Your child will be able to go home when he is able to:

- Eat a regular diet
- Control pain with medicines taken by mouth
- Walk without help
- Tell the nurse or therapist what things he can and cannot do at home

Most patients are discharged 2 to 3 days after surgery.

We invite you to learn more about your child’s care for a spinal fusion. This Plan for Recovery can give you general information about what to expect during your child’s hospital stay. The exact course and treatment will be based on your child’s needs. If you have questions or concerns about your child’s care, ask your child’s doctor or our staff questions at any time.

The Day of the Surgery

When your child arrives at the hospital, our nurses will:

- Check your child’s vital signs (blood pressure, pulse, breathing rate and temperature).
- Use the CHG cloths to wash the back
- Take your child to the operating room for surgery

Developed through the efforts of Children's Healthcare of Atlanta and physicians on Children’s medical staff in the interest of advancing pediatric healthcare. This is a general guideline and does not represent a professional care standard governing providers’ obligation to patients. Ultimately the patient’s physician must determine the most appropriate care.

Confidential privileged quality peer review material pursuant to GPR statute Georgia Code Sections 31-7-130 to 133, the HCQI Act of 1986 and the Patient Safety and Quality Improvement Act of 2005. This product shall not be duplicated or distributed without written permission from Patient Safety or Risk Management.

©2014 Children's Healthcare of Atlanta Inc. All rights reserved.
## Right after surgery

<table>
<thead>
<tr>
<th>Diet</th>
<th>• May be allowed ice chips and clear liquids as tolerated</th>
</tr>
</thead>
</table>
| Activity | • Use the incentive spirometer about 10 times an hour while awake to help keep the lungs clear  
• Make a log-roll turn about every 2 hours around the clock with help from staff |
| Medicines | • Through the Intravenous (IV) line:  
  – Fluids  
  – Antibiotics to help prevent infections for about 24 hours  
  – Pain medicine with a patient-controlled analgesia (PCA) pump  
  – Medicine for an upset stomach, if needed |
| Pain Management  
Pain management goals for Day of Surgery:  
Rest  
Sleep  
Participate in turning in bed  
Deep Breathe | **Pain Management Plan today:**  
• Valium through the IV line for tight muscles (spasticity) as needed  
• Pain medicine with a patient-controlled analgesia (PCA) pump  
• IV pain medicine if the PCA pump does not control pain well enough  
• Position for comfort  
• Support relaxation techniques  
**Patient Plan:**  
• Tell your nurse if your pain is not relieved or you have muscle spasms  
• Tell your nurse if you are itchy  
• Tell your nurse if your stomach is upset or hurts  
• Use your PCA as directed  
• Use your relaxations skills to help relax  
• Use the comfort measures you learned about such as pillow positioning and music |
| Other care | • Check vital signs, circulation and movement regularly around the clock  
• **Tell your nurse if your child has:**  
  – Numbness or tingling in the arms or legs  
  – Decreased feeling in the arms or legs  
  – Dressing soaked with blood  
• Hemovac drain to collect fluid from wound if present  
• Oxygen as needed  
• Pulse Oximeter to check blood oxygen level  
• Catheter to drain urine |
Day after surgery (post operative day 1)

<table>
<thead>
<tr>
<th>Diet</th>
<th>Clear liquids to regular diet, depending on what your child can eat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity</td>
<td>Use the incentive spirometer often to keep the lungs clear&lt;br&gt;Will be seen by physical therapist (PT)&lt;br&gt;Make a log-roll turn about every 2 hours with help from staff&lt;br&gt;Move from bed to chair several times with help from staff&lt;br&gt;Begin walking with staff and family&lt;br&gt;You may help your child with moving around</td>
</tr>
<tr>
<td>Medicines</td>
<td>Through the IV line:&lt;br&gt;− Fluids—may be stopped if able to take liquids by mouth without an upset stomach&lt;br&gt;− Medicine for an upset stomach, if needed&lt;br&gt;− Medicine for constipation, if needed</td>
</tr>
</tbody>
</table>

**Pain Management Plan today:**

- Stop PCA pump
- Begin pain medicine by mouth every 4hrs around the clock
- Begin an anti-inflammatory medicines
- Valium for tight muscles as needed
- IV pain medicine if needed for more severe pain
- Time PT visits with pain medicine
- Help with getting patient out of bed
- Position for comfort
- Support relaxation techniques

