

Michigan Orthopedic Specialists
Dr. Nilesh Patel MD

Surgery Date : _____

Apx Time: They will call you the night before with arrival time

Review and share all of the enclosed information regarding your diagnosis and surgical procedure with your family members who will be caring for you.

You must **STOP** smoking for 2 weeks before and 6 months after a fusion

Your surgery location:

- o Surgeons Choice Medical Center - Southfield (248-423-5117)
- o Surgical Institute of Michigan- Westland (734-729-7960)
- o Beaumont- Dearborn (313-593-7411)

Pre-Procedure Instructions:

Cervical ** STOP taking medications below prior to surgery - see below

- **Stop 5 days prior**
 - o NSAIDS (aleve, advil, motrin, naproxen, Mobic, Celebrex, voltaren)
 - o Blood Thinners (Coumadin, Plavix, aspirin, pradaxa)
- Lovenox stop 12 hours prior to surgery
- Eliquis and Xarelto stop 48 hours prior to surgery

Lumbar ** STOP taking medications below prior to surgery - see below

- **Stop 5 days prior**
 - o Blood Thinners (Coumadin, Plavix, pradaxa) * ASA 325mg switch to ASA 81mg
 - o Lovenox stop 12 hours prior to surgery
 - o Eliquis and Xarelto stop 48 hours prior to surgery
- NSAIDS are ok to take up to the day of surgery as well as a baby aspirin 81mg

**** DO NOT** smoke, drink, eat from midnight, of the night before surgery (unless directed otherwise by anesthesia) this include cigarettes, water, gum, candy, and coffee

-Continue to take all blood pressure and diabetic medication BUT ask anesthesia for specific instruction for medication to take the morning of surgery.

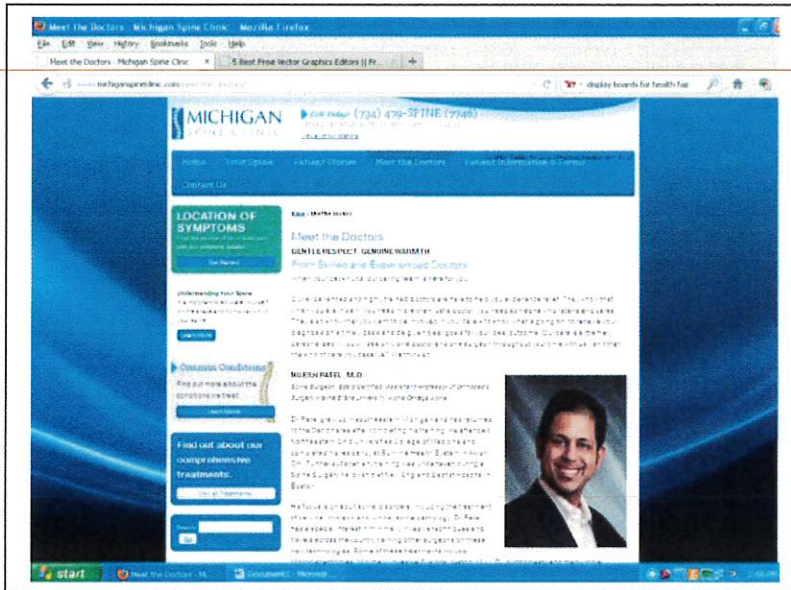
After Surgery:

**Pain medication will be prescribed to you for a Maximum of 8 weeks after surgery. Anything longer will need to be provided by your family doctor or pain management. If refills are need in the first 8 weeks contact out office, a 5 day notice is needed for all prescriptions and no prescriptions are called in out managed on weekends or after 12 noon on Fridays.

**DR. PATEL'S
DR. RAMAKRISHAN
WEBSITE**

Please take a few moments to visit Dr. Patel's website www.michiganspinedclinic.com

Here, you will find easy to understand explanations, illustrations and videos about your specific condition and The available surgical, and non-surgical treatment options.



As always, if you have questions about your care, do not hesitate to contact the Dearborn Office at 313-277-6700.

