

# Discharge Instructions

## Reasons to Call the Office

- Fever greater than 101 F
- If you have increased swelling or redness at incision
- If you have drainage at your incision
- If you develop chest pain, or shortness of breath
- If you have calf pain/leg pain or swelling
- Increased pain not relieved with medications

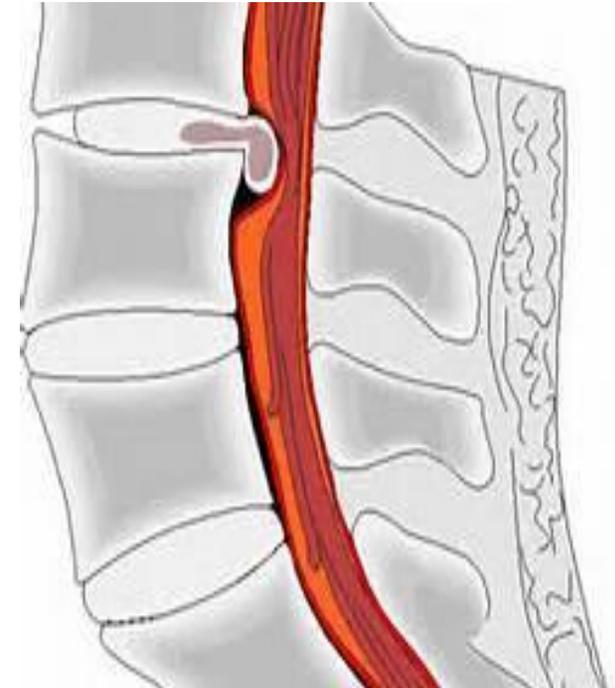
**Please have your pharmacy fax our office at 972-535-2180 for all medication refills.**

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972-535-2170

# Lumbar Microdiscectomy

**(Percutaneous Endoscopic Discectomy)**



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- No lifting greater than 10 pounds
- No driving for 2 weeks after surgery
- You may lie down, recline or stand. No sitting with the exception of eating or using the restroom.
- Avoid climbing stairs.
- You may begin walking short distances once you are discharged home.
- You will be given narcotic pain medication for severe pain. You may take Tylenol for minor pain.
- Take your muscle relaxant medication whether you feel you need it or not
- You must keep your sutures dry. Do not immerse your sutures in water or get them wet. You will be given Aquaguards upon discharge for showering purposes.
- You may clean your incision site with hydrogen peroxide.
- You may leave your incision open to air without a bandage or dressing.
- You will follow up in 10-14 days after surgery for suture removal.
- You will not start physical therapy until at least 4 weeks after surgery.

## Surgery Can Help

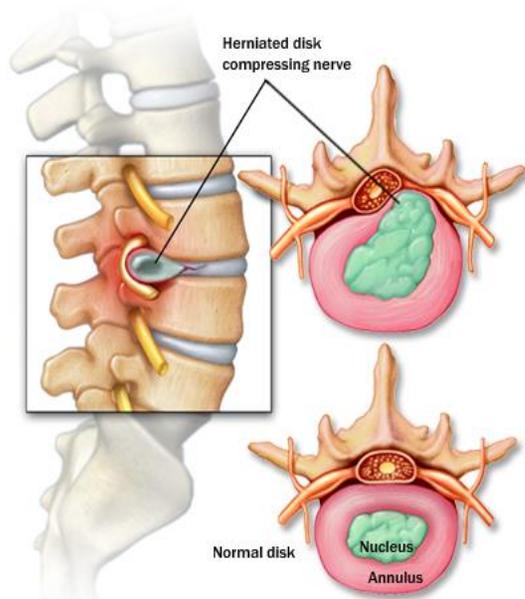
*Microdiscectomy, also known as microdecompression, is one of the most common minimally invasive spine surgery procedures. The main goal of microdiscectomy is **to relieve leg pain caused by a herniated disc in the low back.***

## How You Benefit

*Most people feel better soon after their surgery and feel back to normal within 1 to 3 months. Microdiscectomy will:*

- *Reduce pain*
- *Relieve leg pain from the hip down to the foot*
- *Allow leg strength to improve*
- *Reduce numbness in the affected leg*
- *Improve quality of life*

## Microdiscectomy



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During a microdiscectomy, a small amount of bone in the lamina is removed to allow the surgeon access to the nerve. The nerve is then gently pushed aside and the disc pushing into the nerve is removed. Your surgeon will then check the areas surrounding your disc to make sure there are no additional disc fragments that need to be removed. Usually, only a small part of your disc is removed.

## Postoperative Care

Patients are generally discharged home the day following surgery. The pain in the leg is typically significantly improved, although the patient may experience numbness in the leg, twinges of leg pain, pain around the incision and/or, at times, spasm of the back muscles. Medications will be given for this. This should improve within one to two weeks after surgery.

