



**PLEASE MUTE Your  
MICROPHONES  
and  
Turn Off Your Cell  
Phone Ringer**

**Do Not Answer Phone  
Calls During Class.  
Thank you!**

**GBMC**

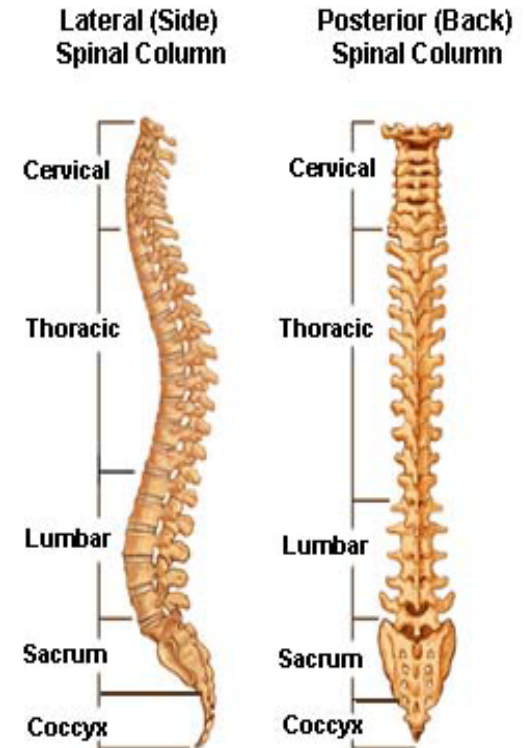
## Pre-Op Class Presentation: Neurosurgery at GBMC

Presented by: John Silver, RN4 & Emily Iseman, RN4  
Created by April Asuncion Higgins, BSN, RN, CMSRN



# The Spine

- Divided into 3 sections
  - Cervical spine-7 vertebrae
  - Thoracic spine-12 vertebrae
  - Lumbar spine-5 vertebrae

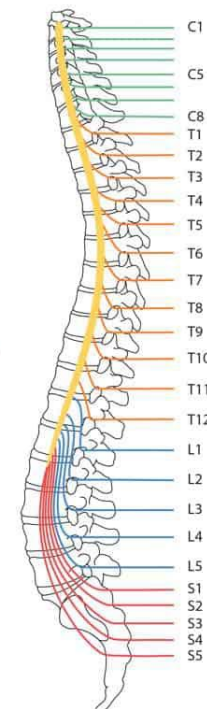
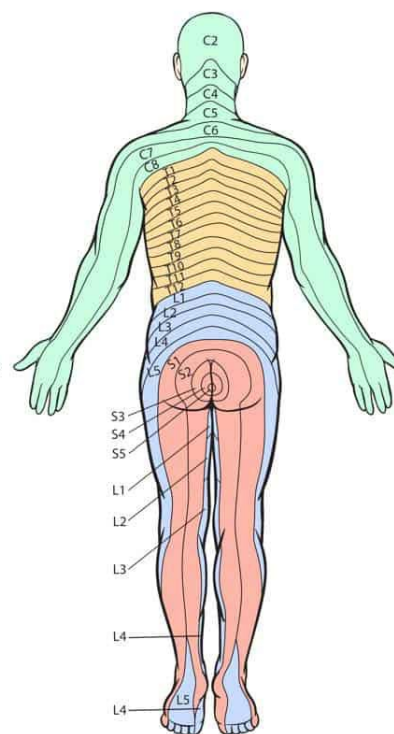
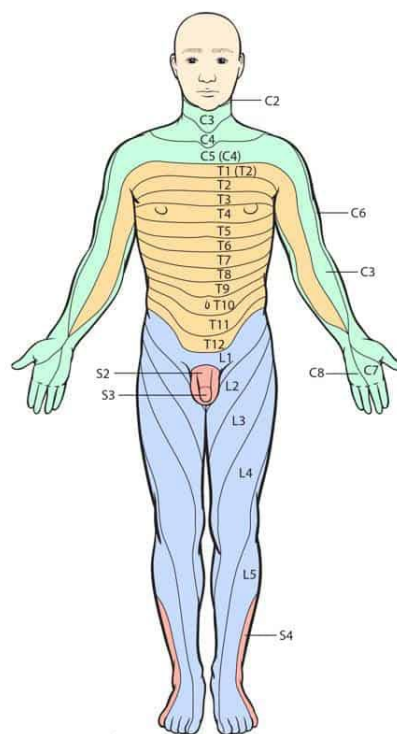
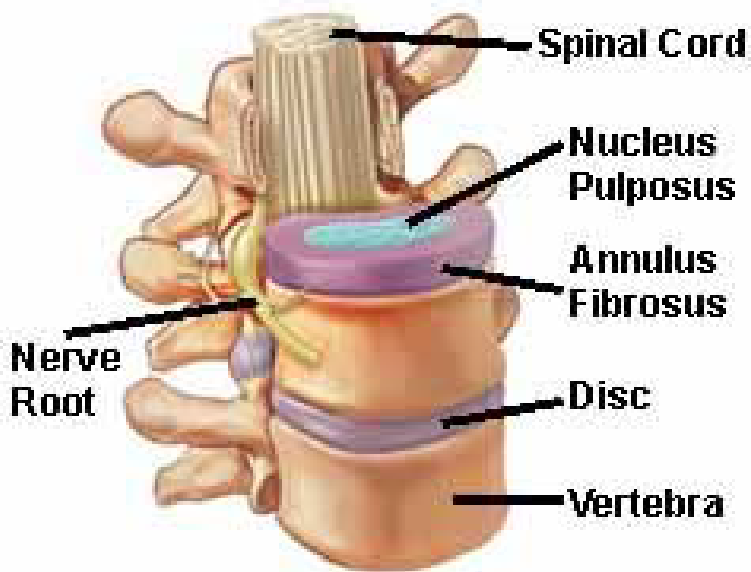