Your Team Of Healthcare Providers:

Dr. Patel

Brian Vosko PA-C

Amanda F RMA

Emily MA

Dr. Patel office Contact Information :

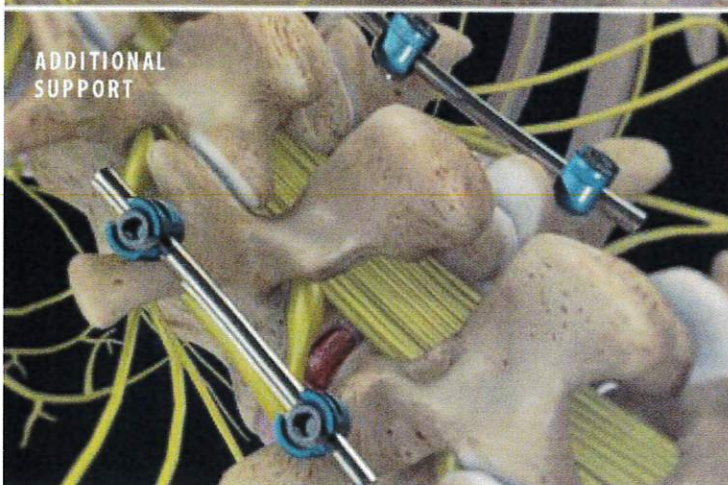
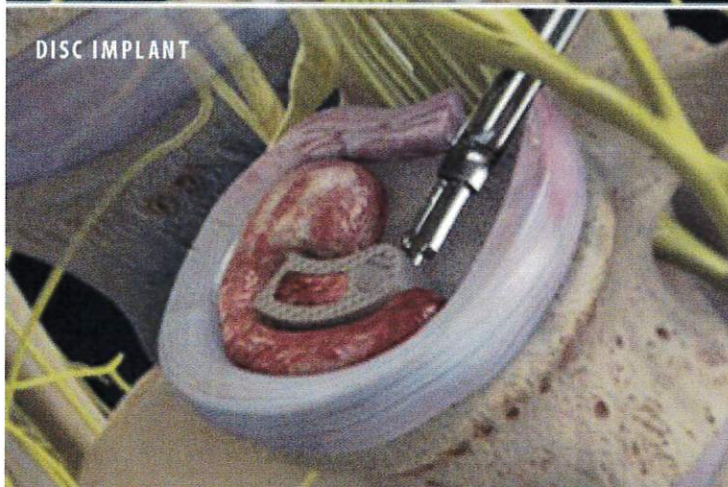
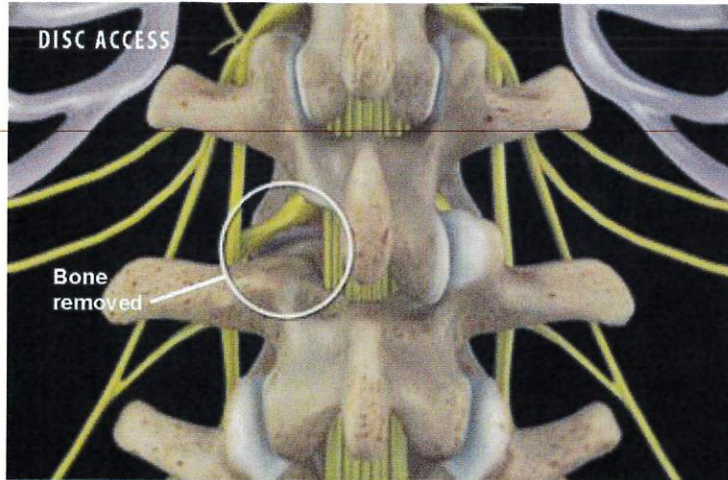
Emily Phone: 313-277-6700 ext 317

