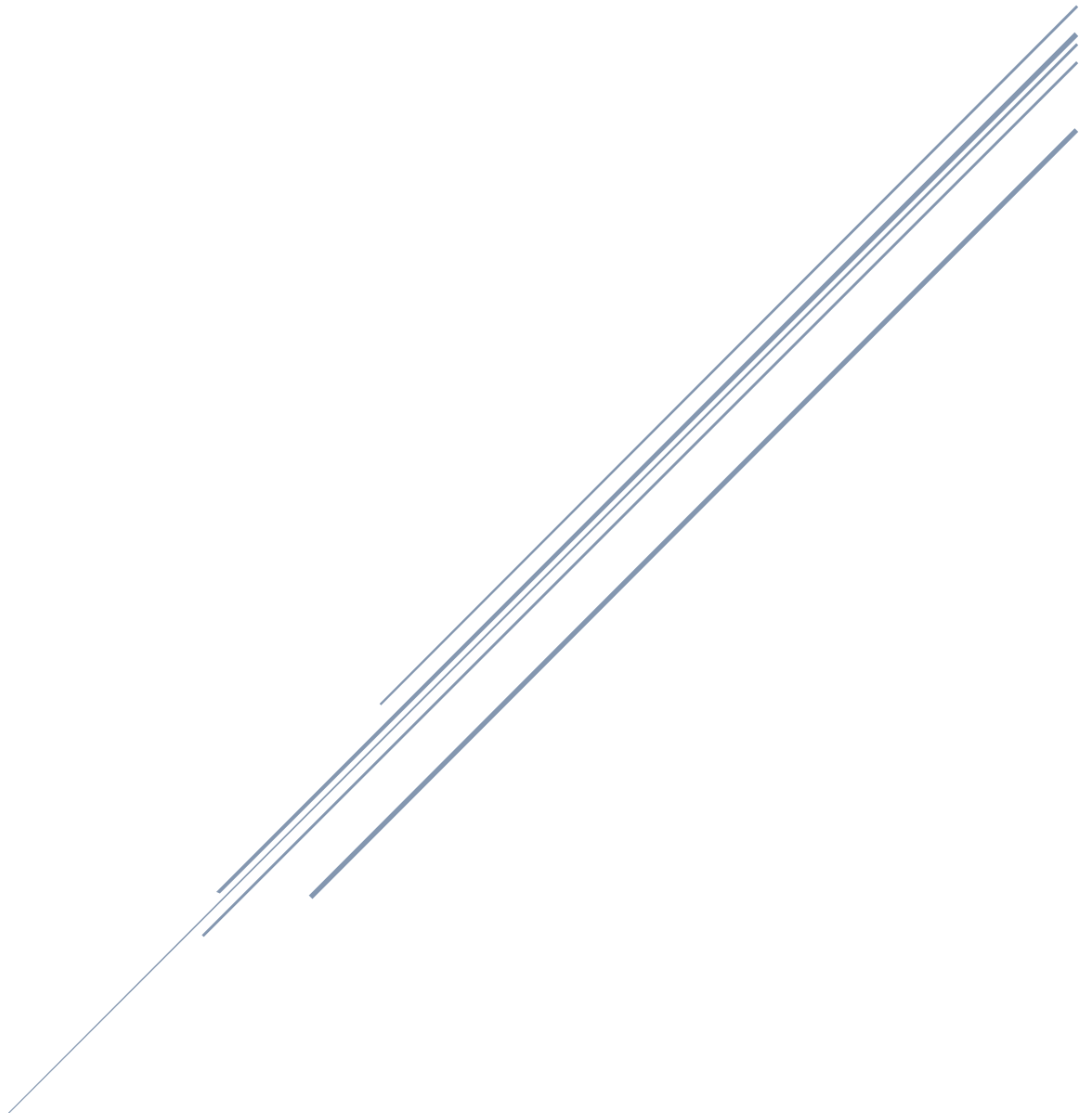




**Cleveland Clinic**

# **Surgical Guide**



Center for Spine Health

## Center for Spine Health Surgical Guide

### PREPARING FOR SURGERY

#### Surgery Scheduling

Your scheduled surgery date is based on the availability of the operating room and the surgeon. There may be occasions when an emergency case needs to replace a scheduled elective case. We apologize in advance for any difficulties this may cause. We will try our best to reschedule your case as soon as possible.