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# Spine Anatomy



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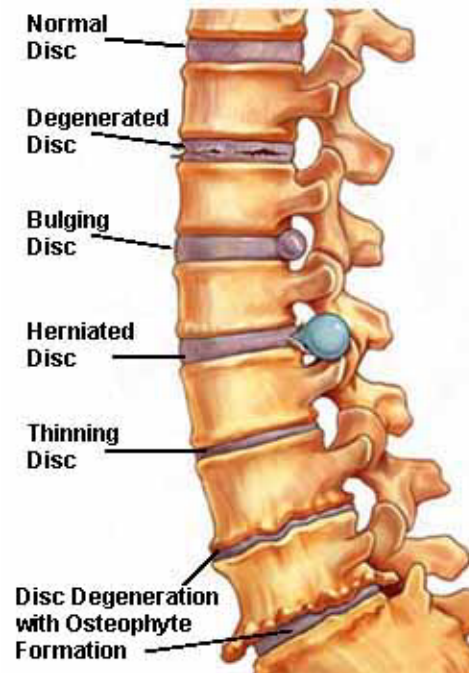
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# Causes of Spinal Pain: Disc Problems, Bone Spurs, Vertebral Slipping



Examples of Disc Problems

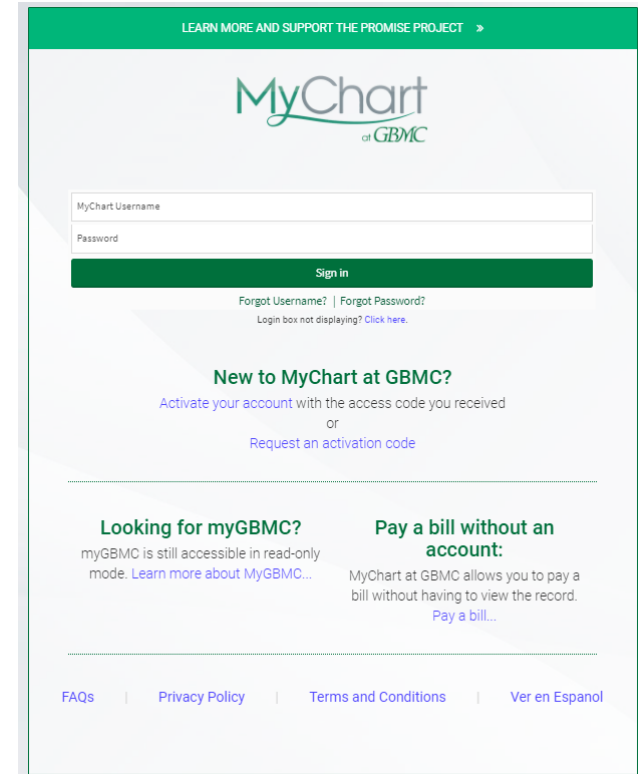


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# Sign-up for GBMC MyChart

- **MyChart** will send reminders for your pre-op appointments and appointments while you are in the hospital.
- **MyChart** gives you access to your test results, allows you to communicate with your providers, pay your bill, and helps you to coordinate your healthcare needs.
- On the day of admission: **MyChart** will convert to **MyChart Bedside**, it is your portal for engaging with your care while admitted to the hospital. Empower yourself and your family with access to your care team, clinical data, and health education.



The screenshot shows the MyChart of GBMC website interface. At the top, there is a green banner with the text "LEARN MORE AND SUPPORT THE PROMISE PROJECT" and a right-pointing arrow. Below this is the MyChart of GBMC logo. The main content area features a login form with fields for "MyChart Username" and "Password", and a "Sign in" button. Below the login form are links for "Forgot Username?" and "Forgot Password?", and a note "Login box not displaying? Click here." Below the login form is a section titled "New to MyChart at GBMC?" with options to "Activate your account with the access code you received" or "Request an activation code". Below this is a section titled "Looking for myGBMC?" with a link to "Learn more about MyGBMC...". To the right of this is a section titled "Pay a bill without an account:" with a link to "Pay a bill...". At the bottom of the page, there are links for "FAQs", "Privacy Policy", "Terms and Conditions", and "Ver en Espanol".

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# Time Sensitive Tasks to Complete Before Your Surgery

## ➤ Nasal swab for MRSA/MSSA

➤ **Golden window** for completion is within 10-30 days prior to surgery.

➤ **Kaiser Permanente** patients are to have their pre-op MRSA collected at the Kaiser PEEC Center.

➤ Non-Kaiser Permanente patients (GBMC Ortho, GBMC Neurosurgery, Ortho Maryland)

➤ Testing at GBMC Diagnostic Testing Center

➤ **Monday-Friday 8am-4pm, no holidays**

➤ Result valid for 60-days

## ➤ Preop CHG Wash Kit with directions

➤ Begin 3 nights before surgery

## ➤ Pre-op Questionnaires

## ➤ Pre-op Physical (with bloodwork)

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**NON-Kaiser Permanente  
patients only**

## Diagnostic Center and Laboratory Medicine at GBMC

GBMC Main Hospital 6701 N. Charles St./ Suite 3100/ Towson, MD 21204  
MSSA/MRSA preop testing: Monday-Friday 8am-4pm ONLY, no holidays

### GBMC Diagnostic Center

**Suite #3100** (across from Einstein Bakery)

- Parking at **Iris Parking (closest)**
  - For those entering from Iris Park at Pavilion East entrance, proceed down the hallway and turn right once you reach Einstein Bagels. The center will be the next office on your left.
  
- Parking at **Lily Park (near ER/ED)**
  - Upon entering GBMC Lobby E walk straight down the hall until you reach the main concierge desk, turn left down the first hallway. The center is located before Einstein Bagels.