Email: Emily.miller@miortho.com

TEXT ONLY LINE ACTIVE FOR 3 MONTHS AFTER SURGERY 313-774-2274

- **Surgical Procedures**
 - **Cervical/Neck Surgery**
 - Anterior Cervical Discectomy and Fusion (ACDF)
 - Cervical Corpectomy and Fusion
 - Cervical Laminectomy and Fusion
 - Posterior Cervical Foraminotomy (Laminotomy)
 - Cervical Arthroplasty
 - **Corpectomy**
 - **Lumbar and Thoracic Surgery**
 - Anterior Lumbar Interbody Fusion (ALIF)
 - Foraminotomy
 - Kyphoplasty (Thoracic and Lumbar Spine)
 - Laminectomy
 - Lateral Interbody Fusion (DLIF or XLIF)
 - Microdiscectomy
 - Minimally Invasive Instrumentation
 - Minimally Invasive Lumbar Fusion (Percutaneous Fusion)
 - Sacroiliac Fusion
 - Scoliosis Surgery
 - Transforaminal Lumbar Interbody Fusion (TLIF)

Transforaminal Lumbar Interbody Fusion (TLIF)



Overview

TLIF is generally used to treat back or leg pain caused by degenerative disc disease and stenosis. The surgeon will stabilize the spine by fusing vertebrae together with bone graft material and remove any bone spurs or disc pinching the nerves.

Incision Made

The procedure is performed through one or more incisions in the back.

Disc Accessed and Lamina Removed

Parts of the vertebral bone need to be removed to get access to the disc and open the space for any pinched nerves. The damaged disc is removed. Some of the disc wall is left behind to help contain the bone graft material.

Implant Inserted

The implant is placed in the empty disc space, realigning the vertebral bones. This also lifts pressure from pinched nerve roots. The area may also be filled with morselized bone.

Additional Support

Dr. Patel will insert series of screws and rods for additional support. Bone graft is also placed along the sides of the spine.

End of Procedure

The morselized bone graft will grow through and around the implants, forming a bone bridge that connects the vertebral bodies above and below. This solid bone bridge is called a fusion. The fusion can take 6-12 months to grow across.

This Procedure can be done at one or multiple levels

You should NOT Smoke after this procedure



Post –Op Lumbar Fusion, What to Expect and Instructions

Dr. Nilesh Patel

You have recently undergone a spinal fusion with Me and my team. It is normal to feel anxious about the next few months. I will walk you through the recovery process and follow you in the office for at least 1 year.

Symptoms:

- **Leg pain** typically improves over the first 2-3 months with a plateau at 6 months. It is normal to have fluctuations in pain in the first 3 months.
- **Back pain** can continue to improve up to 1 year post op.
- **Numbness, tingling and weakness** can take up to one year to improve (nerves regrow at 1 mm /day); whatever is not improved at 1 year is likely to stay.

Avoid Smoking: Smoking decreases the fusion rate by 300%.

Incision: Keep covered until your first post op visit. The initial dressing is a special antibiotic dressing that can be left on for 10-14 days (brown color). You may shower with this dressing on. If it comes off just keep the dressing covered with gauze and tape until seen for your first post op visit. You may soak in a pool or hot-tub when the wound is completely healed and looks like a thin line (approx. 21 days)

Brace: usually used when walking/standing for the first 6-12 weeks, not needed when sitting or in bed. Think of the brace as a tool to help you maintain good posture. In the future (after you are fully fused) use it when doing any heavy lifting.

Physical Therapy: After surgery you will either go to a rehab center for 7-10 days or Home Care PT will come to your house for the first 2-3 weeks. Then you continue your home exercises until we feel it is time to start outpatient PT (usually 8-12 weeks post op).

Healing Time: Typical healing time from a 1-3 level lumbar fusion is 6 months to 1 year. It takes a **minimum of 6 months** to heal a fusion but can take up to 2 years to fully consolidate the bone (slower healing in diabetics and smokers) Muscle and soft tissue healing time is 3 months. We will take x-rays at most office visits to evaluate your progress and monitor the hardware (screws, cages, etc)

Activity: For the first 6 weeks you will be encouraged to use good posture and avoid excessive bending and twisting. Typical restrictions are no lifting greater than 20 lbs for the first 3 months with a gradual increase in lifting restrictions until the fusion is felt to be healed (6 months - 1 year). You can drive when you are off your narcotic pain medications. Most light activities ie: going to restaurants, movies, grocery store can begin at 4-6 weeks. Sexual activity can resume whenever you are comfortable (typically at 4-6 weeks).

