

Fort Walton Beach

1034 Mar Walt Drive Fort Walton Beach, FL 32547

Destin

36474C Emerald Coast Parkway, Suite 3101 Destin, FL 32541

Crestview

5300 South Ferdon Boulevard Crestview, FL 32536

P 850-863-2153 F 850-809-4312 www.orthogssociates.net

DR. LANDRY ALIF/XLIF/SI JOINT FUSION INSTRUCTIONS/INFORMATION

The Surgery Center at Sacred Heart Medical Park

36500 Emerald Coast Parkway Destin, FL 32541 (850) 269-0301

Fort Walton Beach Medical Center

1000 Mar Walt Drive Fort Walton Bch, FL 32547 (850) 862-1111 Sacred Heart Hospital on the Emerald Coast

7800 Emerald Coast Pkwy Destin, FL 32550 (850) 278-3000

Surgical Specialists, ASC

1034 Mar Walton Drive Fort Walton Bch, FL 32547 (850) 315-9385

- 1. NO SMOKING! Numerous well-designed studies show that nicotine makes it harder for bones to heal and prevents successful fusion from occurring. Nicotine causes blood vessels to tighten and directly interferes with the bone healing process. For this reason, all forms of nicotine use must be stopped this includes cigarettes, e-cigarettes, chewing tobacco, nicotine patches, and nicotine gum. The problem is nicotine itself. If you smoke or use nicotine products, quitting right away is one of the most important steps you can take to avoid complications and improve your recovery. Some medications, such as Chantix or Wellbutrin, may help with quitting, but these should be discussed with your doctor to see if they are right for you.
- 2. **Blood Thinners.** Blood thinner medications (anti-coagulants) should be stopped 7-10 days before surgery. Examples of anti-coagulants include Plavix, Lovenox, Heparin, Xarelto, Pradaxa, Aspirin, etc. Prior to discontinuing these medications, please speak with your primary care physician, or cardiologist to ensure it is safe to do so. You can restart the prescribed anti-coagulant medications 3 days after the surgery.
- 3. Anti-inflammatories. You should not take any non-steroidal anti-inflammatory medications (NSAIDs) 10 days prior to surgery and during the first 12 months following surgery. These medications can act as blood thinners and can make the case significantly more difficult to perform if they have been taken within a week of surgery. NSAIDs include Motrin, Ibuprofen, Advil, Aleve, Naproxen, Naprosyn, Celebrex, Vioxx, Etodolac, Lodine, Diclofenac, Meloxicam and Mobic. Well-designed studies have shown that these medications can decrease and even prevent bone healing and bony fusions from occurring. Other medications such as steroids should be avoided, if possible, but should only be discontinued at the discretion of your primary care physician.



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- 4. **All Other Medications.** All other medications should be discontinued the day of surgery, except beta blockers. These medications help protect the heart after surgery, as shown in research studies. Beta blockers usually end in 'lol', such as Metoprolol or Labetalol.
- 5. **Vitamins and Herbal Supplements.** All vitamins and herbal supplements (fish oil, St. John's wort, Multivitamins, etc.) should be discontinued at least 7-10 days prior to surgery and should not be restarted until after the first postoperative visit.
- 6. **No Bending or Heavy Lifting.** Do not bend or lift anything heavier than 10 pounds for 12 weeks after surgery.
- 7. **No Twisting.** Do not twist at the waist for 12 weeks after surgery.
- 8. **The Postoperative Dressing**. The dressing that was applied at the time of the surgery is impregnated with silver and has anti-microbial properties. After 2 weeks, replace with a new dressing and keep it on until the first post-operative appointment. Underneath the dressing will be surgical glue. **Do not remove the surgical glue** let this naturally fall off.
- 9. **Showers.** It is okay to take showers beginning on the day after surgery; however, do not take baths or submerge the wound(s). The incision should not be vigorously scrubbed within the first 3 weeks. The incision area can be washed with a clean, soapy cloth before washing the rest of the body. Pat-dry the surgical wound with a clean, dry towel before drying off the rest of the body.
- 10. **Walking**. By three weeks after surgery, you should walk at least 1 mile each day. You can do this all at once or break it into smaller walks throughout the day. Walking helps lower the risk of blood clots (Deep Venous Thrombosis (DVT) and Venous Thromboembolism) and improves your overall recovery and fitness.
- 11. Contact Orthopaedic Associates Immediately at (850) 863-2153, if the following occurs:
 - A persistent fever develops and is greater than 101.5.
 - Uncontrolled pain despite taking pain medications as instructed.
 - Gross purulence (pus) drainage from the wound.
- 12. **Follow-up with Dr. Landry.** You should follow up with Dr. Landry approximately 3 weeks after your surgery. The purpose of this visit is to evaluate the wound, evaluate your overall level of pain, and taper the pain medication. Pain medications and muscle relaxers are to be taken only as needed.
- 13. **Postoperative Visits.** You will be seen, postoperatively, at the following at the following times: 3 weeks, 8 weeks, 3 months, 6 months, and 1 year.



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- 14. **Physical Therapy.** Muscular weakness or neurological symptoms often require time to improve. If there is minimal improvement or significant stiffness present by eight weeks postoperatively, we will consider initiating physical therapy. For patients whose jobs involve moderate to heavy lifting, we typically allow return to work before the eightweek mark. Alternatively, if work cannot resume early, we will begin physical therapy at eight weeks with an emphasis on a work-hardening program, aiming for a return to full duties at approximately three months postoperatively.
- 15. **Be Patient.** The primary goal of the surgery is to prevent your condition from getting worse. It is common for patients to notice significant improvement, sometimes immediately after surgery, but full symptom relief can take 9-12 months.
- 16. After Surgery, if you run low on pain medications, you must allow 72 hours for a refill. DO NOT wait until you are out of medication to call us. The prescription request line is (850) 315-9241.
- 17. If you have an illness prior to surgery (within the week of surgery) please notify our office, as your surgery may need to be rescheduled.
- 18. If an outpatient procedure is scheduled, please arrange to have someone with you at the Surgery Center, drive you home and stay with you for 24 hours following the surgery. You must have a ride to and from the procedure by a responsible adult, friend, or family member. You CANNOT use taxis, a ridesharing service (Uber, Lyft, etc.), or public transportation after surgery. We will not accept the liability, and your case will be cancelled.
- 19. For urgent issues after hours or on weekends, please call **(850) 863-2153** and the answering service will contact the physician on-call. **Do not leave a message**. Wait for the prompts, and you will be connected to the answering service.
- 20. Please bring your insurance information, a list of all prescription medications, and a picture ID with you the day of surgery.
- 21. Cancelling or failing to attend any of the pre-surgery appointments coordinated for you may result in the cancellation of your scheduled surgery.

DATE OF SURGERY:	
FACILITY:	
ARRIVAL TIME:	-
() THE FACILITY WILL CALL 24-48 HOURS PRIOR TO	SURGHERY WITH YOUR ARRIVAL TIME