-9=Severe pain 10= Worst possible pain

TIPS FOR PAIN CONTROL POST-OP

- Set a realistic goal
- Stay ahead of your pain
- Talk to your nurse about your pain
- Common pains you may feel:
 - Sore throat
 - Incision pain
 - Stiffness



PAIN CONTROL TIPS CONT...

- IV or Oral pain medications
- Physical- repositioning, turning, pillow use
- Alternative Therapy- Relaxation, distraction
 - Integrative Health

PAIN MEDICATION SIDE EFFECTS

Constipation

- Stool softeners to start day of surgery
- Drink plenty of fluids at the hospital and at home
- Laxative/suppositor y/ Power Pudding

Nausea

- Slow progression of diet

Itching

- Medications available
- Medications available for all of these
- Please ASK for them

Fall Precautions

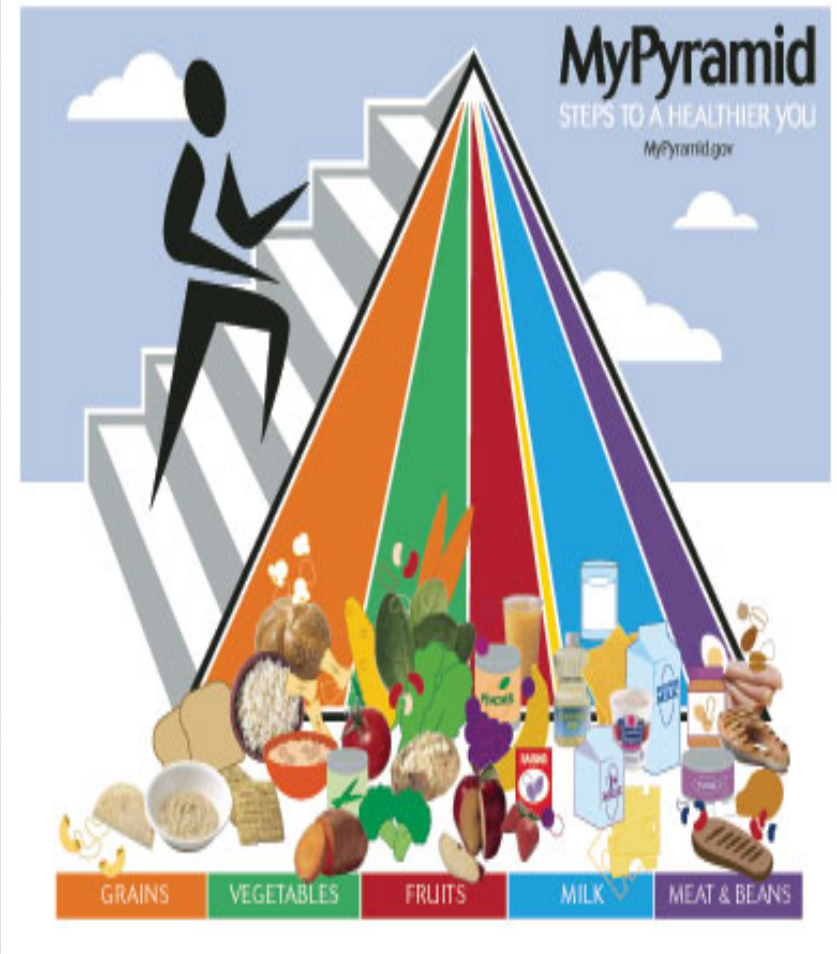
- Everyone will be on Fall Precautions
- This means you need assistance with transfers and walking
- Please call for assistance before getting out of bed or when in the bathroom



Fall
Precautions

NUTRITION

- Avoid meal skipping
- Healthy snacks are helpful if your appetite is poor after surgery
- Drink plenty of fluids
- Avoid Alcohol
- Include a variety of foods from all food groups



VISITING HOURS

- 8am to 9pm
- Two visitors at a time per patient to help reduce noise
- Do not visit if you are sick
- Important to do your physical therapy even if you have visitors
- Quiet time 2pm – 4pm

DISCHARGE PROCESS



- The day you are to go home plan on leaving around lunch time
- Several things need to be completed before you go home:
 - Equipment for at home use if necessary
 - Discharge instructions from your nurse

DISCHARGE INSTRUCTIONS

- Incision Care
- Pain management
- Complete list of medications
- Spine precautions
- Back to work when ok with Surgeon
- No Driving
- Nutrition

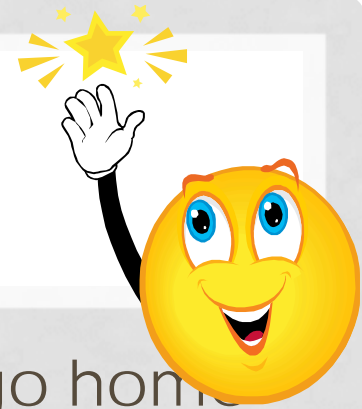
NOW AVAILABLE: WALGREENS BEDSIDE DELIVERY PROGRAM

- Walgreens pharmacy
- New discharge medications
- Phone number: 302-260-1470

HOSPITALITY HELP LINE

- Extension 8000 from your room phone
- Use for any questions, concerns, or needs related to meals, housekeeping, maintenance, or with noise level, please call.

PATIENT SATISFACTION



- May receive a survey in the mail after you go home asking you to rate our care
- Our goal is for you to have the best experience while you are here.
- Please let the Charge Nurse or Nurse Manager know of any complaints or concerns you may have
- Proud of our Health Grades Award top 5% for Orthopaedic care in Delaware, Maryland and Virginia

BEDSIDE REPORTING

- Bedside report is the exchange of patient information at the bedside between nurses at shift change.
- This is to include the patient in the plan of care.

Questions?

CHAPLAINCY SERVICES

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PLANNING FOR YOUR STAY

Invite clergy to visit during your stay.

Blessings and Prayers

Inspirational materials (Bibles and Rosary Beads are available)

CarePages® Web Visitors Page (brochure)

WHILE YOU ARE HERE

Take a few minutes each day to nurture your spirit.

Visit our Chapel.

Lay Eucharistic ministers from St. Jude the Apostle Catholic Church visit daily.

Ask to be included in the Chaplains' Prayer Book.

Supportive staff chaplains are available. Speak with your nurse or contact the chaplains office directly.

(see inpatient handbook for details)

OUR CHAPLAINS



Our chaplains follow the standards of care endorsed by The Association of Professional Chaplains.

The fruit of the Spirit is love, joy, peace, patience, kindness, generosity, faithfulness.

Galatians 5:22