Exercise: After your first post-op visit isometric core strengthening (planks) and Sciatic nerve stretches will be encouraged. Stationary bike and elliptical trainers are good low impact aerobic exercises. Avoid exercises that stress the back ie: running, high impact aerobics, sit-ups, squats, heavy free weights for the first 6 months.

Nutrition: Good nutrition is important: A balanced diet with adequate protein helps the healing process. Take at least 3,000 units of Vitamin D up to 5,000 per day, and at least 1,000mg of Calcium daily after surgery for the first 3 months. Use stool softeners (Colace, peri-colace) when on pain medications to avoid constipation.

Pain Control: **Narcotic pain meds** will be prescribed by Dr. Patel for the first 3-4 months typically. In general we want you to try and take as little as possible and try to spread the time between doses over time. **Ice** and using the brace can help with pain. After the first 3-4 months your PCP or a pain doctor will take over prescriptions if needed.

Other Medications:

- No anti-inflammatory for first 3 months unless approved by Dr. Patel (Motrin, Advil, Aleve, Naproxen, Celebrex, Mobic, etc)
- Resume all home meds and blood thinners after discharge from hospital (Aspirin, Plavix, Coumadin, etc)

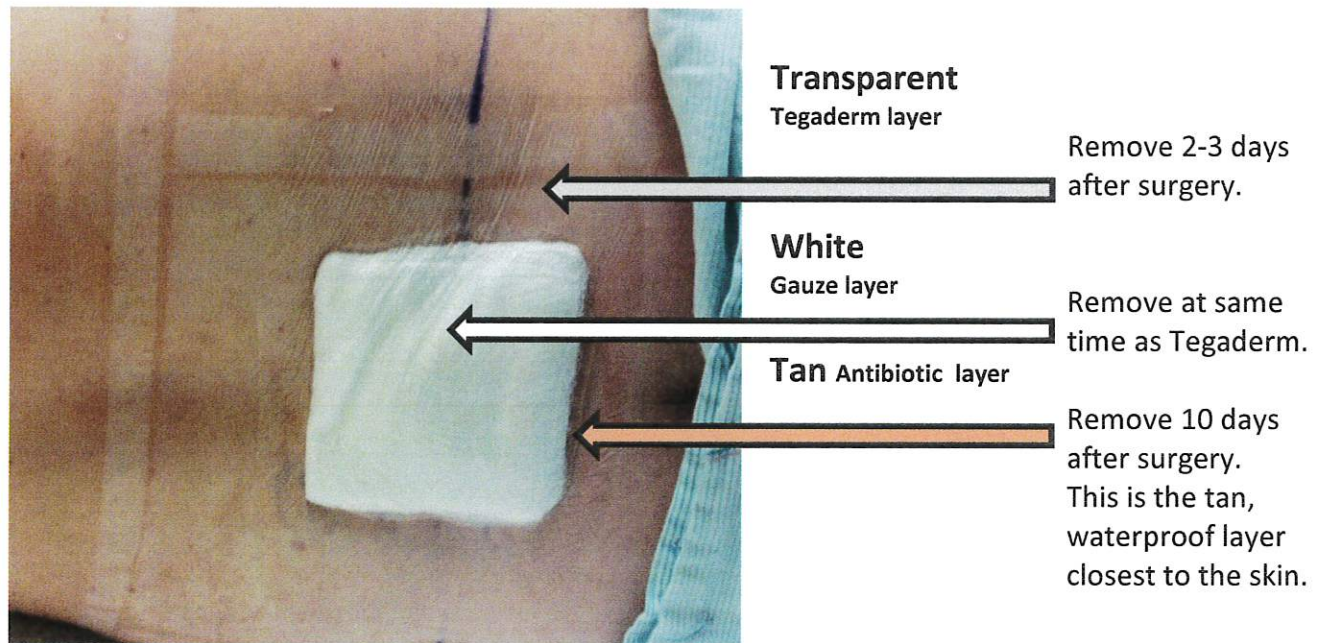
Long Term: Once the fusion has healed you shouldn't have any new problems at that specific level itself. There is a chance you can have issues at other levels in your spine above or below your fusion. Good lifting techniques and core strengthening can help decrease those chances. Occasionally 5-10% of patients will have some benefit from removing the screws.