#### Insurance Coverage

Many insurance companies require pre-authorization for hospital admissions. You will receive a phone call from Cleveland Clinic Registration to update your insurance. Confirm with your insurance company that all necessary paperwork has been completed before admission. Please remember to always carry your insurance and prescription drug cards with you. If you have questions about your insurance approval, please call the pre-authorization customer service office at 216-636-9814 from 8 a.m. - 4:30 p.m. Monday-Friday.

#### Advance Directive

Every adult has the right to direct their medical care. For this reason, Cleveland Clinic encourages all individuals who are 18 years or older to complete an advance directive. In the event you become incapacitated, an advance directive is a legal document that provides written instructions about who can make medical decisions on your behalf. It also allows you the right to choose your own medical care based on your values, beliefs, and personal choices. For more information, please visit

<https://my.clevelandclinic.org/patients/information/medical-decisions-guide/advance-directives>.

If you have a completed advance directive, you may have it uploaded to your medical record the following ways:

- Upload the document via MyChart
- Bring the document to your next appointment
- Mail them to: Cleveland Clinic Health Information Management, Ab7 Advance Directives Processing  
9500 Euclid Avenue Cleveland, Ohio 44195
- Fax them to 216.445.9733
- Email them to [advancedirectives@ccf.org](mailto:advancedirectives@ccf.org).

Please make sure that all required elements are completed prior to sending (pages 1, 3, 8 and 9 on the State of Ohio Health Care Power of Attorney form).

#### Travel & Lodging

- If you have questions regarding travel and lodging, please contact medical concierge at 216-445-5580 or by visiting our website <https://my.clevelandclinic.org/patients>

#### Medications

- Stop NSAIDS (Ibuprofen, Advil, Celebrex, Mobic, etc.) 7 days before surgery.
- Stop Vitamin E, ALL multi-vitamins, herbals, fish oils and dietary supplements 7 days before surgery.
- If you are taking any blood-thinning medications, such as (Aspirin, Plavix, Coumadin, etc.), please discuss these medications with your surgeon's office before stopping.

- Your daily medications will be reviewed with you at your pre-operative appointment Pre-Anesthesia Consult Clinic (PACC). You will be instructed on which medications you can/cannot take the day of surgery at that time. Please bring an updated medication list to this appointment.

### **MRSA Nasal Swab & Ointment**

- A nasal swab may be performed at your pre-operative appointment. This swab is used to detect Methicillin-resistant Staphylococcus aureus (MRSA).
- If you are not swabbed or test positive, your surgical team will order Mupirocin (BACTROBAN) 2 % ointment to be used for five days prior to your surgery. This ointment is prescribed as a preventative measure to treat any existing bacteria, such as Staph, that may be living in your nose.
- Apply 1/2-inch ointment with a cotton swab (Q-tip) in each nostril twice daily for five (5) days leading up to your date of surgery.

### **TREK for Surgical Success**

The Cleveland Clinic Center for Spine Health is committed to providing the most comprehensive world class care. Recent national guidelines have recommended brief and accessible behavioral treatments for pain control for individuals with pain, particularly to enhance surgical outcomes.

Due to your upcoming spine surgery, we are excited to offer you a virtual behavioral pain management class called "TREK for Surgical Success" based upon the proven Empowered Relief Program from Stanford University. We are choosing to offer this for individuals undergoing spine surgery as spine surgery is the most common surgery worldwide.

This class is a 2-hour virtual visit that will teach skills and strategies for pre- and post-surgery pain control. Family members are strongly encouraged to attend to establish a support system for post-surgery care.

Please call 216-445-0517 with any specific questions about the class. If the current appointment time/date does not work for you, please call 216-636-5860.

This class is strongly encouraged by your surgical team for best surgical outcomes but is not mandatory.

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#### **FAQ about TREK.**

What does TREK stand for?

Transform, Restore, Empower and Knowledge - the 4 corners of our surgical program. Our classes include an overview of the surgical process, orients you to our multidisciplinary pain team and includes the Empowered Relief Program from Stanford University. <https://empoweredrelief.stanford.edu/>

How is the class presented?

The class is offered in a virtual format. You connect to the class through My Chart and must have Zoom installed on your device. If you live outside the state of Ohio please check the following map to ensure that your state covers virtual visits by Dr. Davin who is a PsyPact approved provider. <https://psypact.site-ym.com/page/psypactmap>

Is there a cost?

