

Transforaminal Lumbar Interbody Fusion

Understanding Your Risks

This document outlines the potential complications associated with **transforaminal lumbar interbody fusion (TLIF)**. This is a spine surgery performed through an incision in the lower back. During the procedure, part of the lamina, facet joint, and disc material are removed to decompress the spinal nerves. An interbody spacer (cage) filled with bone graft is placed into the disc space from one side of the spine, and screws and rods are placed to stabilize the spine and promote fusion.

The usual purpose of surgery is to **relieve nerve compression, improve back and leg pain, restore spinal stability and alignment, and promote solid fusion** in patients with conditions such as degenerative disc disease, spinal stenosis, spondylolisthesis, recurrent disc herniation, deformity, or spinal instability.

Risks:

- **Persistent or recurrent back or leg pain**
- **Incomplete relief of symptoms**
- **Neurologic complications** (new or worsened numbness, weakness, nerve injury, or cauda equina injury)
- **Dural tear with cerebrospinal fluid leak**
- **Wound infection** (superficial or deep)
- **Bleeding or hematoma formation**
- **Pseudoarthrosis** (nonunion or failure of fusion)

- **Hardware complications** (screw or rod loosening, breakage, malposition, or cage migration/subsidence)
- **Graft-related complications**
- **Adjacent segment degeneration or disease**
- **Epidural fibrosis or scar tissue formation**
- **All-cause reoperation**
- **Medical complications (myocardial infarction, stroke, pneumonia, pulmonary embolism, deep vein thrombosis)**
- **Death** (extremely rare)

Risk Factors for Increased Complications:

- **Higher number of lumbar levels fused**
- **Revision or prior lumbar spine surgery**
- **Advanced age and higher ASA class**
- **Medical comorbidities (diabetes, tobacco use, obesity, osteoporosis)**

Patient Acknowledgment:

By signing below, you acknowledge understanding of the above risks associated with transforaminal lumbar interbody fusion with pedicle screw fixation and all questions have been answered to your satisfaction.

Signature: _____ **Date:** _____

Patient Name: _____ **DOB:** _____