After you have been discharged from follow up, please always feel free to call me or follow up for any new issues you are having with your neck/back

Thank you for entrusting me with your care

Lumbar Post-Surgical Wound Care

The purpose of the 3-Layer dressing surrounding your incision is to expedite the healing process and to reduce the risk of infection. You may shower with the dressings in place, and they may be removed in the following sequence.



Showering

- You may take a shower and dap your dressing dry
- NO TUB BATH OR SOAKING YOUR WOUND OF ANY SORT UNTIL APPROVED BY THE DOCTOR

Signs of Infection

- Fever Greater than 101 F
- Unusual drainage, redness, or heat at incision site
- Pain, tenderness or increased swelling in your calf

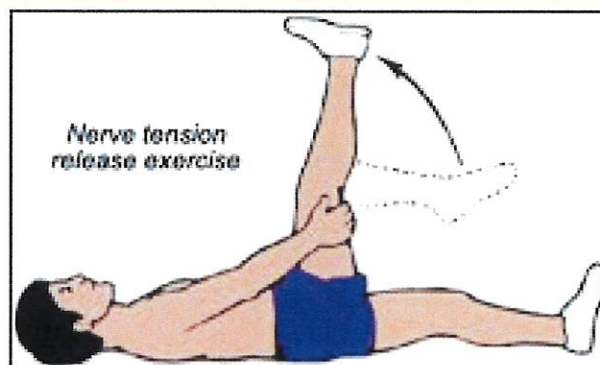
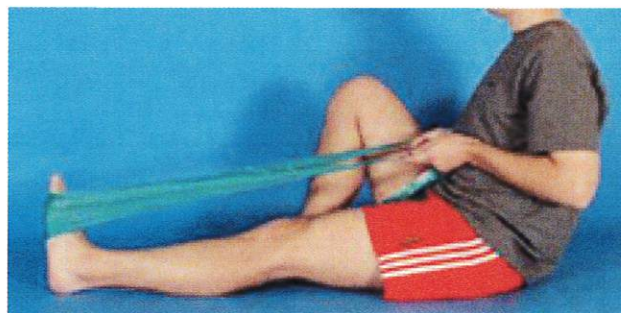
Evidence of a CSF leak (Spinal Cord Leak) after lower back surgery

- Drainage of clear Fluid from incision with headaches when sitting and walking and improves when lying down

Sciatic Nerve Stretches

These are stretches to help keep your sciatic nerve free and mobile

These are calf, buttock and hamstring stretches



Michigan Orthopedic Specialists
21031 Michigan Ave.
Dearborn, MI 48124
313-277-6700 Fax: 313-216-0172

Medical Clearance / Cardiac Assessment / Pulmonary Assessment for:

Name: _____ D.O.B.: _____

Surgery Date: _____ Surgeon: Dr. Nilesh Patel

Procedure: _____

Dear Doctor _____, Please obtain any lab/testing that you feel is necessary to optimize the patient's medical condition. We at least recommend the following EKG within 90 days, CBC, Chem-7, PTT, PT.

Is the patient stable for Proposed Surgery _____ YES _____ NO

Recommendations:

X

Physician Name

X

Physician signature

X

Date

Please fax to: X 313-216-0176 Michigan Orthopedic Specialists

AND

☐ Beaumont-Dearborn: 313-593-8843

☐ Surgeon's Choice Med. Ctr: 248-423-5195

Updated 2/2024