



minimally invasive cervical disk replacement and ACDF surgery information

Choll Kim, M.D., Ph.D.

LESS is more... Please follow us on



A Message from Dr. Kim and Team

We welcome you to the Spine Institute of San Diego (SIOSD) family and thank you for choosing us for your upcoming surgical procedure. Our team considers patient satisfaction to be of the utmost importance and we intend to exceed your expectations during this experience. As a leader in minimally invasive spine surgery, we take pride in offering the finest and most advanced spine care available. Our procedures offer the following benefits compared to traditional open spine surgery:

- Less muscle and tissue damage
- Decreased blood loss
- Reduced post-operative infection rate
- Less post-operative pain
- Shorter hospital stays
- Smaller scars
- Faster recovery time
- Quicker return to daily activities

You are the most important member of our team and are encouraged to take an active role in preparing for your surgery and recovery. You can make your surgical outcome safer and more successful if you are active, involved, well informed, and carefully follow your schedule and instructions.

Please take the time to carefully read this entire packet in order to understand your role in ensuring effective preparation and a smooth recovery. The enclosed information explains the logistics of your upcoming operation, and outlines what you need to do before, during, and after surgery. We highly recommend that you use this guide as a step-by-step tool throughout the entire surgery process. We also urge you to share this information your family/friends who will be helping you prior to surgery and throughout your recovery. **Please note:** This packet is just a guide. Dr. Kim or Jennifer (Physician Assistant) may give you different or additional instructions that are specific to your condition or procedure.

If you have any additional questions or concerns, please do not hesitate to contact us. We understand that undergoing a surgical procedure can be a stressful and hectic time for you and your family, and we are here to help you! Once again, thank you for choosing us for your spine care.

Sincerely,

Dr. Choll Kim and Team

Preparing for Surgery

What happens next? Vivian, our surgery scheduler, will request authorization from your insurance company and will contact you as soon as she hears from them; this normally takes about 5-7 business days. In the meantime, please complete your pre-operative (aka pre-op) clearance tests and schedule an appointment with your primary care physician (PCP) as soon as possible.

1. PRE-OPERATIVE TESTING

All surgery patients are required to complete pre-op clearance tests including laboratory tests, radiographic studies, and/or an EKG; these may be performed with your primary care physician (PCP) or at Alvarado Hospital. If you complete the tests at Alvarado Hospital, the results will be faxed to our office and to your PCP. Failure to complete the pre-op requirements during the allotted time period may cause your surgery to be delayed or cancelled.

2. PRE-OPERATIVE APPOINTMENT WITH YOUR PRIMARY CARE PHYSICIAN

Please schedule an appointment with your PCP as soon as possible for a medical history and physical exam. Your PCP will review the results of your pre-op tests and determine if you are healthy enough to undergo spine surgery. Please email Vivian at Vivian@siosd.com when you have scheduled this appointment to give her a better idea of when to expect the results and the medical clearance note. Also, please ask your doctor to fax a copy of your medical clearance note to our office at: (619) 265-7922. If you have other active medical problems, you may need to also obtain clearance from a specialist (cardiologist is the most common).

3. PRE-OPERATIVE APPOINTMENT WITH DR. KIM

As soon as Vivian receives authorization from your insurance company, she will contact you to choose a date for your surgery and to schedule your pre-op appointment with Dr. Kim, which will take place 1-2 weeks prior to surgery. She will also mail and email you a letter outlining these dates, in addition to other important information. We will be mailing you consent forms; please review, sign and bring these with you to your pre-op appointment with Dr. Kim. If there are any parts of the consent that you wish to discuss prior to signing, please contact our office before your pre-op appointment. During this appointment, you will go over your treatment “pathway” (also known as the “road to recovery”) and you will be given instructions for medications to take after surgery. Please email any questions or concerns to Vivian at Vivian@siosd.com ahead of time; we want to ensure that Dr. Kim answers all of your questions and addresses any concerns during this appointment.

4. PRE-ADMISSION APPOINTMENT WITH THE HOSPITAL/ SURGERY CENTER

Vivian will schedule your pre-admission appointment to take place on the same day as your pre-op appointment with Dr. Kim. If there are no appointments available the same day, she will ask you to call the hospital to schedule a pre-admission appointment. During this appointment, you will verify your contact information and insurance. A nurse will also provide you with special antibacterial soap, instructions for the morning of surgery, and answer any questions regarding your hospital stay. Please bring a complete list of your allergies and medications, including the dosage, how often you take it, and the reason for the medication.