The class is billed to insurance. Check with your insurance provider to see if this class is covered using codes 96164 and 96165

## **THE DAY BEFORE SURGERY**

### **Arrival Time**

- Please contact the Neurosurgery Scheduling Office after 2:30 p.m. one business day before your surgery. They will provide you with the time you are to report to the hospital.

**Neurosurgery Scheduling Office: 216-444-9292, or toll-free at 1.800.223.2273, extension 49292**

### **Eating/Drinking**

- No food after midnight. You may have 12 ounces of clear liquids until 2 hours before your scheduled arrival time. You may take approved medications with small sips of water.
- Clear Liquids include water, clear juices (apple juice or Gatorade), carbonated beverages, clear tea, or black coffee.

### **Skin Preparation**

Cleaning the skin before surgery can reduce the risk of infection at the surgical site. We recommend using Hibiclens (chlorhexidine gluconate CHG) antiseptic solution the night before surgery and/or 2% CHG (SAGE R) the morning of your surgery.

- Hibiclens can be purchased over the counter at your local pharmacy
- Hibiclens and 2% CHG (SAGE R) surgical wipes are available for pick up at Cleveland Clinic Main Campus- S70. Please notify your surgeon's office if you plan to pick up these items.

### **Skin Preparation Directions**

#### **PRIOR TO USE**

- Check your skin for any rash, cuts or scrapes and report them to your doctor's office.
- Do NOT remove any hair. Avoid shaving or using any topical hair removers near your surgery site. Shaving/hair removal can increase the risk of infection.

#### **THE NIGHT BEFORE SURGERY**

- The night before surgery, take a shower. Shampoo your hair with your normal shampoo and rinse well. Secure hair up away from the neck. Wash your body with your normal bath soap and rinse well.
- Then, while you are still wet, use the bottle of Hibiclens (4% CHG) liquid skin cleanser.
- Step away from running water or turn water off.
- Apply Hibiclens solution to your hand or a wet clean washcloth and lather your entire body from chin to toes, front and back. You may need help to reach difficult areas such as your back. Gently wash your entire body and focus the scrub on the area where surgery will be done. Leave the Hibiclens on the skin for 2 minutes. Do not use Hibiclens on your head, hair, face or genital (private) area. Rinse thoroughly.

- Keep Hibiclens out of your eyes, ears, and mouth. If contact occurs in any of these areas, rinse with water right away.
- Pat yourself dry with a clean towel. Do NOT apply any moisturizers, powders, or deodorant. Dress with clean night clothes and use clean linen on your bed.

### **THE MORNING OF SURGERY**

- You may repeat showering with Hibiclens **OR** use 2% CHG (SAGE R) disposable cloths.
- Use one multi-pack (three inner packages) of 2% CHG (SAGE R) disposable cloths to wipe your entire body. Do NOT microwave the cloths. Your skin should be dry when you use the cloths.
- There are 6 cloths; one for your front (neck, chest, and abdomen), one for each arm, one for each leg, and one for your back. After you clean one area with the cloth, throw that cloth away. Use all 6 cloths.
- Be sure to clean the surgery site(s), rubbing vigorously back and forth for 3 minutes.
- Allow the skin to air-dry for one minute. Do NOT rinse. Do not use a towel. Your skin may feel sticky.
- Do NOT use any moisturizers, powder, or deodorant. Dress in clean, comfortable clothes.

### **THE DAY OF SURGERY**

#### **Arrival**

- Parking is available at the J-Building P1-Parking garage at E. 93rd St. and Chester Ave.
- Valet Services are offered at the Main Entrance near the water feature.
- Parking will not be validated.
- Please check in at the J1-9 desk upon your arrival. You will enter through the main entrance. The desk is located to the right. Please notify a Cleveland Clinic Red Coat Greeter if you need assistance finding this location.

#### **Outpatient Procedures**

- You must have a responsible driver take you home. A bus driver or cab driver is not a responsible driver.
- We recommend that a responsible person stays with you overnight to take care of you. You cannot stay in a hotel alone after outpatient surgery. You will not be permitted to have your surgery if you do not have someone to take care of you.

#### **Visitors**

- Please visit <https://my.clevelandclinic.org/patients> for visitor information and guidelines.

