

Postoperative Instructions and Recovery

Lateral Lumbar Interbody Fusion (LLIF)

Anterior Lumbar Interbody Fusion (ALIF)

This guide offers general milestones; however, your surgeon may adjust instructions based on your specific condition. Always follow the instructions given by your healthcare team.

Immediate Post-Op (0–2 Weeks)

1. Incision and Wound Care

- Keep your incision and dressings clean and dry.
- **Do not remove your dressing.** It will be removed at your 2 week visit by your healthcare provider.
- Your dressing is **water resistant (not water proof!)** It is ok to shower or sponge bath while letting water gently run across dressings or incision; but **no bathing, soaking, or swimming.**
- If your dressing is to fall off, replace it with band-aids and change daily while gently cleaning incision. Pat to dry, do not rub.
- If you have surgical glue, do not peel/pick from skin. It will dissolve with time.
- Check daily for redness, swelling, or drainage.
- Sutures will likely be removed at your 2 week office visit.

2. Bathing

- Typically, you may shower **24–72 hours** after surgery
- Gently let water run over the dressing/incision—no scrubbing.
- **No baths, hot tubs, or swimming** during this period to avoid soaking the wound.

3. Pain Management

- Take prescribed pain medications **only as needed** per instructions.
- Use ice packs to reduce pain and swelling.
- **Refrain from using Non Steroid Anti-Inflammatory Drugs (NSAIDs) for 3 months.** Examples include:
 - i. Ibuprofen (Advil, Motrin IB)
 - ii. Naproxen (Aleve, Anaprox DS)
 - iii. Meloxicam (Mobic)
 - iv. Diclofenac
 - v. Indomethacin
 - vi. Etc.
- It is OK to use Tylenol (acetaminophen) per bottle instructions.
- Narcotic medications you may be taking for pain control can cause constipation. You may take a stool softener to avoid this. Keep bowels

regular by drinking fluids, adding fiber to diet, and being active (getting out of bed, sitting up in a chair, and going for a walk).

- Restart home medications as directed by primary care.

4. **Activity**

- **Back brace (if prescribed):** Wear at all times except showering, eating, and sleeping.
- **Lifting Limit:** No lifting heavier than **10 pounds** (about a gallon of milk).
- **Avoid lifting, bending, twisting, or sudden jerky movements.**
- Get up and walk short distances multiple times a day to prevent blood clots and promote circulation.
- If you were provided a brace, wear it at all times except showering and sleeping.

5. **Work**

- Do not return to work during this period.

6. **Driving**

- Refrain from driving or operating heavy machinery at this time.

7. **Concerning Symptoms**

Call the office if:

- Fever over 101.5°F or Chills
- Worsening pain, numbness, or weakness in your back, legs, or feet.
- Signs of infection (redness, swelling, foul odor, purulence).

Present to the Emergency Department if:

- Difficulty breathing / Shortness of breath
- Chest pain
- Loss of bladder or bowel control.

**We will see you back in the office 2 weeks after surgery for a wound check.
Please call the office to make or confirm this appointment.**

Early Recovery (2–6 Weeks)

1. **Incision and Wound Care**

- Continue to observe the incision for any signs of infection.
- You may choose to keep incisions uncovered or continue to use bandages, replacing them daily.

- Keep incision clean and dry. It is ok to shower or sponge bath while letting water gently run across incision; but **no scrubbing, bathing, soaking, or swimming**.
 - **Do not use any over the counter ointment or creams** on incision
2. **Bathing**
 - Continue to **avoid baths, hot tubs, and swimming** until 6 weeks
 3. **Pain Management**
 - You may start tapering off stronger pain medications if pain levels allow.
 - Continue to avoid **NSAIDs** for 3 months.
 - It is OK to continue Tylenol as needed (follow bottle instructions).
 4. **Activity**
 - **Walking:** Gradually increase your walking distance. Aim for multiple short walks daily, increasing length each week.
 - **Lifting:** You may start to **slowly** progressing your lifting weight from 10 pounds, working up to **20 pounds** by the **6th week**
 - **Avoid bending, twisting, or sudden jerky movements.**
 5. **Physical Therapy:** if prescribed, will start around week 4 to improve strength, posture, and range of motion
 6. **Work**
 - If your occupation requires **minimal** physical exertion, you may now return if you feel comfortable.
 7. **Driving**
 - You may return to driving if you are no longer taking narcotic pain medications

**We will see you back in the office 6 weeks after surgery for evaluation.
Please call the office to make or confirm this appointment.**

Mid-Recovery (6–12 Weeks)

1. **Incision and Wound Care**
 - Your incisions should be well on their way to fully healed at this point.
 - You may keep incisions uncovered.