Preparing For Surgery

MEDICATIONS

Please email a complete list of your allergies and medications (prescription and non-prescription), including the dosage, how often you take it, and the reason for the medication, to Josh at Josh@siosd.com. Some medications can affect blood clotting and increase the risk of excessive bleeding during and after surgery. Please follow these instructions for your safety and to avoid cancellation of your procedure. You should, however, NOT discontinue the bold medicines without clearance from your cardiologist or hematologist:

30 DAYS PRIOR TO SURGERY, DISCONTINUE: (encouraged, but not required)

- Echniacea
- Ephedra
- Fish oil
- Garlic
- Ginseng
- Ginko
- Kava
- Omega fatty acid supplements
- St. John's Wort
- Valerian

7 DAYS PRIOR TO SURGERY, DISCONTINUE:

- **Aspirin**
- **Coumadin/Warfarin**
- **Effient/ Prasugrel**
- **Pradaxa/ Dabigatran**
- **Aggrenox/Dipyridamole**
- Non-steroidal anti-inflammatory drugs (NSAIDS), such as Mobic/Meloxicam, Motrin/Ibuprofen/Advil, Naproxen/Naprosyn/Aleve, Ketorolac, Voltaren/Diclofenac, Celebrex (Note: Tramadol, and Tylenol/Acetaminophen are ok to take for pain control during this time)

5 DAYS PRIOR TO SURGERY, DISCONTINUE:

- **Plavix/Clopidogrel** (Restart 72 hours after surgery)

2 DAYS PRIOR TO SURGERY, DISCONTINUE:

- **Eliquis/Apixaban** (Restart 72 hours after surgery)
- **Xarelto/Rivaroxaban** (Restart 72 hours after surgery)

ON THE NIGHT BEFORE SURGERY, DO NOT EAT OR DRINK AFTER MIDNIGHT.

This includes gum and candy. It is ok to brush your teeth the morning of surgery and take medicine with a small sip of water, but do not drink a full cup.

ON THE MORNING OF SURGERY, DO NOT TAKE:

- ACE inhibitor blood pressure medicine like Lisinopril, Enalapril, Benazapril (anything that ends in "-pril")
- ARB blood pressure medicine like Losartan/Cozaar, Olmesartan/Benicar, Telmisartan/Micardis, (ends in "-artan")
- Diabetes medicines

FAMILY, FRIEND OR CAREGIVER SUPPORT

A family member, close friend or other designated caregiver will become an important member of your extended team to help you prior to surgery and throughout your recovery. Please introduce these individuals to Dr. Kim and Jennifer, PA. In addition, you and your family/friends are welcome to attend Alvarado Hospital's free spine surgery class, which takes place every Monday at 8 a.m. This class covers basic information about your hospital stay (if at Alvarado) and equipment that will make your everyday activities easier during your recovery. The clinical care coordinator at the hospital will call you to register for this class once your surgery is scheduled (if at Alvarado). Please also make arrangements to have a family member or friend drive you home from the hospital, **stay with you for the first few days at home** and drive you to your post-op appointment with Dr. Kim. If this is a problem, please notify our office.

Pre-Operative Checklist

AS SOON AS POSSIBLE

- ☒ Carefully read this entire packet.
- ☐ Schedule a pre-op appointment with your PCP.
- ☐ Email Vivian (Vivian@siosd.com) when you have scheduled your pre-op appointment with your PCP.
- ☐ Complete your pre-op clearance tests with your PCP or at Alvarado Hospital.
- ☐ Ask your PCP to fax a copy of your medical clearance note to our office at: (619) 265-7922.
- ☐ Arrange for family/ friends to be available to help, especially during the first week after surgery.