**Patient Plan:**

- Tell your nurse if your pain is not relieved or you have muscle spasms
- Tell your nurse if your stomach is upset or hurts
- Move in bed often using a logroll
- Get out of bed with help
- Rest between therapy visits
- Use your relaxation skills to help relax
- Use the comfort measures you learned about such as pillow positioning and music

| Other care | Check circulation and movement regularly **around the clock**<br>**Tell your nurse if your child has:**<br>− Numbness or tingling in the arms or legs<br>− Decreased feeling in the arms or legs<br>Pulse Oximeter to check blood oxygen level if PCA pump is still being used<br>Foley catheter may come out<br>Blood work if needed<br>Fever is common in the first day or two – you may receive acetaminophen<br>Continue to help your child move |

**NOTE:** Teenage girls may start their period after the surgery
## Your child’s plan for recovery

### Idiopathic spinal fusion

**Recovery for:** ____________________________________

### Post operative day 2

<table>
<thead>
<tr>
<th>Diet</th>
<th>• Regular</th>
</tr>
</thead>
</table>
| Activity      | • Walk at least 3 times a day around unit and begin stair training  
• Get out of bed with assist of family |
| Medicines     | • Stop IV fluids but IV remains  
• Pain medicines by mouth  
• Medicine for constipation, if needed |

#### Pain Management

**Pain management goals for Post Operative Day 2:**

- Get out of bed at least of 3 times and walk often
- Take part in your bath and ADL’s
- Take part in physical therapy including stairs
- Take part in occupational therapy
- Continue turning in bed
- Deep breathing
- Rest and sleep

**Pain Management Plan today:**

- Valium by mouth for muscle tightness as needed
- Pain medicine by mouth every 4hrs as needed
- IV pain medicine if needed for more severe pain
- Continue anti-inflammatory medicine
- Assist with walking and moving
- Position for comfort
- Support relaxation techniques

**Patient Plan:** While pain medicines are not scheduled on a regular basis, be sure to ask for them before pain becomes severe

- Ask for pain medicine before an activity or if you begin to hurt
- Tell your nurse if your pain is not relieved or if you have muscle spasms
- Tell your nurse if your stomach is upset or hurts
- Get out of bed with help
- Walk and move with help
- Move in bed often using a logroll
- Rest between therapy visits
- Use your relaxation skills to help relax
- Use the comfort measures you learned about such as pillow positioning and music

#### Other care

- Check circulation and movement regularly
- **Tell your nurse if your child has:**
  - Numbness or tingling in the arms or legs
  - Decreased feeling in the arms or legs
- Hemovac drain removed, if not already done
- Remove Foley catheter, if not already done
- Chest and back X-rays
- Continue to help your child with moving and sponge bathing
Your child’s plan for recovery
Idiopathic spinal fusion

<table>
<thead>
<tr>
<th>Post operative day 3 or discharge day</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Diet</strong></td>
</tr>
<tr>
<td><strong>Activity</strong></td>
</tr>
</tbody>
</table>
| **Medicines**                        | • Pain medicines by mouth  
                                      • Medicine for constipation, if needed  
                                      • A staff member will remove IV on day of discharge |
| **Pain Management**                  | **Pain Management Plan today:**  
                                      • Valium by mouth for muscle tightness as needed  
                                      • Pain medicine by mouth every 4hrs as needed  
                                      • Stop anti-inflammatory medicine  
                                      • Review home pain management plan  
                                      **Patient Plan:**  
                                      • Ask for pain medicine before an activity or if you begin to hurt  
                                      • Tell your nurse if your pain is not relieved or you have muscle spasms  
                                      • Tell the nurse or doctor what you will do to control pain at home |
| **Walk by yourself**                 | **Other care**  
                                      • Incision care  
                                      – Keep incision clean and dry  
                                      – Other home care as your child’s doctor directs |
| **ADL’s with parent help**           |           |
| **Rest and sleep**                   |           |
| **Discharge home**                   |           |

Your child will be able to go home when he is able to:
• Eat a regular diet or is receiving full tube feeds
• Control pain with medicines taken by mouth
• Walk with minimal to no help
• Tell the nurse or therapist what things he can and cannot do at home

Most patients are discharged 2 to 3 days after surgery.