NORTH CHARLES STREET

**S SHUTTLE STOP** **V VALET PARKING**

N

**V VALET SERVICES**

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LA PETITE ACADEMY OF TOWSON

SANDRA R. BERMAN PAVILION

BERMAN LOT

BLUEBELL PARK

CLOSED

L & D

EMERGENCY DEPARTMENT

LOUIS AND PHYLLIS FRIEDMAN BUILDING

DAFFODIL PARK

CLOSED

PHYSICIANS PAVILION WEST

PHYSICIANS PAVILION EAST

PHYSICIANS PAVILION NORTH

DIAGNOSTIC TESTING CENTER

Pavilion West

Pavilion East

IRIS PARK

GATEHOUSE DRIVE

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**S SHUTTLE SERVICES**

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- Friedman Building entrance
- PPW, Physicians Pavilion West
- Bus loop, Physicians Pavilion East



# Getting Fitted For A Back Brace

- Patient of Dr. Rami or Dr. Dolitsky
  - If you received a prescription for a lumbar back brace or a posterior cervical collar for a multi-level fusion surgery
    - *Must get fitted for your brace prior to surgery*
      - The medical supply company will reach out to you to arrange a fitting date and time (*Bring brace with you when you come in for surgery*)
      - If you are an OrthoMD patient, Dr. Dolitsky, you will be fitted by your surgeon's office. (*Bring brace with you when you come in for surgery*)

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# Preoperative Testing & Plan of Care for Discharge

- All pre-op testing and diagnostic tests MUST be completed 10-30 days from surgery date:
  - MSSA/MRSA nasal swab at the Diagnostic Testing center
  - Blood work, urinalysis, x-rays, etc
  - Kaiser Permanente patients are to have their pre-op MRSA collected at the Kaiser PEEC Center
- Need Surgical Clearance from:
  - Primary Care Physician
  - Specialist, only if applicable
- Designating your family/friends support person(s). Prepare your home environment.

Results and Surgical Clearance statements from your doctors will need to be available to GBMC **no later than 3-days** before surgery.

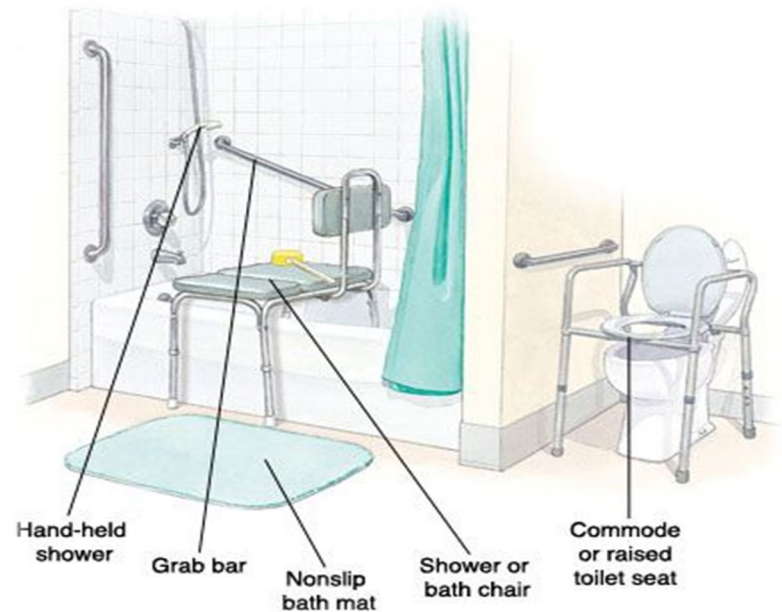
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# Home Set-up

## Before coming to the hospital

- Prepare meals ahead of time or arrange to have family/friends there to help
- Make frequently used items in the kitchen accessible for use
- Clean and clear home of clutter
  - Remove rugs out of bathroom and kitchen
- Make sure all equipment that you may already have is easily accessible, clean and in safe working order
  - Borrow from friends or family or community loan closets



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# How to Prevent Infection and Complications

- Control your blood sugar before, during and after your surgery
- Exercising and healthy weight loss
- **You must STOP** smoking (including cigars, e-cigarettes and vaping) 2 weeks before surgery and at least 2 weeks after surgery
- Good nutrition with adequate calories and protein
- Making sure skin is dry in between skin folds
- Frequent UTI's, notify your primary team & surgeon
- Advised no dental work within the 2-weeks prior to surgery and/or the first 3-months after surgery.
- Applying fresh linens to bed before surgery.
- *Keep pets and animals away from the incision site after surgery. No pets are to sleep in bed or on the sofa with you until cleared by your surgeon.*



# Pre-surgery Hibiclens CHG Showers

## Preventing Surgical Site Infection: Pre-Op Skin Preparation

- **Hibiclens Shower #1** begin three (3) nights before your surgery
- **Hibiclens Shower #2** is two (2) nights before surgery.
- **Hibiclens Shower #3** is the night before surgery.
- **Hibiclens Shower #4** is the morning of surgery before coming to the hospital.

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JOINT AND SPINE CENTER  
PRE-SURGERY INSTRUCTIONS

The HIBICLENS soap you have been given is a solution of 96% Gentle Foaming Soap, and 4% Chlorhexidine Gluconate Antiseptic for pre-surgical bathing, which is prescribed to mitigate the opportunity for infection.

- 1) It is VERY important that you follow these instructions no less than FOUR (4) days in a row
- 2) Visit this link to watch a 2-minute 36-second video illustrating how to correctly shower using the foaming HIBICLENS: <https://youtu.be/af73ae-c568>
- 3) **Shower #1** begin three (3) nights before your surgery.  
Wash your hair, face, and genitals with your regular shampoo and soap. Rinse thoroughly.
- 4) Run clear water on the rest of your body to wet the rest of your body.
- 5) Shut off the shower or step out of the water stream.
- 6) Pump the Hibiclens foam onto each of the 6 or 7 disposable cloths provided to you.
- 7) Lather up and wash your body from your neck down (each cloth for each body zone, see back of this page).  
**IMPORTANT!!: Do not allow solution to come in contact with your face, eyes, nose, mouth, ears, or inside your genitals.**
- 8) Allow the HIBICLENS foam to sit on your skin for at least **2 minutes**.
- 9) After you've waited at least 2 minutes, turn the water back on, or step back into the water stream to rinse.
- 10) Pat dry with a fresh clean towel.
- 11) You will repeat this process every night before surgery.  
**Hibiclens Shower #2** is two (2) nights before surgery.  
**Hibiclens Shower #3** is the night before surgery.  
**Hibiclens Shower #4** is the morning of surgery before coming to the hospital.  
**FOUR (4) SHOWERS ARE PRESCRIBED.**  
**DO THIS EVERY DAY FOR FOUR (4) DAYS IN A ROW PRIOR TO SURGERY!!**

Each one of the disposable cloths (#1 through #6 or #7) is used on a different part of the body. By using a fresh clean cloth with the Hibiclens for each body zone, you help cut down on cross contaminating different body areas. Pump the Hibiclens foam onto each of the 6 or 7 disposable cloths provided to you.