1 MONTH PRIOR TO SURGERY

- ☐ Discontinue fish oil, ginkgo biloba, omega fatty acid supplements and garlic supplements.
- ☐ If Vivian has not already done so, call the hospital to schedule a pre-admission appointment.
- ☐ Ask friends/family for equipment (DME), such as walkers, that can be borrowed if desired. (See page 9)
- ☐ Reduce alcohol consumption and try to stop smoking or at least cut back. (See page 12)

7-14 DAYS PRIOR TO SURGERY

- ☐ Discontinue all NSAIDS, aspirin, and the blood thinners outlined on page 3 (Coumadin, Effient, Pradaxa)
- ☐ Begin home preparations. (For example, prepare meals that can be frozen and easily reheated, ask someone to help with child/pet care, etc.)
- ☐ Make arrangements to have someone drive you home from the hospital, stay with you for the first few days at home and drive you to your post-op appointment with Dr. Kim.
- ☐ Email Vivian (Vivian@siosd.com) a complete list of your allergies and medications. (See page 3)
- ☐ Email Vivian (Vivian@siosd.com) any questions or concerns that you want to address during your pre-op appointment with Dr. Kim.
- ☐ Review and sign the consent forms to bring with you to your pre-op appointment with Dr. Kim.
- ☐ Attend the pre-op class at Alvarado Hospital. (Optional)

5 DAYS PRIOR TO SURGERY:

- ☐ Discontinue Plavix if applicable

2 DAYS PRIOR TO SURGERY

- ☐ Discontinue other blood thinners (Xarelto, Eliquis; See page 3 for more information)
- ☐ Pack for hospital stay, and finish home preparations (for example, move frequently used items to easy to reach places, remove cords and rugs to prevent tripping, slipping or falling, run last-minute errands, etc.)

ON THE NIGHT BEFORE SURGERY

- ☐ DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT.

Day of Surgery

BEFORE THE PROCEDURE

- Please arrive to the hospital two hours prior to your scheduled surgery to give the nursing staff sufficient time to prepare you and answer any of your questions.
- Remain NPO (no food and no water) as instructed.
- After checking in, you will be asked to complete any remaining admission or consent forms.
- You will then be escorted to the pre-operative holding area to be prepared for your surgery.
- You will be asked to change into a hospital gown.
- An IV line will be started and an initial set of vital signs will be taken, including your temperature, heart rate, respiratory rate and blood pressure.
- The anesthesiologist will review your anesthesia options and answer any of your questions.
- Dr. Kim will meet with you to answer any last-minute questions and exchange/verify contact information with you and your family and/or friends.

DURING THE PROCEDURE

- When the surgical team is ready, you will be taken to the operating room.
- Before drifting off to sleep, you will be connected to several monitors and given oxygen to breathe; these are routine safety measures.
- The anesthesiologist will manage your vital signs and adjust your anesthetic as needed to ensure your comfort and safety throughout the entire time you are in the operating room.
- The surgical team will prepare you and place drapes to ensure a sterile environment.
- While you are sleeping, a small tube, called a Foley catheter, may be inserted into your bladder to drain urine during your surgery. This catheter is either removed while still in the operating room or may remain in place until you are up and out of bed if you are expected to stay in the hospital overnight. Foley catheters are usually not needed for cervical surgeries unless your surgery is expected to last more than 4 hours.
- A neuromonitoring technician will apply electrodes to your arms and legs to monitor nerves intraoperatively.
- The total time required for surgery differs from patient to patient depending on the complexity of the procedure. Although every effort is made to keep surgeries on schedule, there are occasional delays that prevent us from starting on time.

AFTER THE PROCEDURE

- You will be taken to a recovery area where you will remain for 1-2 hours.
- Dr. Kim will update your friends and/or family by phone or in person in the waiting room.
- You will likely feel a bit groggy from the anesthesia.
- A nurse will monitor your vital signs and check your pain level. You should tell the nurse when it hurts, where it hurts and how much it hurts on a pain scale of 0-10.
- You will then either go home the same day or be taken to the Orthopedic Spine unit to begin the post-operative and rehabilitation phase of your recovery. Guests can see you in your room at this time.

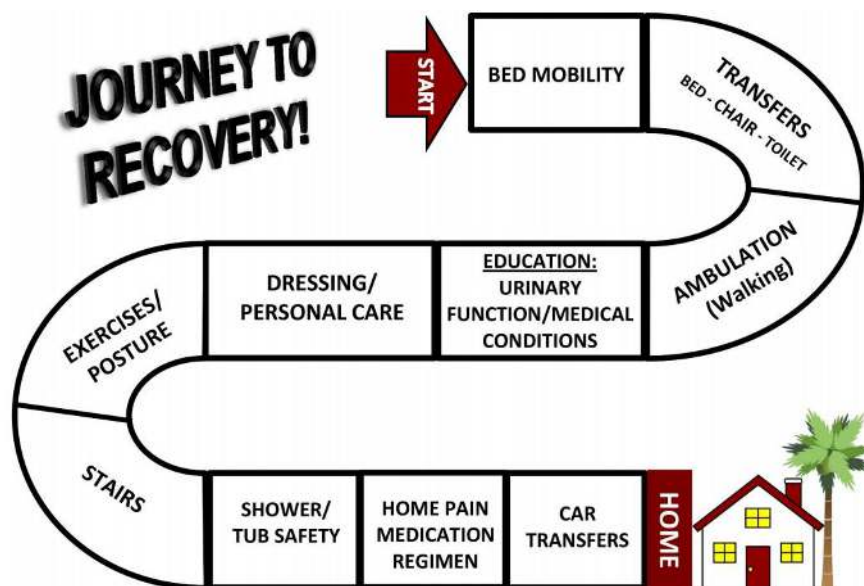
Hospital Stay (if inpatient)