- You may start using over-the-counter ointment or creams at **8 weeks**.

2. Bathing

- You may begin to use baths, hot tubs, and return to swimming

3. Pain Management

- You should be relying less on prescription pain medications.
- Over-the-counter medications (e.g., Tylenol) should be sufficient.
- **Continue to avoid Non Steroid Anti-Inflammatory Drugs (NSAIDS)**

4. Activity

- **Lifting:** You may **slowly** increase your lifting limit from 20 pounds, working up to **50 pounds by week 12**.
- Gradually resume light household activities and chores
- Incorporate gentle home exercises focused on core strength, flexibility, and posture.
- Avoid high impact activities like running. Instead utilize a stationary bike or an elliptical machine

5. Work

- If your occupation requires **light physical exertion**, you may now return if you feel comfortable.
- Jobs requiring physical labor may require more time off or modified duties.

**We will see you back in the office 3 months after surgery for evalutaion.
Please call the office to make or confirm this appointment.**

Advanced Recovery (3-6 months)

1. Activity

- You should be able to handle most daily activities with caution.
- You may begin progressing **slowly to heavier lifting** in stages. However, **always use proper body mechanics** (bending at the knees, keeping the back straight).
- Physical therapy or a structured exercise program may now focus on core stabilization and rebuilding muscle strength.
- You may slowly begin to return to higher-impact exercises like running
- Continual improvement in flexibility, strength, and endurance is expected.

2. Work

- Those with labor intensive occupations can now return to near-normal work activities by 3–4 months post-op, depending on the demands of the job and how well the fusion is progressing.

3. Lifestyle Modifications

- Maintain a healthy weight and stay active to protect your spine.
- Practice good posture and consider using ergonomic furniture at work and home.

We will see you back in the office 6 months after surgery
Please call the office to make or confirm this appointment.

Long-Term Maintenance (6 Months and Beyond)

1. Complete Spinal Fusion

- Spinal fusion typically solidifies between **6–12 months** after surgery, but every patient heals differently.

2. Ongoing Exercise

- A regular exercise program that includes **core strengthening, flexibility, and aerobic exercises** will help maintain back health.
- Continue to use safe body mechanics (lifting correctly, minimizing high-impact stress on the spine).

3. Annual Check-Ups

- You will be scheduled for yearly follow-ups to ensure the fusion remains stable.

4. Lifestyle Modifications

- Continue to focus on a healthy diet and nutrition

We will see you back in the office 12 months after surgery
Please call the office to make or confirm this appointment.

Key Reminders Throughout Recovery

- **No Smoking:** Smoking hinders wound and bone healing while also delaying fusion.
- **Limit Alcohol Consumption:** Alcohol has demonstrated risks of increased post-op complications, including infection.
- **Proper Nutrition:** High-quality protein, calcium, vitamin D, and other nutrients are essential for bone healing.
- **Hydration & Rest:** Staying hydrated and getting adequate sleep support your body's healing process.
- **Follow Instructions:** Always adhere to your surgeon's specific guidelines and attend all follow-up appointments.
- **Concerning Signs:** Do not hesitate to contact us concerning signs or symptoms.

Contact Information

Dr. Andrew Meyers
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Call the office if:

- Fever over 101.5°F or Chills
- Worsening pain, numbness, or weakness in your back, legs, or feet.
- Signs of infection (redness, swelling, foul odor, purulence)

Present to Emergency Department if:

- Difficulty breathing / Shortness of breath
- Chest pain
- Loss of bladder or bowel control.

Disclaimer: This timeline is a general guide. Individual recovery can vary based on factors like age, overall health, and the extent of surgery. Always follow the personalized instructions provided by your surgeon and healthcare team.

Patient Signature: _____ **Date:** _____

Surgeon Signature: _____ **Date:** _____