**Cloths #1-6: Pump Hibiclens onto cloths, lather skin as instructed below.**

- #1: Surgical Site. (if multiple surgical sites, use a new cloth)
- #2: Neck, chest, and stomach.
- #3: Both arms front and back, arm pits, hands, and fingers.
- #4: Starting at right hip, front and back of leg, feet, toes.
- #5: Starting at left hip, front and back of leg, feet, and toes.
- #6: Shoulders, back of neck, upper and lower back, and buttocks.

Three Nights Before Surgery	Two Nights Before Surgery	One Night Before Surgery	Morning of Surgery
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Check off each yellow circle after your Hibiclens CHG shower



**Hibiclens CHG Shower Video**  
Please note **GBMC J&S Center** requires patients to **complete 4 showers at home** before surgery



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# 4 Days of Pre-surgery CHG Showers



<https://vimeo.com/882515698/36b386b075?share=copy>

## Hibiclens CHG Shower Video

Please note **GBMC J&S Center** requires patients to **complete 4 showers at home** before surgery

- Pre-Surgical Scrub: 4% Chlorhexidine gluconate (CHG).
- Four (4) Total CHG Showers at home.
- **Begin three (3) nights before surgery**, last application is on the morning of surgery before coming to the hospital.
- Apply the CHG foam onto your 6 or 7 disposable cloths, lather the solution onto skin.
- Avoid contact with your eyes, ears, mouth, and genitals.
- Do **NOT shave** or use **hair removal lotions, deodorant, perfume, lotion, creams, or oils** on your body.

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# What if I do not have anyone to help wash my back?



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# Preventing Surgical Site Infection: Pre-Op Skin Preparation

## How to use the CHG solution skin treatment before your procedure or surgery

Prior to surgery, you should clean your skin with chlorhexidine gluconate (CHG) solution. Using CHG on your skin will reduce your risk of getting an infection. It is very important that you follow these directions every night, starting three nights before your surgery, and on the morning of surgery.

### Why do I need to take a shower and then apply the CHG solution?

- Using the CHG on your skin after using soap and shampoo and rinsing is the best way to remove germs from your skin.
- This helps keep you from getting an infection from germs (known as "superbugs") that are difficult to treat.
- Surgeries, drains, some medicines, and being ill make it easier to get an infection.
- CHG works for 24 hours.



### How to use the CHG solution skin treatment:

- Starting three nights before your procedure, take a shower with your regular soap and rinse.
- Wash hair with regular shampoo and rinse.
- Turn off the shower. Place a large amount of CHG solution on 6 or 7 disposable cloths.
- Lather the CHG onto your skin, from your neck down. Apply the CHG in the order shown on pictures below, starting at cloth number 1 and ending at number 6 (7<sup>th</sup> cloth if needed for a second surgical site). Use one cloth for each area of the body (see figures 1 and 2).

- Do not allow CHG to come in contact with your face, eyes, nose, mouth, ears, and genitals.

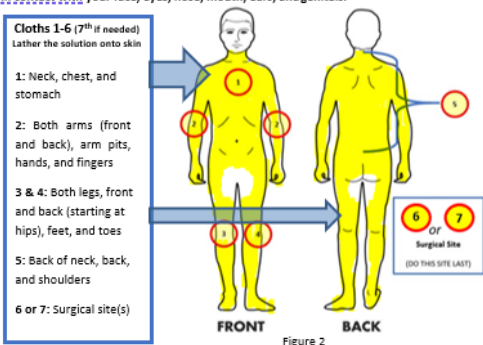
- Lather and allow the CHG to sit on your skin for 2-5 minutes. Rinse with water.

- Pat dry with clean towel.

- Do not use any lotion, oil, ointment, topical medication, or hair removing lotions.

- Wear clean clothes and sleep on clean sheets.

- Do this again every night and in the morning before coming to the hospital. Place a check mark in the yellow circles below for each use.



Check off each yellow circle after your CHG shower

- **CHG Shower #1** begin three (3) nights before your surgery
- **CHG Shower #2** is two (2) nights before surgery.
- **CHG Shower #3** is the night before surgery.
- **CHG Shower #4** is the morning of surgery before coming to the hospital.

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# 3 Nights Before Your Surgery: Begin Your CHG Showers

**Cloths #1-6** (use an additional cloth if needed) **Add CHG solution onto cloths, lather skin as instructed below.**

**#1: Surgical Site.** (If multiple surgical sites, use a new cloth)

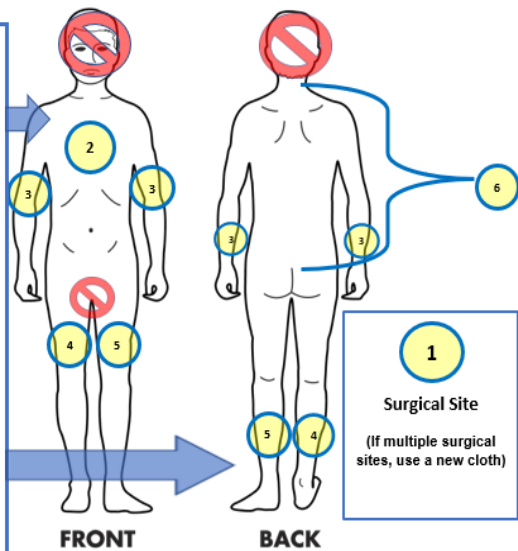
**#2:** Neck, chest, and stomach.

**#3:** Both arms front and back, arm pits, hands, and fingers.

**#4:** Starting at right hip, front and back of leg, feet, toes.

**#5:** Starting at left hip, front and back of leg, feet, and toes.

**#6:** Shoulders, back of neck, upper and lower back, and buttocks.



- Pre-Surgical Scrub: 4% CHG Solution
- Use **all 4 bottles** of CHG, lather the solution onto skin
- Start 3 days prior to surgery - every night before bed
- Last application is on the morning of surgery
- Avoid contact with your eyes, ears, mouth, and genitals
- Do **NOT shave** or use **hair removal lotions, deodorant, perfume, lotion, creams, or oils** on your body

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# What if I do not have anyone to help wash my back?