POST-OP

- After your surgery, the nursing and surgery teams will closely monitor you.
- Generally, each day starts with a blood draw for routine monitoring.
- You will be introduced to physical therapists who will work with you individually twice a day until discharge. The two of you will work together to achieve important goals outlined in the treatment “pathway” (also known as the “road to recovery”), which was given to you at your pre-op appointment with Dr. Kim. These goals include regaining independence and mobility, developing a program for walking at home, and understanding proper body mechanics and spine precautions.
- A provider from SIOSD will visit you (also known as “rounds”). This will be Dr. Kim and/or Jennifer on the weekdays, and the “on call” doctor on the weekends.
- NOTE: Most patients go home the same day after surgery for cervical surgeries.

LENGTH OF STAY

Your stay at the hospital will depend on your individual condition, your tolerance to pain medication, and the extent of your surgery. Your individualized treatment “pathway” (also known as the “road to recovery”) will outline your plan of care during your hospital stay. Most patients go straight home but some patients may need to recover in a skilled nursing facility (SNF) about 1-3 days after surgery if their cervical surgery involved two stages (for example, a fusion from the front of the spine with screws in the back).



Patient Name: _____

Date of Surgery: _____

Expected Discharge Date: _____

☐ Home

☐ Home Health: _____

☐ SNF: _____

☐ Acute Rehab: _____

Post-Op Appt Date: _____

Comments: _____

After Surgery

INCISION CARE

Wash your hands before and after caring for your incision. Your incision has medical glue that dries purple and acts like a barrier to protect your incision (like a scab). Let the glue flake off over the next up to 3 weeks; do not pick at the flakes. You may take a quick shower without the dressing. To avoid infection or scarring, do not scratch or scrub the incision.

After 3 days, remove the dressing and leave the incision open to air. Do not apply creams, lotions, or ointments to the incision for the first 6 weeks. Please notify us of any discharge from the wound and email a photo of your wound and dressing if this occurs to jennifer@siosd.com, Choll@siosd.com, or call us. Please include the time of your last dressing change in the email so we can assess the quantity of discharge and recommend appropriate wound care. If you have been prescribed antibiotics, finish the entire prescription as directed.

MANAGING PAIN

- Change positions at least every 30-45 minutes.
- Stay active throughout the day, taking breaks when necessary.
- Take pain medication as directed and at least 30 minutes before planned activity or exercise.
- Use relaxation techniques such as meditation, deep breathing, reading or listening to music.
- Perform simple stretches and gentle range of motion exercises. See our You Tube Video on gentle neck exercises that may be started before physical therapy:

<https://www.youtube.com/watch?v=E5cCa8eP>

MEDICATION

Some pain is to be expected as you recover. The amount and intensity of pain you experience varies by the extent of the surgery and your tolerance to pain medications. Some patients find significant pain relief right after surgery and may only need to take Tylenol/Acetaminophen, while other patients experience a fair amount of residual pain and soreness that persists and slowly improves over time. These patients may need to take prescription pain medications for a few weeks after surgery. Be sure to take your medications as instructed and understand that some medications are only to be taken only as needed. Common side effects of narcotic pain medications include constipation, nausea, drowsiness and dizziness. It is important to wean off all narcotic pain medications and transition to Tylenol/Acetaminophen as soon as possible to prevent narcotic dependence. However, do not take narcotic pain medication and Tylenol/Acetaminophen together because the narcotic medication almost always already has Tylenol/Acetaminophen in it. Do not take more than 3,000 mg of Tylenol/Acetaminophen in one day. Also, do not drink alcohol or drive while you are taking pain medication. Lastly, do not take aspirin-like products or non-steroidal anti-inflammatories (NSAIDS, outlined on pg. 3) for 3 months after a fusion surgery (ACDF), unless Dr. Kim instructs you to do otherwise.

