

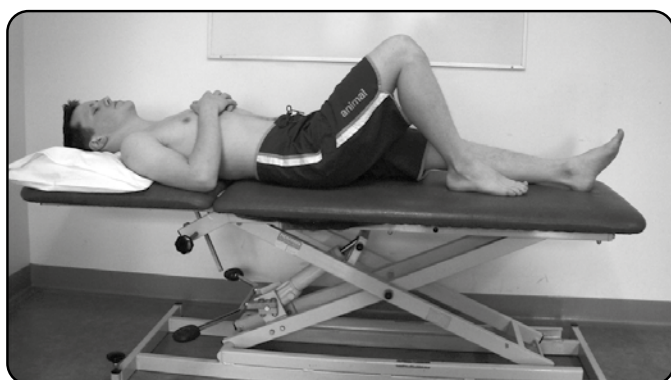
## Microdiscectomy/Segmental Decompression Physiotherapy Advice

### General Advice

This leaflet provides advice and exercises to help you recover from your operation as quickly as possible. The Physiotherapist will be happy to answer individual questions and guide you through the process.

### From when you return to the ward (3 times daily, 10 repetitions)

- Breathing exercises (3 deep breaths, a huff and a strong cough every 30 minutes).
- Ankle exercises to aid circulation (10 circles, 10 up and down every hour).
- Tighten thigh and buttock muscles, hold and relax. Contract tummy muscles.



- In lying, alternate knee bends as comfortable.

On **Day 1** you will also get out of bed and walk with the physiotherapist. You may also be taken to the stairs to practice these if necessary.

It is important **not to twist at the operation site** after the surgical procedure. These pictures demonstrate how you should get in and out of bed **for the first two weeks**.

- Bend your knees up.



- Roll like a log onto your side.



- Move your heels over the side of the bed and push up with your arms as you lower your legs over the side of the bed.



- Keep your spine straight as you push up.



- Sit for a few seconds as it is common to feel light headed when you first get up.



## Remember!

When rolling in bed, do not twist your lower back. Roll your shoulders, hips and legs at the same time, like a log, and brace your body.

## Discharge from Hospital

When you have been assessed by the physiotherapist, walked safely and practised the stairs you will be discharged home.

## Back Care Advice

- Avoid bending excessively forward, full rotation or full side to side movement for **2 weeks** to allow the soft tissues to fully heal.
- Sit in upright chairs with back support.
- Do not sit up in bed with your legs long in front of you (the 'bath' position).
- Shower instead of using the bath until comfortable, however check with the nursing staff that your dressing is shower proof.
- Do not drive for 48 hours after the general anaesthetic. You can return to driving when you feel safe to control the car and you are comfortable. You should be able to perform an Emergency Stop if required. It is recommended to talk to your insurance company. You will need to have stopped taking any medication that has a sedative effect.
- Change resting position regularly, walk as is comfortable and avoid painful activities/positions.
- As long as you feel comfortable, you may start running at 6 weeks but contact sports should be avoided for at least 12 weeks.
- You may start swimming after 4 weeks provided your wound has fully healed.
- You may return to normal sexual activity as able depending on position and pain.

- You should gradually increase your walking as your comfort allows and return to normal daily activity as able.
- You should expect to feel ready to begin returning to work using the below guidelines:
  - Light manual work 4/52 e.g. administrator or secretary
  - Manual work 6/52 fireman or electrician and gardening/DIY
  - Heavy manual work 8/52 e.g. stonemason
  - Lifting should be avoided for 6 weeks

**Individual assessment and advice should be sought and adhered to; the advice given to you by your Spinal Consultant replaces that given by this booklet.**

## Useful Contact Numbers

### Physiotherapy Aftercare:

- 01392 403509

### Dyball Ward

- 01392 403527

### Durbin Ward

- 01392 403691

## Follow-up:

You will be followed up by your consultant or a member of their team at approximately 2 months from your operation.

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by Royal Devon staff undertaking procedures at the Royal Devon hospitals.

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