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# Current Medications

## Can continue **on day of surgery**

- It is OK to take:
  - Tylenol
  - Gabapentin or Lyrica
  - Narcotic Pain medications (Oxycodone, Dilaudid, Tramadol)
  - Muscle Relaxers (Flexeril, Zanaflex)
  - Any Anti-depressants, Anti-anxiety medications, Psychiatric medications
  - Anti-Seizure medications
  - Asthma Inhalers/medications (bring your inhaler with you on the day of surgery)
  - Cardiac medications: Digoxin
  - Thyroid medications
  - Steroids: oral or inhaled
  - Cholesterol Medication-Statins: Zocor, Lipitor, Pravastatin
  - Eye Drops

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# Current Medications

## 10 Days before surgery

- **Stop** anti-inflammatory drugs such as: **Celebrex**, **Nabumetone**, **Ketolorac**, **Mobic (Meloxicam)**, **Excedrin**, **Ibuprofen (Advil, Motrin)**, **Naproxen (Aleve)**, and **Robaxin**
  - It is important to stop as they **cause excessive bleeding** during your surgery and recovery period.
  - Patients taking any prescribed blood thinners such as **ASPIRIN** or **ASPIRIN products** like; **PLAVIX**, **TICLID**, **PRADAXA**, **ELIQUIS** **COUMADIN** or **WARFARIN** should consult their prescribing physician or cardiologist in regard to stopping medication prior to surgery.

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# Current Medications

## 7 Days before surgery:

- **Stop** Certain vitamins such as **Vitamin E** and **Glucosamine**
- **Stop** All herbal products: **fish oil, ginko biloba, ginseng, dong quai, garlic, kava, ma huang, St. john's wart and non-vitamin supplements.** (These medications may cause **bleeding!**)
- **Stop Diet** medications

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# Current Medications

## 3 days before surgery

- **Stop** topical medications
- **Stop** Viagra, Levitra & Cialis



## 48 Hours before surgery

- **Stop** Monamine Oxidase Inhibitors (MAIOs)
  - Examples: Nardil (Phenelzine), Emsam (Selegline), Marplan (Isocarboxazid), Parnate (Tranylcypromine)

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# Current Medications

## 24 Hours before surgery

➤ **Stop ACE Inhibitors:**

➤ Examples: Lisinopril, Vasotec, Elanapril

➤ **Stop Angiotensin Receptor Blockers:**

➤ Examples: Cozaar, losartan, Benicar, Candesartan, Atacand, Valsartan

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# Current Diabetic Medications

## 4 days before surgery

- **Stop** SGLT-2 Inhibitor medications: Steglatro

## 3 days before surgery

- **Stop** SGLT-2 Inhibitor medications: Jardiance, Invokana, Farxiga, and

## 24 Hours before surgery

- **Stop** oral hypoglycemic containing **Metformin**

- Examples: **Glucophage, Riomet, Glumetza, Glucophage XR, Fortamet, Avandamet, Actoplus, Glucovance, Actoplus, Glyburide, Glipizide, Invokamet, Jentadueto, Janumet, Kombiglyze XR, Metaglip, PrandiMet, Xigduo, Kazano, Synjardy, Segluromet**

- All other **oral hypoglycemic agents** should **be held the morning of surgery**

- Wearable continuous blood glucose monitoring systems: please notify your surgeon and/ or anesthesiologist as soon as possible. GBMC nursing staff will monitor your blood glucose per hospital policy.

- If you have a wearable insulin pump system, please notify your surgeon and/or anesthesiologist as soon as possible.

- If you are Diabetic notify your endocrinologist of your upcoming surgery

- **Insulin:** your Endocrinologist will advise you on how many units they want you to take and when to take give your last dose before surgery.



# Diabetes Medications...continued

- **GLP-1 Agonist:** semaglutide (*Ozempic, Rybelsus*), dulaglutide (*Trulicity*), exenatide (*Bydureon BCise, Byetta*), liraglutide (*Victoza, Saxenda*), lixisenatide (*Adlyxin*), etc.
  - If taken **daily**: Hold GLP-1 agonists **on the day of** the procedure/surgery.
  - If taken **weekly**: Hold GLP-1 agonists **a week prior** to the procedure/surgery.
- A **CLEAR LIQUID ONLY DIET** starting **12 hours before the usual NPO time** (noon the day before surgery if NPO).
  - Clear Liquids for 24h before surgery**
    - Coffee and tea without milk or non-dairy creamer (sweetener is ok)
    - Clear, nonfat broths
    - Fruit & vegetable juices that are strained & pulp free
    - Sodas & Sports drinks
    - Pulp-free popsicles
    - Jell-O
  - **Nothing to eat/drink after 12-midnight**

\*\*off label use for weight loss

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# The Night Before Surgery

- **NO** heavy meals past 8 pm
  - You can snack up until midnight
- **NO** eating past midnight, only a small sip of water is permitted to take medications. When brushing teeth expel water with rinsing on the morning of surgery.
- If you keep a drink on your bedside table, remove it before you go to sleep. Old habits are hard to break!
- **NO** chewing gum or mints after midnight.

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# Current Medications: Morning of Surgery

## Blood pressure/cardiac medication

- Take your Beta blocker and/or Calcium Channel blocker heart medication
- Discuss with your primary care or cardiologist if they want you to take your diuretics the morning of your surgery
  - Examples: HCTZ, Lasix

## Heartburn or ulcer medicine

- Acid blockers should be taken on the morning of the surgery to reduce the risk of aspiration pneumonia.
  - Examples: Zantac, Pepcid, Axid, Prilosec, Pantoprazole, Reglan
- Antacids should **NOT** be taken as they contain particulate material that may damage the lungs if aspirated
  - Examples: Maalox, Tums, Carafate

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# What to Bring to the Hospital

- Your ID card and Insurance card
- Advance directive
- List of home medications (leave actual medications at home)
- Preop CHG wash form
- Bring in glasses, contact lenses, hearing aids, and dentures
- Regular clothing
  - Loose fitting shorts or pants; elastic waist is easiest, under garments
  - Walking shoes with good ankle support (no open heel shoes). Do not buy new shoes - bring something comfortable
- **Back brace** (For multi-level spinal fusions, your surgeon will order and have you fitted for one before your surgery date)
- Shoe inserts or splints that you normally use
- CPAP machine\*\* (if you have sleep apnea)



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GOR 4th floor

LILY PARK

TULIP PARK

PHYSICIANS PAVILION NORTH

DAFFODIL PARK

Diagnostic Center LAB

PHYSICIANS PAVILION EAST

Pavilion East

Pavilion West

IRIS PARK

NORTH CHARLES STREET

GATEHOUSE DRIVE

LA PETITE ACADEMY OF TOWSON

SANDY'S WAY

# Arriving to the Hospital on the Day of Surgery



- Arrive at the hospital at least **2 hours** before your surgery time.
- Park in **Lily Garage**.
- Take elevator to the main floor to enter Lobby E.
- Lobby E is on the 3<sup>rd</sup> floor of main hospital.