#### **Personal Belongings**

- Please bring your photo ID and insurance cards.
- If you do not have a copy of your advance directives on file with us, please bring a copy with you on the day of surgery.
- Please bring any toiletries or clothes (pajamas, gowns, etc.) that will help make your stay more comfortable.
- Please bring an updated medication list.
- Leave medications at home unless otherwise instructed.
- Please leave valuables (jewelry, money, etc.) at home or give them to your visitor prior to checking in to the surgical center.

- If you use a C-PAP (Continuous Positive Airway Pressure) machine, you are encouraged to bring it with you to surgery if you are expecting an overnight stay. You do not need to bring distilled water.

## AFTER SURGERY

### Plan of Care Visit

During your hospital stay, your surgical team, including your surgeon, resident, physician assistant and/or nurse practitioner, will come to your room each day for a Plan of Care Visit. The purpose of this visit is to include you and your loved one to discuss the plan of care for that day as well as the coming days of your hospital stay. The provider you see each day will not necessarily be your surgeon- you may see his/her Physician's Assistant, Nurse Practitioner and/or resident- but rest assured, they work closely with your surgeon and keep him/her updated on your plan of care. Of note, if your nurse is unavailable to attend the plan of care visit your surgical team will be sure to call the nurse and update them with any discussion items

### Medication Refills

- Patients can choose to have medications sent to a local pharmacy or have them filled at the Cleveland Clinic Main Campus- JJ Pharmacy. We recommend having prescriptions filled at Cleveland Clinic to reduce the delay of receiving medications.
- Patients discharged with pain medication are responsible for contacting their surgeon's office for refills. Please call **3 days** prior to running out of medication to allow ample time for refills to be sent to your local pharmacy.
- You will be actively weaned off your pain medication. You should notice a decrease in your medication over time. Please call your surgeon's office if your post-operative pain is not well controlled.
- **Note: not all surgeons refill narcotics after surgery.** You will need to discuss pain control with your surgeon's office prior to surgery.
- Contact your surgeon's office before restarting NSAID's (Ibuprofen, Advil, Celebrex, Mobic, etc.). You will be instructed on how to restart blood thinners at discharge.

### Constipation

- Exposure to anesthetics and narcotics commonly causes constipation.
- To prevent constipation, eat a well-balanced diet with plenty of fiber and increase water intake. Good sources of fiber include fruits, vegetables, legumes, and whole-grain breads and cereals.
- You may be discharged with a stool softener (Colace, Docusate) and/or a laxative (Senokot, Senna) which taken together can help treat post-operative constipation.
- Over the counter MiraLAX is a gentle laxative you can take in addition to the Senna and Colace.
- Please notify your surgeon's office if you are unable to have a bowel movement 5 days after surgery.

### Incision Care

- Your incision may be closed with dissolvable sutures, glue, staples, or regular sutures.
- Keep your surgical site clean and dry. You can remove the gauze dressing **3 days** after surgery unless otherwise instructed.
- You may shower **3 days** after surgery. If you have staples or sutures, please cover the incision area with Saran Wrap or plastic wrap by either taping around the incision or wrapping around your midsection.
- After removal of your of suture/staples, you will be allowed to shower without covering the incision. Please do not scrub the incision. Let the soap run down the incision, then pat dry.
- Do not submerge the incision in standing water for 6-8 weeks after surgery (no tub bathing, swimming, or hot tubs).
- Continue to ice your incision to decrease swelling and pain after surgery.
- Do not use topical ointment, lotions, or creams on the incision.
- **Dissolvable Sutures/Glue:** Please do not shower for 48 hours. Please do not peel glue off the incision.

### Suture/ Staple Removal

- Sutures/staples will need to be removed 12-14 days after surgery. We offer suture/staple removal at Main Campus with our nurses. Please contact your surgeon's office if you would like to schedule this appointment.
- You may also have you sutures/staples removed by your primary care office, rehab/skilled nursing facility, or home health care provider. You are responsible for calling your primary care office to schedule. Please note that not all primary care-offices are comfortable with removing sutures/staples and you may be redirected back to your surgeon's office.

### Post-Op Restrictions—Cervical Surgery

- Your discharge instructions will specify use of a collar if applicable.
- Most collars may be removed to take a shower or when you are eating. Your surgeon will tell you if you can remove your collar for these purposes.
- Please do not do any strenuous activities, including lifting greater than 10 lbs, pushing, or pulling for 6-8 weeks.
- It is important to keep your neck in a neutral position when possible and avoid looking down (extension) or back (flexion) for extended periods of time.
- Take frequent short walks every day, gradually increasing your distance each day. Use stairs as tolerated.

