

Scoliosis Surgery

What to expect in the hospital:

The day of surgery:

- Arrive at the hospital **AT LEAST** 2 hours before surgery
- Leave all valuables at home (jewelry, watches, large amounts of cash, etc.)
- You will check in through our Admissions Department and then be directed to our Procedure and Treatment Unit (PTU) to be prepped for surgery. Two family members may accompany you to the PTU, where you will meet your pre-operative nurse and anesthesiologist.
- Once your surgery is completed (usually 5-7 hours), you will be awakened gradually in our Post-Anesthesia Care Unit (PACU). This process takes approximately 2 hours. Your surgeon will brief your family while you are in our PACU.
- Once you are awake, your vital signs are stable and your pain is well controlled, you will be transported to the PICU, or pediatric inpatient floor. Our staff will then focus on helping you with pain control, nausea management, monitoring your vitals and making sure you are getting restful sleep.

If your child is taken to the PICU for extra monitoring, one parent can sleep next to your child.

Hospital Stay

DAY AFTER SURGERY	THINGS TO EXPECT	THINGS YOU CAN DO TO GET BETTER FASTER
Day 1	<ul style="list-style-type: none"> - Lots of IV's in place - A urinary catheter in place - Blood draw - Sometimes an oxygen cannula or mask on your face - A pain control button called a PCA will be available to you to instantly get pain medicine through your IV - Eating and drinking will probably just be clear liquids - Get out of bed with the nurse and/or Physical Therapy - A drainage tube near your surgical incision site 	<ul style="list-style-type: none"> - A device called an "incentive spirometer" use it to take big deep breaths: 10 breaths in and out every hour at least. - Move around in the bed. Log-roll from side to side and drink from a cup ON YOUR OWN. It may hurt a little but it will help you get up. Moving around is safe. Use the side rails to help you.
Day 2	<ul style="list-style-type: none"> - Your diet will likely increase to solid foods if you can tolerate it - More time out of bed including walking - Urinary catheter will come out when you can walk to the bathroom - Decrease the IV pain medication and begin the oral pain medication (if possible) 	<ul style="list-style-type: none"> - Use the PCA button before your physical therapy and before you get out of bed. Then use it only when you have pain. Begin to use oral pain medication. - Continue using your incentive spirometer - Begin eating regular food a little bit at a time - You can ask the nurses if there are any IVs that can come out yet. Try to decrease the number of tubes and wires- it will make moving easier and make you feel better.

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DAY AFTER SURGERY	THINGS TO EXPECT	THINGS YOU CAN DO TO GET BETTER FASTER
Day 3	<ul style="list-style-type: none"> - Maybe an x-ray - Regular diet - UP AND WALKING AROUND THE FLOOR and to the Bathroom - The team will want to know if you have passed gas or had a bowel movement! Very important information so that we can know if your bowels are working well. - You will be getting narcotic oral pain medication and the iv pain medication (magic button) will probably go away today - You will be getting a stool softener - Dressing will get changed and the drainage tube will likely be removed 	<ul style="list-style-type: none"> - Work on getting in and out of bed every hour - Sit in a chair for at least 1 hour- 2 times that day - Use pillows to splint yourself while sitting and moving- HELPS A LOT - Take a sponge bath, brush your teeth, wash your face - Put on PJ pants and a big t-shirt! You will feel SO MUCH BETTER to have regular clothes on. - Visitors! Good day for it. - Make sure to take your stool softener. Try to sit on the toilet for at least 10 minutes- 2 times a day. Constipation can really make you uncomfortable. - Stand in front of the mirror & try to level your shoulders. Your body is not used to being so straight- you will have to train it.
Day 4-6	<ul style="list-style-type: none"> - Lots of Physical therapy and getting out of bed and WALKING - Sitting in a chair at least 4 times during the day - Sponge bath /shower - You will go home when you are ready 	<ul style="list-style-type: none"> - Out of bed AS MUCH AS POSSIBLE, 4 times in a chair for 25 minutes minimum - Deep breathing - Take all of your medications - Eat small frequent meals and snacks - Drink LOTS OF WATER! - Adjust your shoulders in front of mirror twice today - WALK WALK WALK- every hour - Tell the nurse and therapist what is difficult or painful for you. Practice walking stairs with your nurse or therapist if you have stairs at home. - Try to have bowel movement before going home- it may be scary but is better to do in hospital the first time - Get ready to go home

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When can I go home?

- When you can walk more than 50 Feet
- When you can keep solid food down
- When you have pain that is controlled by oral pain medicine
- When you can go to the bathroom on your own

Earliest is 3 days and most patients are home by day 5 or 6

What to expect at home:

As your child recovers from spine surgery, your surgeon will provide you with guidelines to help you take care of your child.

Incision Care - Keep the incision clean and dry. Top cotton dressing can be removed 10 days after surgery. Adhesive surgical tapes were placed along your child's incision while it heals. Leave these in place, they will peel off over time. Observe the incision for redness, swelling, tenderness, warmth, drainage, sores, foul odor and /or opening or separation of the incision.

Bathing - Your child may begin to shower 10 days after surgery. Do not allow your child to soak in a bathtub or swim.

Diet - Encourage your child to eat a well balanced diet that includes a variety of foods. Until your child's appetite returns to normal, encourage high calorie foods (dairy products, meats, eggs). Encourage fluids (water and fruit juices) and a high fiber diet (fruits, grains and vegetables) to prevent constipation.

Medications - Pain Medication: Give the medication as ordered by your child's doctor. Giving pain medication 20 minutes before your child is active may help decrease discomfort. Pain medication will gradually be needed less often as your child recovers. Acetaminophen or ibuprofen can be used instead of the prescription pain medication for pain that is not severe.

Stool Softener: This may be recommended to prevent constipation. Constipation may occur due to your child's decreased activity, prescription pain medications and iron therapy.

Post-op Brace - In special cases, your child's doctor may recommend wearing a brace for a prior of time. This is very individualized and not for every child. Talk to your doctor about whether your child will need a brace after their surgery.

School - Many children will be ready to return back to school 3 to 6 weeks after leaving the hospital. We may arrange for a homebound teacher/tutor until your child returns to school. Before going back to school, your child should be able to sit in a chair comfortably all day and walk longer distances inside your home. Your child will be excused from PE classes about 6 months.

Dental Prophylaxis - On occasion, the orthopedic doctor may recommend that your child receive an antibiotic before dental procedures, including routine teeth cleaning. Antibiotics are needed because there is a risk of infection from the germs that can enter the blood after a dental procedure. Your child may be at higher risk for this due to spine implants (rods, hooks, wires, and/or screws. Discuss this with both your dentist and orthopedic doctor before the scheduled dental procedure.

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Follow-up

After the surgery your child will return to the clinic for multiple follow-up appointments to check how well your child is doing six weeks after surgery, expect to take x-rays to check that the spine implants are holding the correction of the spine surgery. Then routine 3 month, 6 month, 12 month, 2 years and 5 years following surgery with spine x-rays at each of these visits. At each appointment your Orthopedic surgeon will notify you when your child may progress with their activities

Call your child's doctor if you have questions or concerns, or if your child

- Has a fever greater than 101° F (38.3° C)
- Develops redness, swelling, warmth, tenderness, foul odor or sores around the incision
- Has been bleeding from the incision
- Incision breaks open or separates
- Has sudden, severe back pain
- Falls hard on their back or side
- Develops numbness and/or tingling in the arms or legs that persists
- Have accidents of urine or bowel movements