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# Directions to the General Operating Room (GOR)

- Once inside, **Lobby E**, walk down the corridor, you will pass a sitting area on the LEFT.



- Continue until you reach elevator E.
- Take **Elevator E** on the left to the 4th floor



- When you exit the elevator walk straight forward to the GOR registration desk.



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# The Pre-operative/Intra-op Areas

## In Pre-Op

- You will be given a hospital gown to change into
- You will be given in this pre-op area:
  - CHG wipes to clean your skin a 5<sup>th</sup> time
  - Nozin Nasal Sanitizer to begin your antimicrobial intranasal coverage
- Meet your surgical team: surgeon, nurse, anesthesiologist, tech
- Admission database will be completed
- Vital signs, IV will be started; IV fluids and antibiotic(s)
- 1 visitor is allowed in the pre-op area



*“To every patient, every time, we will provide the care that we would want for our own loved ones.”*

**GBMC**



# Pre-op Infection Prevention

**Nozin.**  
LEADER IN NASAL DECOLONIZATION.

**How It Works**  
Increased Protection Against Risk of Infections

The nose is a reservoir for bacteria that escape typical hygiene protocols such as hand washing. Nozin® Nasal Sanitizer® antiseptic equips health professionals, patients and individuals with a safe and effective nasal shield that helps decrease bacteria on nasal vestibule skin. Importantly, Nozin Nasal Sanitizer antiseptic is clinically shown to reduce nasal bacteria carriage without antibiotics.



**Nozin.**  
✓ Clinically proven  
✓ Kills 99.99% of germs



**RECOMMENDED BY HEALTH PROFESSIONALS**

Nozin® Nasal Sanitizer® is specially formulated to effectively address nasal carriage of bacteria:

- Effective – kills 99.99% of germs and is clinically proven to decrease nasal bacteria carriage
- No Antibiotics – alcohol-based antiseptic
- Safe, Fast-Acting – the active ingredient is ethyl alcohol, a well-established, trusted, broad spectrum antiseptic
- Pleasant – experience a soothing, moisturizing feeling and a soft smell of citrus
- 12-Hour Duration – soothing solution is well tolerated, safe for regular use and Nasal Sanitizer® effect lasts 12 hours
- Easy To Use – with the multiple use bottle, application of Nozin is simple and convenient

Think hand sanitizer for your nose.

Do you have an **orange fruit oil allergy**?

\*\*\*You will receive the Nozin at GBMC

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**Nozin.**  
**NASAL SANITIZER.**  
NOZASEPTIN® FORMULA ADVANCED ANTISEPTIC  
**PreOperative Pack** How to Apply



**Preparation Instructions:**

Clean nostrils with a tissue. Discard.



**Application Instructions:**

RIGHT nostril



Ensure swab rotation covers all surfaces, including the inside tip of the nostril.

Rotations per nostril: 16

LEFT nostril



Total # rotations: 32



**REPEAT**  
Repeat cycle with Ampules 2 and 3.



**USE AND DISCARD**  
Use all three (3) Ampoules consecutively.  
Discard after use.

Do not use if you have allergy to citrus oil, or you have nasal bleeding or irritation.  
**Intended Use:** Nozin® Nasal Sanitizer® is a topical antiseptic used to decrease bacteria on the nasal vestibule skin.  
**Active Ingredients:** Alcohol 62%  
**Precautions:** Use ONLY with sleeve on ampule. Do not extend ampule into nose beyond swab tip. Refer to Instructions for Use (IFU) for complete product information.

Nozin.

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# After Surgery

## **PACU I** (postanesthesia care unit)

- You will wake up and probably feel sleepy
- Your vital signs will be assessed every 15 minutes
- Cardiac and oxygen monitors will be in place
- Pain medications are available as needed
- Your anesthetist will evaluate your progress, once you have met the criteria for the next phase: vital signs are stable, pain is managed, and the room you will be transferred to is clean:
  - GBMC's pre-approved **Same-Day Discharge patients** will be **begin the PACU II phase**
  - GBMC's **hospital admit patient** will **be transferred to Unit 58**

## **Same-Day Discharge patients**

### **PACU II phase for discharge home:**

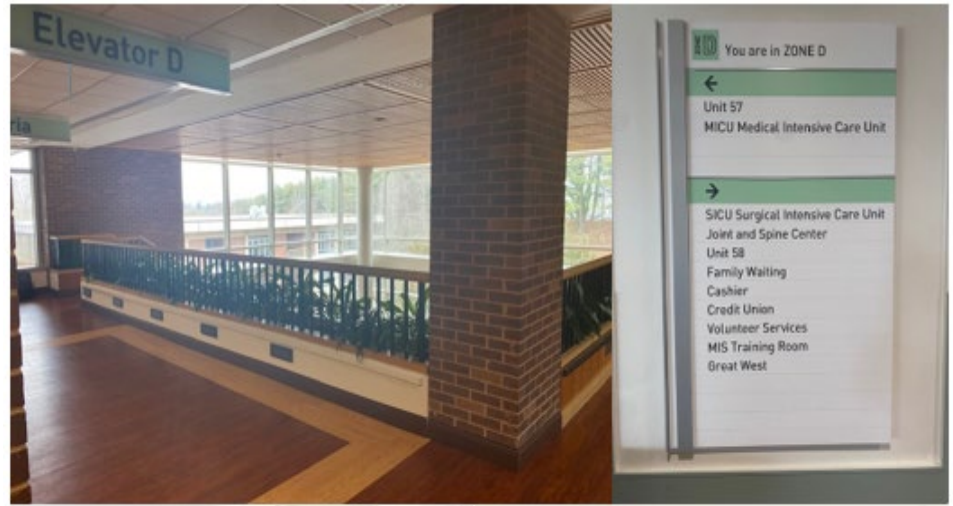
- Meet your Registered Nurse (RN)
- You will be given your Nozin 12 mL bottle kit; your nurse will teach you how to apply and when to apply the Nozin. Your first dose will be given at this time.
- **Goals for Discharge:** You will need to urinate, be medically stable (vital signs within normal limits, pain managed), and be given the final clearance for home by your surgeon/provider.
- Your Home Discharge Instructions (AVS) and post-op supplies will be provided to you and support person by your discharge nurse.