EATING

You may have some discomfort with swallowing for the first few days. Please start by eating soft foods that are easy to swallow and drink plenty of liquids, then slowly advance your diet as tolerated.

After Surgery

WALKING

To regain your strength and speed your recovery, short frequent walks are encouraged. Walking maintains the strength in your back and leg muscles, increases your endurance and relieves stress. Instead of taking one long walk, you should take several short walks throughout the day, and gradually increase the distance and frequency of your walks. Be sure to wear comfortable clothing and low-heeled footwear with traction. You should also develop a regular walking routine and make it a habit for the rest of your life in order to maintain a healthy spine. Make sure to utilize proper body mechanics and use your pain and discomfort as a guide for most activities. If you experience increased pain for more than two hours after an activity, you've done too much too soon. When you feel pain, slow down and pay more attention to your posture and movements.

PRECAUTIONS

There are no specific lifting restrictions. Use your judgement and let pain guide you. When lifting, use proper body mechanics, try to only lift objects that can be easily lifted with one hand. Do not participate in sports or activities that require frequent or strenuous bending, twisting, pushing or pulling (such as gardening, mowing the lawn, etc.) for about 1-2 months after surgery. Listen to your body and be mindful of your limits.

MOBILITY

You may walk around without restriction but be aware that your muscles are weaker after spine surgery and you may be more susceptible to falls. You should change positions throughout the day to help control pain, prevent blood clots and improve circulation. It is helpful to sit for a while, lie down for a while and take

short walks periodically throughout the day. You should gradually increase your activity level and rest as needed. You should also perform gentle stretches and exercises on a consistent basis in order to increase flexibility, strengthen muscles and maintain an active lifestyle. Use common sense in regard to activity. Do not push yourself to the point of fatigue or pain – moderation is the key.

SLEEPING

You may sleep in any position you find comfortable. You should try sleeping on your back with a pillow under your knees, or on your side with a pillow between your knees and a pillow behind your body slightly tucked under your back and hips. To maintain good posture, avoid using more than two pillows under your head and try to keep your spine straight.

NUTRITION

A healthy, well-balanced diet will help strengthen your immune system, give you energy, increase your tolerance to activity, and help your incision heal. Be sure to increase fluid intake to six, 8 oz. glasses of water each day, and eat fresh fruits and vegetables high in fiber. This will help the common constipation caused by pain medication and inactivity. You should also take the medications prescribed before surgery at your pre-operative visit: 1) take the stool softener Colace (or docusate sodium) daily to stay ahead of the constipation and 2) take the gentle laxative, Dulcolax, for one week, or until you have your first bowel movement (then as needed but do not take laxatives for more than one week at a time).

After Surgery

HOME HEALTH OR SKILLED NURSING

It is always our goal that patients return home after spine surgery. Though, in some cases, patients may need help beyond what a family member or friend can provide. These patients may benefit from home health services including nursing care, physical therapy, and occupational therapy, which are brought to the patient's home for a short period of time. During each visit, a nurse will check and record vital signs, examine the incision, assist with dressing changes, and teach the patient or the caregiver to do the same. The nurse will also go over medications, nutrition, fluid intake, and the regularity of bowel movements. In other cases, some patients may benefit from a short stay at a skilled nursing facility (SNF), especially patients who need help walking, caring for themselves, or do not have someone at home to assist them. Dr. Kim will determine if you may benefit from either of these services and they will be arranged for you prior to surgery.

SHOWERING/BATHING

You may shower with the dressing. The dressing should be removed 3 days after your surgery and you may continue to shower with the incision uncovered. Let the soapy water run over the incision freely, but afterwards, make sure to dab it dry with a towel. It is important that you do not submerge the incision site in water, including bathtubs, pools and hot tubs, for at least 6 weeks after surgery.

GOLFING

Around 1-2 months after surgery, you can begin chipping and putting. If chipping and putting are not painful, you may move to the driving range. Start with short-irons, move to mid-irons, and then to long-irons and clubs, as long as you are not experiencing pain at each level.