**Post-Op Restrictions—Lumbar Surgery**

- Limit bending and lifting greater than 10 lbs. and twisting for up to 6-8 weeks after surgery.
- Do not sit for an extended period (no more than 30-40 minutes at a time).
- Take frequent short walks every day, gradually increasing your distance each day. Use stairs as tolerated.

**Post-Op Restrictions—Kyphoplasty/Vertebroplasty**

- Resume activities of daily living as tolerated.
- You can drive and return to work when you are able and can tolerate it.
- Take frequent short walks every day, gradually increasing your distance each. Use stairs as tolerated.

**If you have questions about post-op activities, please contact your surgical team.**

**Post-Op Exercise**

- Walking is the best exercise you can do in the initial 6 weeks following surgery. It improves pain, circulation, constipation, mood, strength and can reduce common post-op complications such as blood clots, pneumonia, and deconditioning
- Start out slowly, walking as tolerated around your home, using an assistive device is advised/necessary.
- Gradually increase your walking, as tolerated, up to 30 minutes at least twice daily.
- Recommendations regarding the need for physical therapy will be discussed at your 6-8 week post-operative appointment. If you feel inclined to start earlier, please call your surgeon's office to discuss.

**Travel**

- You will usually be permitted to drive beginning 2 weeks after surgery. You should not drive if you are still taking narcotics (Oxycodone, Percocet).
- If you have a long trip (over an hour) in a car or plane within 4 weeks of your surgery, please make sure you are walking/standing every hour for 5-10 minutes.

**Returning to Work**

- You should discuss with your surgical team when you will be able to return to work.
- The surgical office can complete Family Medical Leave Act (FMLA)/Short-Term Disability paperwork. Please allow 5-7 business days for completion. Please provide specific directions on where you would like the paperwork sent.
- Due to HIPAA we cannot e-mail FMLA or Short-Term Disability paperwork.
- The surgical office is responsible for short-term disability up to 12 weeks after surgery. Any additional time off will need to be determined by your primary care physician or referring provider.

**MyChart**

- MyChart is a secure, online health management tool that connects Cleveland Clinic patients to portions of their electronic medical record allowing them to see test results, message their physician, schedule appointments and more.
- You can contact your surgeon's office with non-urgent questions or concerns using MyChart. You may also send pictures of your incision.



- Please do not use MyChart to report urgent or emergency requests. MyChart is only monitored Monday- Friday 8:00 am- 4:00 pm.
- For more information or to access MyChart, please visit <https://my.clevelandclinic.org/online-services/mychart>


### **Call the Surgeon's Office**

- If you have increased redness, swelling, significant drainage (more than a couple drops), foul odor, or an opening of your incision.
- If you experience fevers (greater than 101 °F or 38 °C), chills, nausea, vomiting or increased pain at the surgical site.
- If you have new or unfamiliar pain or weakness in the arms or legs.
- If you have unexplained incontinence ("accident") of bowel or urine, are unable to urinate, or have new onset of pain or numbness in the rectal, vaginal, or scrotal area.
- If you have new or increased swelling of the legs and feet.
- If you experience shortness of breath, dizziness, and/or chest pain seek immediate medical attention.

**For urgent concerns after hours and on weekends please call 216- 444- 2200 (locally) or 1 -800- 223- 2273 (toll free) and ask for the Neurosurgery Resident on call for your surgeon.** If you do contact the after hours team, please be sure to still call your surgeon's office the next business day.

## **Cleveland Clinic Main Campus: Map & Address**



-  J1-9 Check-In Desk
-  Valet Parking

Cleveland Clinic Main Campus  
 9500 Euclid Ave, Cleveland, OH 44195

JJ Visitor Parking Garage  
 1956 East 93rd Street Cleveland, OH  
 44106



## Care Transition Made Easy

A patient guide for moving from hospital to home

Discharge planning starts on admission and should be included in your daily **Plan of Care Visit** conversations with your care team.

Our goal is to help you return to your daily life as soon as possible. On the day of discharge, our hope is to have you discharged **by noon**. Our staff will support and encourage you in making transportation plans and scheduling at-home services. If someone is picking you up on the day of discharge, we ask that they arrive at the hospital no later than 11 a.m.

### Planning together for a safe return home

#### Making arrangements early helps to:

- › Ensure you understand what to do to take care of yourself.
- › Have everything you need to get better at home.