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# Hospital Admission: *in-patient admit*

- Once your vital signs are stable and pain is managed. Your anesthesiologist will clear you for transfer from the PACU to Unit 58.
- Unit 58 is located on the 5<sup>th</sup> floor of Zone D (Labor & Delivery entrance)



## Admission to Unit 58

- Private room
- Meet your RN (Registered Nurse) and NST (Nurse Support Tech)
- Communication Board updated
- Welcome Folder and your Nozin 12 mL bottle kit will be given to you when you arrive to U58.
  - Upon arrival, the nurse will be teaching you how to give yourself a dose of Nozin from your home kit.



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# Post-op Infection Prevention

- First dose: after surgery upon arrival to U58
  - Same-day discharge given in PACU
- Next dose: at 9 pm, then every 12 hours
- Continue every 12 hours until your 1<sup>st</sup> post-op visit or until the bottle is empty (30 days)



**Nozin.**  
LEADER IN NASAL RECOLONIZATION.

**How It Works**  
Increased Protection Against Risk of Infections

The nose is a reservoir for bacteria that invade typical hygiene protocols such as hand-washing. Nozin® Nasal Sanitizer® Antiseptic drops are health professionals, patients and individuals with a safe and effective nasal spray that helps decrease bacteria on nasal vestibule skin, importantly, Nozin Nasal Sanitizer Antiseptic is clinically proven to reduce nasal bacteria carriage without antibiotics.

**RECOMMENDED BY HEALTH PROFESSIONALS**

**Nozin.**  
Clinically proven  
Kills 99.99% of germs

**Nozin® Nasal Sanitizer®** is specially formulated to effectively address nasal carriage of bacteria:

- Effective – Kills 99.99% of germs and it clinically prevents or decreases nasal bacteria carriage
- Safe, Fast-Acting – the active ingredient is ethyl alcohol, a well-established, broad-spectrum antiseptic
- 12-Hour Duration – soothing solution is well-tolerated, safe for regular use and Nozin Sanitizer® effect lasts 12 hours
- No Antibiotics – alcohol-based antiseptic
- Pleasant – experience a soothing, moisturizing feeling and a soft smell of citrus
- Easy To Use – with the multiple use bottle, application of Nozin is simple and convenient

Think hand sanitizer for your nose.



**Nozin® Nasal Sanitizer® Multidose 12ML Bottle**  
How to Apply

Clean nostrils with a tissue. Discard.



**1. Shake**



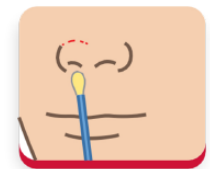
Shake bottle well.  
Remove cap.

**2. Saturate**



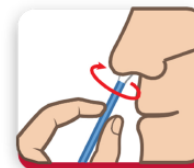
Apply **four (4) drops** of solution onto cotton swab tip.

**3. Apply**



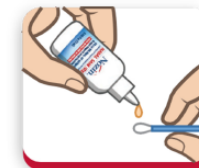
Insert swab tip into **RIGHT** nostril. Swab **eight (8)** times clockwise and **eight (8)** times counterclockwise.

**4. Swab**



Ensure swab rotation covers all surfaces, including the inside tip of the nostril.

**5. Saturate Again**



Re-saturate the swab tip by applying **two (2) drops** of solution.

**6. Apply Left Nostril**



Repeat application **steps 3 - 4** in the **LEFT** nostril.

**Do not use if you have allergy to citrus oil, or you have nasal bleeding or irritation.**

**Intended Use:** Nozin® Nasal Sanitizer® is a topical antiseptic used to decrease bacteria on the nasal vestibule skin.

**Active Ingredient:** Alcohol 62%.

**Precautions:** Do not extend applicator into nose beyond swab tip. Please also refer to Instructions for Use (IFU), product package and Nozin.com.

**Nozin**  
©2017-2020 Global Life Technologies Corp. All rights reserved. Made in USA. Nozin®, Nasal Sanitizer®, Popova® are trademarks of Global Life Technologies Corp. Patent Nos.: nozin.com/patents

Do you have an **orange fruit oil allergy?**

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# Visitor Policy: Inpatient Adult Units

- 4 visitors are allowed at a time, **1-visitor can stay overnight (9p-8a)**.
- Visitors 10-17 years must be accompanied by an adult over 18 yrs. Visitors under 10yrs are not allowed.
- Visiting Hours 8a-9p
- *Visitors must not be within the first 10 days of positive Covid-19 test*
- *Visitors with any respiratory symptoms must wear a mask covering the nose and mouth at all times*
- Visitors must remain at the bedside and use the call-bell for all patient requests
- If you require an ADA exception, please call the Joint & Spine Center



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# Pain Management

- Pain scale 0-10
  - “0” means no pain
  - “10” means the worst pain that you have ever had
- Remember: You should **not** expect your pain level to be “0” after surgery
- Pain medications are available as needed (prn), you must ask for your pain medications.
- **Call** your nurse when you are experiencing pain above your goal



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# Sequential Compression Device

- Used on your lower extremities to help circulation
- Help prevent blood clots



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# Lung Exercises: Before Surgery & After Surgery

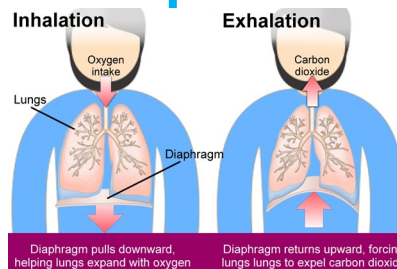
## Purpose:

*Exercise your lungs to help with gas exchange before, during, and after surgery. Will help prevent post-op pneumonia.*

- Before surgery: At least 30 times throughout the day, starting in the morning.
- After surgery: 10 times an hour when awake.