PHYSICAL THERAPY

Your motivation and participation in physical therapy are essential elements of your recovery; you must play an active role in every step of your rehabilitation. You will receive a prescription for physical therapy at your first or second post-operative appointment with Dr. Kim. Outpatient physical therapy usually starts 2-4 weeks after surgery and continues for about 6 weeks. The goal is to establish and optimize an individualized home/gym exercise program that can be continued on a consistent basis. This program will focus on improving functional mobility, core/ neck strengthening, non-impact aerobic exercises, coordination and balance, proper body mechanics, and overall conditioning. As your physical therapy sessions conclude, the transition to your home/gym program should be seamless. Your dedication to physical therapy and exercise will set the pace for your recovery.

DURABLE MEDICAL EQUIPMENT (DME)

If Dr. Kim orders a brace for you, it will either be given to you at your pre-op appointment with Dr. Kim or a representative will deliver it to your home and fit it for you. The brace is intended to decrease pain and improve comfort. It is not a requirement. The brace is optional and should only be used for about 4 weeks as needed for comfort. Do not wear the brace in bed. If Dr. Kim orders a walker, cane, toilet seat or commode, the hospital case manager or home health coordinator will order it for you at the time of discharge from the hospital. In some cases, patients do not need any equipment.

After Surgery

SEXUAL ACTIVITY

Most patients wait to resume intercourse for about 2-4 weeks. You should situate yourself in a position that supports and takes pressure off the neck region. The bottom or missionary position is usually the safest and most comfortable; however, use your pain and discomfort as a guide.

DRIVING

Driving will depend on the extent of your surgery and your recovery progress. You must be able to comfortably rotate your neck to look over your shoulders and your pain must be managed so that you no longer need any narcotic pain medication, such as Percocet, Oxycodone, Vicodin, etc. These medications can affect your ability to drive. Generally, many patients can start driving after 2-4 weeks, but you should consult Dr. Kim. Try to limit initial driving to short, local distances. Also, be sure to move the seat all the way back to give yourself plenty of room while you are getting in and out of the car.

RETURN TO WORK

This will depend on the extent of your surgery, your recovery process and the specific requirements of your job. If you have a relatively sedentary job and can comfortably sit, you may resume working around 2-4 weeks after surgery. If your job is physically demanding, and you are able to perform controlled exercises and lift weights, you may return to work around 6-12 weeks after surgery; however, more time may be needed. Dr. Kim recommends returning to work on a part-time basis with limited duties before returning to full-time work without any restrictions. If you need to take time off work, please contact your employer for FMLA forms. For more information about FMLA, visit: www.dol.gov/whd/fmla/.

SWIMMING

You may start a pool exercise program, go swimming, take baths and soak in hot tubs around 6 weeks after surgery. Please be sure to wait until your incision has completely healed before submerging it in water. If you are unsure, please email or text a picture of your incision to our office or Dr. Kim.

WHEN TO CALL OUR OFFICE

If you experience any of the following symptoms:

- Persistent, severe or uncontrollable pain
- Worsening weakness or numbness in your arms
- Incisional redness, drainage, or increased swelling
- Difficulty breathing
- Problems controlling your bladder or bowel
- No bowel movement for 2-3 days

POST-OPERATIVE APPOINTMENTS

You will also follow-up with Dr. Kim or Jennifer, PA periodically throughout the next year to ensure that you are continuing to heal appropriately. Your first postop appointment with Dr. Kim will be 1-2 weeks after surgery, before which time you will need your first set of neck x-rays. During this appointment, Dr. Kim will discuss your medication regimen, examine your incision, and assess your muscle and nerve function. You will likely receive a prescription to start physical therapy, a prescription for repeat x-rays and you will schedule your future post-op appointments. X-rays will be ordered again at 6 weeks, 3 months, 6 months and 1 year after surgery. Patients with active medical problems should schedule a follow-up appointment with their PCP about 4 weeks after surgery.

Recovery Guidelines

Following cervical surgery

1-2 WEEKS AFTER SURGERY

- Take several short walks and perform posture exercises throughout the day.
- Drink six, 8 oz. glasses of water per day, and eat fresh fruits and vegetables high in fiber.
- Do not participate in sports or activities that require frequent or strenuous bending, twisting, pushing or pulling.
- Limit initial car rides to short, local distances (around 1 hour or less).