#### Questions to help you get ready to go home:

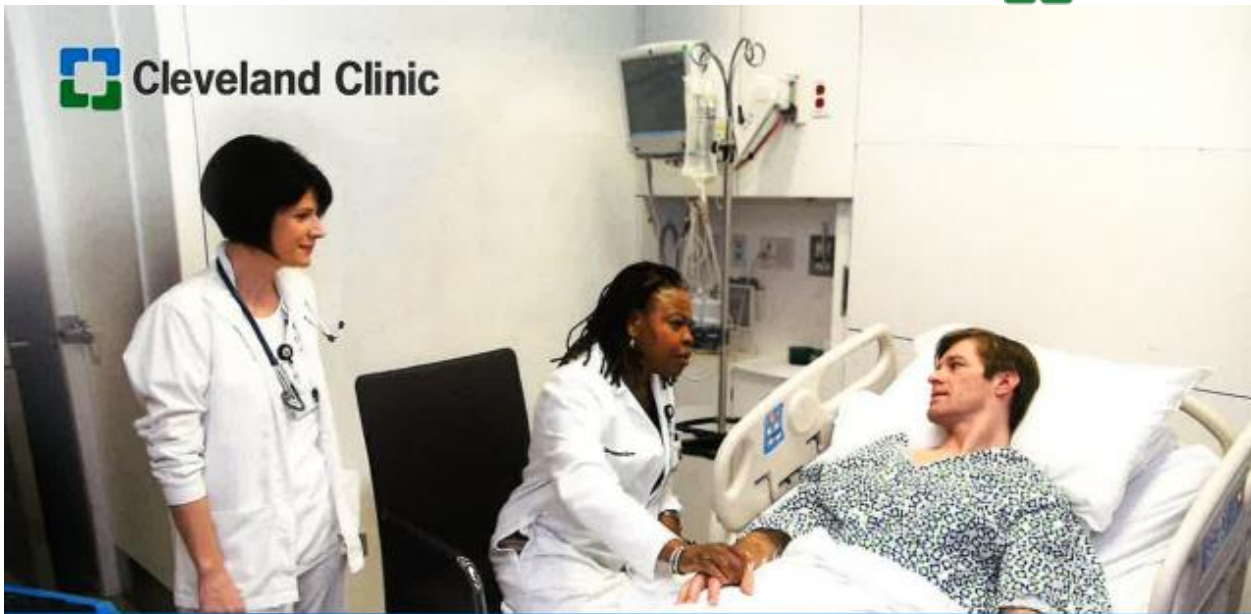
- › What are the potential side effects and purpose of my medications?
- › When should I be seen for follow up appointments?
- › Have I asked someone for a ride home by noon the day of discharge?
- › Do I need bedside pharmacy delivery to fill my medications or stop on the way home at a local pharmacy? If stopping at a pharmacy, don't forget your prescription card.
- › Do I have my:
  - Keys to get into my home?
  - Assistive device (e.g., walker, cane, wheelchair), if needed?
  - Personal items I brought with me (e.g., clothing, denture, glasses, CPAP)? Ask the staff for a bag if needed.

Get directions to  
Cleveland Clinic  
main campus



**Thank you for choosing Cleveland Clinic for your care.**

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PWO 18000 3/22



## Plan of Care Visits

Cleveland Clinic puts you first.

You are encouraged to be involved in planning your own care and deciding the next steps for treatment. We've learned that making sure everyone involved is in the room together improves that process. Plan of Care Visits include providers, nurses and other caregivers. It will be how we talk and work with you.

### WHY WE'RE DOING THIS

Plan of Care Visits ensure that we address all of your care needs. They also will help us improve:

- Your ability to participate in your treatment planning.
- Your health outcomes and keeping you safe.
- Team members' communication and collaboration of your care.

This practice may also help reduce:

- Your time in the hospital.
- The need for you to be readmitted.

### HOW IT WORKS



The provider, nurse and other team members will come to your room for a Plan of Care Visit each day you are in the hospital. We welcome your family and/or support person's involvement.

The provider, nurse and other members work together to set a treatment plan with you and answer any questions you have.

#### During this discussion:



- The provider will update you on your health condition and explain potential next steps, including when you might be able to leave the hospital.
- The nurse and other caregivers will share their observations, including any clinical changes and treatment issues and/or concerns.



The provider then will ask you to share your thoughts about the treatment plan and answer your questions.