



## Frequently Asked Questions Lumbar Decompression (Laminectomy)

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### WHAT DOES THE SURGERY ENTAIL?

This surgery is done with the patient under a general anesthetic. An incision is made in the middle of the back after checking for the appropriate level using an x-ray. The length of the incision depends on how many levels are being addressed with the surgery. Muscles are retracted from the midline of the spine. Bone and ligament is removed with various surgical tools to decompress the nerves being affected by the spinal stenosis. Any bleeding is stopped and the incision is closed in layers with dissolvable sutures.

### WILL I NEED TO STAY OVERNIGHT AFTER SURGERY?

In some situations, patients can be discharged shortly after the operation and do not need to stay overnight. Patients are observed in the recovery room to ensure that their pain is controlled, they can tolerate food and drink without nausea, can walk around comfortably and are able to empty their bladder. Patients need to have someone with them to drive them home after surgery.

In other situations, patients may need to stay overnight in the hospital. Elderly patients, those with multiple medical co-morbidities and those patients undergoing a multiple-level decompression usually need to be admitted to the hospital after surgery.

### HOW LONG DOES THE SURGERY TAKE?

The length of surgery varies depending on each individual patient's circumstances. The more levels of the spine that need to be addressed or the more severe the spinal stenosis (narrowing around the nerves) the longer the procedure will take. If you are undergoing lumbar decompression (laminectomy) I will be able to give you a better estimate of the length of surgery during your pre-operative visit. I ensure that enough time is taken to accomplish the goal of surgery in a safe manner.

## ARE THERE RISKS INVOLVED IN THIS SURGERY?

There are risks and benefits of every medical or surgical intervention. The risks of anesthesia are largely based on the patient's general physical health and usually investigated further at your pre-operative evaluation with your primary care doctor and by the anesthesia provider prior to your surgery.

The risks of surgery include – but are not limited to – infection, bleeding, blood clots, pain that persists after surgery, potential nerve damage, tear of the sac around the nerves (dural tear). All possible precautions are taken to reduce these risks. If you are undergoing lumbar decompression (laminectomy), we will discuss these risks in further detail at your pre-operative visit.

## WHAT IS THE FOLLOW-UP PROTOCOL?

The typical follow-up protocol is for patients to return to clinic 2 weeks after surgery to make sure the incision is healed. Further follow-up is usually scheduled at 6 weeks and 3 months post-surgery. Additional follow-up visits may be required depending on the individual's specific circumstance.

## HOW LONG IS THE RECOVERY AFTER SURGERY?

It depends what one means by "recovery." Patients should be up walking around within the first day after surgery and throughout the early post-operative period. Patients usually aren't able to return to unrestricted activity until 3 months after surgery. Prior to this, patients will have post-operative restrictions to allow for healing and prevent re-injury. Post-operative pain is variable amongst patients and some people require very little pain medication at all. Some patients may take pain medications for several days after surgery.

## WILL I HAVE ANY RESTRICTIONS AFTER SURGERY?

Patients have restrictions after lumbar decompression (laminectomy) surgery to ensure that the surgical site heals and to prevent injury. Usually, lifting is limited to no more than 10 pounds (roughly what a gallon of milk weighs) for the first two weeks. Forward-bending and twisting should also be avoided in the immediate post-operative period other than what is needed for basic activities such as getting in and out of bed/chairs or a car and taking a shower for example. Patients are encouraged to walk around as tolerated for exercise however. Restrictions are gradually lifted over the course of subsequent follow-up visits. In many cases patients can return to all of their normal activities by 3 months, but some patients with multilevel decompression surgeries, heavy labor jobs or other unique situations may necessitate some sort of permanent restrictions. If you are undergoing a lumbar decompression

(laminectomy), details regarding your post-operative restrictions would be discussed in greater detail in clinic.

### **WILL I NEED A BRACE AFTER SURGERY?**

Patients may be instructed to wear a brace after surgery, but not everyone will need to wear a brace.

### **HOW MUCH PAIN WILL I HAVE, AND WILL I RECEIVE PAIN MEDICATIONS?**

Everyone has a different pain tolerance. Some patients end up taking little to no pain medications other than over-the-counter Tylenol or NSAIDs and some patients take them for a couple weeks after surgery. You will receive a prescription for pain medications after surgery that is to be taken on an AS NEEDED basis and we encourage you to wean yourself off of them as your pain allows.

### **DO I NEED TO TAKE ANY OTHER MEDICATIONS AFTER SURGERY?**

Patients receive prescribed narcotic pain medications for a short period of time. Additional prescriptions may include an anti-histamine for itching and nausea/vomiting, a short course of oral antibiotics and a stool softener or laxative to avoid constipation.

### **WHEN CAN I START TO DRIVE AFTER SURGERY?**

Most people can start driving when they are off of narcotic pain medications. It is illegal to drive a car while taking narcotics. You must also be able to comfortably maneuver your foot from the gas pedal to the brake pedal quickly and be able to check your mirrors and blind spots prior to driving.

### **HOW DO I CARE FOR MY SURGICAL INCISION?**

The incision is closed with absorbable sutures that are under the skin and small Band-Aid like dressings called steri-strips are placed on the skin. A sterile dressing is applied over top of these. I recommend keeping the post-op dressing on for the first two days after surgery. If you are admitted to the hospital after surgery your dressing will be changed prior to discharge. Before to your first shower you should remove the overlying dressing. It is okay to get the incision wet in the shower, but you should not soak in a bathtub. The steri-strips should remain in place until they fall off on their own or they are removed at your first post-op visit. While

showering you should not scrub the area directly and you should lightly dab the incision dry with a towel after. There may be small spots of blood on the dressing when you remove it for the first time, but it should remain dry thereafter. If you notice that you are having continued bleeding or if there is drainage from the incision then you should call our office to let us know.

## DO I NEED TO DO PHYSICAL THERAPY AFTER SURGERY?

Walking is your main form of therapy in the immediate post-operative period and is encouraged to avoid deconditioning, blood clots and respiratory complications. You should take several short walks on a daily basis, even if it is just within your home. You can increase the frequency and length of walks as tolerated by your pain and comfort level.

Physical therapy is NOT recommended in the immediate post-operative period. Your need for physical therapy will be determined in future follow-up visits. You may not need any formal physical therapy at all.

**Helps us improve our care:** What other questions would you like to have answered regarding lumbar decompression (laminectomy) surgery? Please contact my team for further information and we will address your questions.

**During normal business hours (Monday-Friday 7:30AM to 5:00PM) you can reach my clinical assistant Lauren at (651) 275-2705**