3-4 WEEKS AFTER SURGERY

- Start physical therapy.
- Try to stop wearing your brace, if applicable.
- You can resume intercourse, as tolerated.
- Wean off all narcotic pain medications and transition to Tylenol/Acetaminophen as needed.
- If you are no longer taking any narcotic pain medication, you may start driving.
- You may go on longer car rides and take short, local flights.
- If you have a relatively sedentary job, you may likely return to work. Let pain be your guide for this.

5-6 WEEKS AFTER SURGERY

- Do not lift more than 25-30 pounds.
- You may submerge your incision in water, such as pools, bathtubs and hot tubs.
- You may perform light chores, such as cooking, dusting, sweeping or folding laundry.
- You may participate in non-contact sports and activities such as yoga, hiking or swimming.

3 MONTHS AFTER SURGERY

- Gradually increase activities as tolerated by pain.
- You may perform household chores, such as gardening and mowing the lawn, as tolerated by pain.
- You may participate in more non-contact sports and activities such as running, golfing or tennis.
- You may start taking frequent or long distant flights.
- If your job is physically demanding, you may likely return to work.

Frequently Asked Questions

Q: What if I'm not ready to proceed with surgery?

A: You should never feel pressured to proceed with surgery. If you are unsure, we encourage you to review our educational materials, get a second opinion, speak to one or more of our previous surgery patients, or talk with your family and friends.

Q: What can I do before my surgery to help with my recovery? (See page 4 for more information)

A: Dr. Kim recommends maintaining a healthy diet and getting a sufficient amount of sleep each night to strengthen your immune system. You should continue to perform simple stretches and exercises that increase flexibility and strengthen muscles. Keeping your muscles toned and endurance high will help you to recover faster after surgery. Therefore, stay as active as possible before your surgery and continue your daily activities. Also, try to reduce alcohol consumption and try to stop smoking, or cut back on the number of cigarettes you smoke each day.

Q: Why should I quit smoking prior to surgery?

A: You should try to stop smoking or cut back on the number of cigarettes you smoke each day, in order to help your bones fuse, wound heal, and minimize the risk of infection. There is a higher chance your fusion will not heal if you continue to smoke because smoking disrupts the normal function of the body's system, decreases blood flow to healing tissues, limits bone growth and accelerates arthritic changes. Stopping even for a short period of time will be helpful.

Q: Will I see Dr. Kim or Jennifer, PA if I stay overnight in the hospital? (See page 6 for more information)

A: Yes! Dr. Kim or Jennifer, PA will visit you (also known as "rounds") on the weekdays, while an "on call" provider from SIOSD will visit you on the weekends.

Q: When will I come back to see Dr. Kim or Jennifer, PA? (See page 10 for more information)

A: You will follow-up with Dr. Kim or Jennifer, PA periodically throughout the next year to ensure that you are continuing to heal appropriately. Your first post-op appointment is normally 1-2 weeks after surgery.

Q: When will I be able to return to my normal activities? (See page 11 for more information)

A: Dr. Kim utilizes minimally invasive techniques during spine surgery, which results in a smaller incision and less muscle and tissue damage. Therefore, you can expect to experience less post-operative pain, shorter hospital stays, a faster recovery time, and an earlier return to work and daily activities than is associated with traditional open back surgery. Nonetheless, it is still surgery. While most procedures successfully relieve pain and improve function, recovery does take time. Returning to your normal activities will be a slow process. Each surgery is different, and the healing and recovery time will vary.

Frequently Asked Questions

Q: When will I be able to travel? (See page 11 for more information)

A: You may travel as soon as you feel comfortable, but Dr. Kim recommends avoiding long distance travel for at least 1-2 weeks. During these first few weeks, try to only take short car rides that are 1 hour or less. If you need to take a long care ride, you should stop at least once an hour to stretch and walk around.

Q: Will my spinal implant(s) set off metal detectors?

A: Most implants are made of titanium and will not set off metal detectors. If for some reason an alarm does go off, you should inform security of your spinal implant(s) and consider showing them your surgical scar. In some situations, a security guard may wave a wand along your neck to confirm your instrumentation.

Q: Why must I take antibiotics for dental work or other surgical procedures?

A: Dental work or other surgeries increases the chance of infection. If an infection spreads to your spinal instrumentation, it must be surgically removed and replaced. Therefore, taking antibiotics reduces the risks of infecting the new hardware. Please inform your dentist and other physicians of your spine surgery. We recommend oral antibiotics prior to invasive dental work for the first year after surgery. Prophylactic antibiotics are not needed after the first year.