



COASTAL ORTHOPEDICS

Dr. Eric Sundberg

Lumbar Laminectomy/Microdiscectomy

941-792-1404 X3234

# What To Expect

- You will be contacted by Dr. Sundberg's assistant to help you through the surgical process. (Contact number 941-792-1404 X 3234)
- You will be required to obtain clearances based on your medical history. Please make Dr. Sundberg's team aware of any specialists that you see.
- You will have a preop appointment with Dr. Sundberg's Physician Assistant who will review your procedure with you and answer any questions you may have.
- You will have a preop appointment with the surgical facility.
- If your surgery is at Coastal Orthopedics outpatient Surgery Center, the surgical nurse will contact you by phone.
- If your procedure is at the hospital, you will have an appointment at the hospital.
- The facility will give you instructions in regards to preop testing requirements for your procedure. This MAY include bloodwork, chest X-ray and EKG. **Please make the facility aware if you have had the COVID vaccine.**
- Please have a list of all your medications with the dosages and how often you take them.
- You will need to stop medications that can thin your blood, so include all over the counter and herbal medications in your list.

# What Does Surgery Entail?

- You will meet with Dr. Sundberg and the Anesthesiologist in preop area. Dr. Sundberg will answer any questions you may have and mark your back.
- Your procedure is done under a general anesthetic. This means that once you are asleep, a tube will be placed to protect your airway.
- You may or may not have a foley catheter placed after you are asleep to drain your urine. This is determined by the length of your procedure.

# What Does Surgery Entail? Cont.

- Dr. Sundberg will make an incision on your lower back. The size of the incision is determined by how many levels he is decompressing.
- Dr. Sundberg and his physician assistant will dissect down to the spine and remove the part of the lamina required to adequately decompress the central canal and the space for the nerves to improve leg symptoms.
- The PA will then close the incision in multiple layers and put dermabond (a skin glue) on the skin.
- You will have a waterproof dressing placed over your incision.

# What to Expect Postoperatively

- You may shower 3 days after surgery if you do not have a drain. You may shower 2 days after your drain is removed.
- You will see the PA 2 weeks after surgery.
- No tub bathing, pool, hot tub or ocean until your incision is pink with no scabs. The PA will assess your incision.
- If you develop a fever (greater than 100.4 F) or drainage/redness of your incision, you need to contact Dr. Sundberg's assistant at 941-792-1404 x3234
- Restrictions include: **B**end at the knees, not at the waist. No **L**ifting greater than 5 lbs. No extreme **T**wisting. (**BLT** restrictions)
- You may or may not have a drain. You will be given instructions on how to care for the drain if you are going home the same day.

# Once You are Home

- Ice your back 20 min on/20 min off throughout the day. This will help with swelling and pain.
- You will be given pain medication and a stool softener postop. Narcotic medication can cause constipation. We recommend getting over the counter ducolax suppositories to soften the stool at the end of your GI tract.
- Pain medications will take 48 hours to refill. Both Dr. Sundberg and his PA are in surgery multiple days per week and will be unable to refill medications on a daily basis. So please be aware of how many pills you have left.
- Do not take over the counter anti-inflammatories such as Advil, Aleve, or ibuprofen for at least 3 days, as these can cause increased bleeding. Tylenol is ok to take.
- You may have dental work 6 weeks after surgery.
- Contact Dr. Sundberg's assistant if you would like Home health Care at your home after surgery. A nurse and a physical therapist will visit your home 2 days per week.

# Risk of Surgery

- Bleeding
- Postop infection
- Recurrent disc herniation
- Nerve injury
- General anesthesia
- Death and stroke are extremely rare

# What to expect postoperatively

- Dr. Sundberg wants his patients to be up and walking the same day as surgery. This helps to aid in quicker healing and general health of patients. Please walk 10-20 mins twice per day.



# Things to Keep in Mind

- Surgical swelling takes about 6 weeks to improve, so increased activity prior to 6 weeks can increase swelling and pain.
- Leg pain can take 6 weeks or longer to improve because the nerve is irritated from being pinched.
- Numbness can take much longer to improve. That part of the nerve heals in very small increments and we do not consider anything permanent in regards to numbness until 1 year from the date of surgery.
- You will follow-up in the office at 2 weeks, 6 weeks, then as needed. You will see the PA for the bulk of your postop appointments.