

Post Operative Spinal Instructions

(Consider filing at the front of patient 'end of bed notes')

• **Wound / Sutures / Drains:**

- Wound check Yes No
prior to d/c days post-op

Removal of

- Bulky Dressing days post-op
- Sutures days post-op
- Steristrips days post-op
- Clips days post-op
- Wound Drain x1 x2
 - Suction
 - Gravity
 - Release
.....
 - Remove 24hrs 48hrs
 - Remove when drainage stops
 - Remove after team review
- Chest Drain x1 x2
 - Suction
 - CXR
 - Removal
 - Post removal CXR
- Lumbar Drain @10-15ml/hr
 - Remove after team review

• **DVT Prophylaxis:**

- Foot-pumps until mobile
- Compression stockings
 - Full length
 - Below knee
 - Duration wks
- Clexane Yes No
 - Commence.....
 - Dose.....Duration.....
- Antiplatelet / Anticoagulation Meds
.....

• **Neuro obs:**

- Hourly legs 6 hrs then 6 hourly
- Hourly arms and legs 6hrs then 6 hourly
- Other.....

• **Diet / NG Tube:**

- Normal diet
- Soft diet 1 week
- Free fluids until flatus
- Other.....
- Insulin.....
- Remove NG.....

Patient Label



• **Collar / Brace required:**

- No Yes - PTO and complete Spinal Collar / Brace Referral Form

• **Mobilisation / Physio / OT:**

- No restrictions Mobilise ASAP
- Restrictions
- Dural tear Cord Issue
 - Bed rest for days wks
 - Lie flat
 - Sit up
 - Other
 - Can roll to:
 - Left (right side up)
 - Right (left side up)
 - Neither (stays flat on back)
- Rookwood ref

• **Other:**

- Post-op bloods FBC U+E
 - Day 1 Yes No
 - Other
- X-ray Yes No
Details.....
 - Routine prior to d/c
 - Prior to mobilisation
 - In Brace / Collar (pto)
- Urinary Catheter Yes No
 - Remove when mobile
 - Other.....
- Analgesics Rx Yes No
- Can have limited course NSAIDs if required (+/-PPI) Yes No
- Antibiotics Rx Yes No
- Steroids Rx Yes No
- Other Rx Yes No

As per drug chart

• **Follow Up:**

- Wound FU wks at
- Clinic FU wks at
- XROA: Yes No

• **Surgeon's name**.....

• **Signature**.....

• **Date**.....

Spinal Collar / Brace Form

Ward / Hospital:
 Consultant:
 Your Name / Grade:
 Signature:
 Date:
 Contact No / Bleep:
 Diagnosis:

Patient Label



Bwrdd Iechyd Prifysgol
 Caerdydd a'r Fro
 Cardiff and Vale
 University Health Board

Other (e.g. Comorbidities / Shape / Size of patient):

Indication:

- Conservative
- Post Surgery

Stability:

- Unstable
- Stable
- Risk Progressive Collapse / Deformity

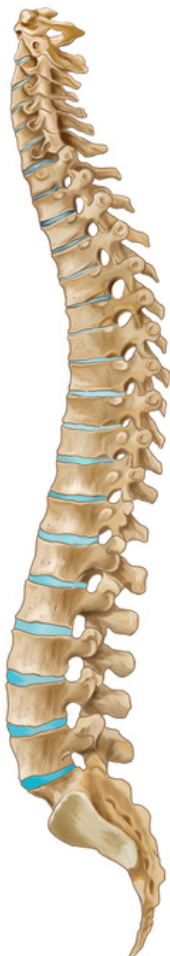
Purpose of Brace:

- Maximum Rigid Stability
- Semi Rigid Postural Reminder /
 Movement Restrictor
- Pain Relief

Movement Restriction:

- Sagittal Plane (Flex / Ext)
- Triplanar (All Directions)

Suggested Orthosis:



- Halo / Minerva / CO
C0-2
- CO
C3-5
Elderly Peg fractures
- Bulky Soft Collar**
e.g. Elderly Peg fractures
- CTO
C6-T5
- CTLSO
Multiple level
fractures
- TLSO
T7-L3
- Hyperextension TLSO
T9-L3
- LSO / Hip Spica
L4-S1
- Soft Lumbar Corset

Complete Both

Collar - Fitting Instructions:

- Wear 24/7: Yes No
- Wear only mobilising / upright:
 (can sit to degrees without collar)
- Soft collar in bed:
- Collar Care: Lying with head hold
 Lying no head hold
 Sitting
- In collar: roll maintaining spinal alignment
 4 person log roll N/A
- Out of collar: roll maintaining spinal alignment
 4 person log roll N/A
- Mobilise Pre Erect XR: Yes No
- Remove for showering: Yes No
- Soft collar for showering: Yes No
- Duration in Collar:.....

Brace - Fitting Instructions:

- Wear 24/7: Yes No
- Wear only mobilising / upright:
 (can sit to degrees without brace)
- Out of brace: roll maintaining spinal alignment
 3-4 person log roll N/A
- Position to fit: Lying Sitting Standing
- Mobilise Pre Erect XR: Yes No
- Remove for showering: Yes No
- Duration in Brace:.....

CO - Cervical Orthosis; CTO – Cervico Thoracic Orthosis;
 TLSO - Thoraco Lumbar Sacral Orthosis;
 LSO - Lumbo Sacral Orthosis; SO - Sacral Orthosis

Reason / Notes Alternative Plan:

.....