## ➤ Deep Breathing & Coughing

1. Sit upright.
2. Take a few slow breaths, then take a slow, deep breath in through your nose.
3. Hold your breath for 2-5 seconds.
4. Gently and Slowly breathe out through your mouth making an “O” shape.
5. Repeat 10-15 times.



## ➤ Incentive Spirometry

1. Place mouth on mouthpiece.
2. Take a slow, deep breath in and hold for 5-10 seconds.
3. Exhale.

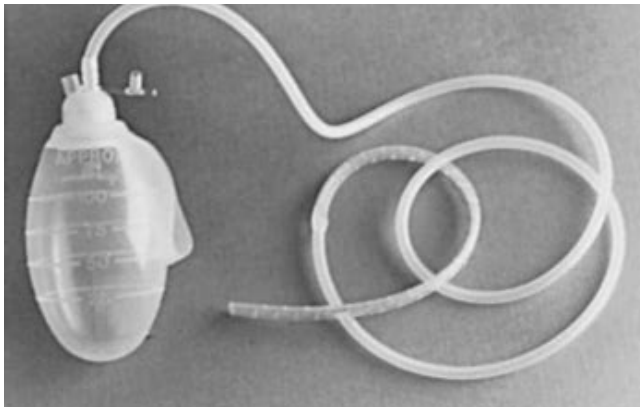


**MyChart**  
at GBMC

How to Properly Use an  
Incentive Spirometer

# Surgical Drains

- A surgical drain is a tube used to collect blood or other fluids from a wound
- If you need a drain, it will be placed by your surgeon during your surgery



Jackson Pratt (JP Drain)



Hemovac

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# Cervical Collar

- For patients having cervical surgery:
  - Your surgeon may order a soft collar or a hard collar depending on the type of surgery
  - Patients are usually ordered a soft collar for comfort and maintaining spine precaution



Soft Collar



Philadelphia



Aspen

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# Lumbar Brace

- For patients having a lumbar fusion
  - Your surgeon may order a brace to wear when you are out of bed
  - You need to be fitted for your brace prior to surgery
    - Call **Synergy Orthopedics**: 443-681-8971
  - Bring your brace to the hospital



LSO



TLSO



Insurance only covers for one back brace -  
***Do not give or throw away your brace!***

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# Abdominal Binders



- These are supplied by GBMC on your day of surgery
- Lumbar fusions: worn while in bed for comfort
- Lumbar Laminectomy and Microdiscectomy: worn for comfort

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# Fall Risk

- **Red** non-skid socks will be placed on you, signaling that you are at a high risk for experiencing a fall
- Do **NOT** get up without the help of staff assisting you.
- Use your call bell



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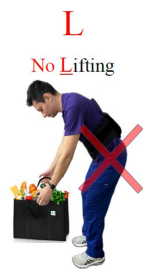
# SPINAL PRECAUTIONS



Greater Baltimore Center for Rehabilitation Medicine  
Acute Care Physical & Occupational Therapy  
Spinal Precautions



## NO BLT



Spinal Precautions Video



# Greater Baltimore Center for Rehabilitation Medicine Acute Care Physical & Occupational Therapy

## Spinal Precautions

Log rolling to a seated position in the bed.

Log rolling will maintain spinal precautions to decrease pain and discomfort.

Spinal Precautions Video



Bend your knees while lying flat on your back.



Roll to your side while keeping your shoulders and hips aligned and without twisting your back.



Push up with your arms to slowly raise your body as you lower your legs to the floor.



Sit upright with a straight spine and both feet on the floor.

When moving from a seated to a lying-down position, replicate this process in reverse.



### No Bridging

To prevent undue stress or strain on your spine, do not lift your hips off the bed while lying down.

Spinal Precautions Video:  
<https://vimeo.com/856399511/d507073358?share=copy>





# What to Expect in the Hospital

## Post-op day 1

- If you have a urinary catheter, it will be discontinued
- You will be evaluated by physical therapy (PT) and occupational therapy (OT)
- You will have one individual therapy session every day starting the morning after your surgery

## Post-op days 2 & 3

- More therapy - walking in halls and going to the gym to practice getting in and out of the tub/shower, in and out of the car, and going up and down stairs
- The drain may be removed before you are discharged.

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# Rehabilitation: PT versus OT

**Physical Therapy** – helps you with functional mobility

- Walking
- Getting in/out of bed
- Transfers into/out of a chair
- Going up/down steps
- Doing your exercise program

**Occupational Therapy** – helps you with functional activities of daily living (ADL)

- Getting dressed and bathed
- Getting in/out of tub/shower
- Using the toilet
- Car transfers
- Getting items out of refrigerator/cabinets
- How to use adaptive equipment if needed

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# Possible Medical Equipment Needs

## Raised toilet seats, bedside commodes, and toilet seat frames



*Raised Toilet Seat*



*Bedside Commode*



*Toilet Safety Frame*



*Tub/Shower Chair*

### Bedside commode

- Can be used next to your bed
- Can be used as a shower chair for your walk-in shower
- Can raise the height of your toilet

### Tub Seat/Shower Chair

- Decreases the risk of falls in the shower or tub
- Allows you to safely sit while showering if you have pain, dizziness, or get tired easily
- Shower doors on bathtubs may need to be removed

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# Possible Medical Equipment Needs



Approved

*Long Handled Sponge*



Not Approved

*Reacher*



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# Case Management

The Case Manager on Unit 58 will visit you the day after your surgery to continue working on your discharge planning needs

- Home with Out-Patient Therapy
- Home with Home Physical Therapy
- Skilled Nursing Facility (SNF)
- Equipment for home
- Offering resources

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# Medical Orders for Life-Sustaining Treatment (MOLST)

## MOLST

- Portable medical order form covering options for cardiopulmonary resuscitation and other life-sustaining treatments
  - Does **not** expire
  - Medical orders are based on a patient's wishes about medical treatments
  - The advance practitioner or surgeon will have the paperwork.
- Are **not** Advance Directives
- All patients that are transferred to another facility will **require** a MOLST form prior to EMS transport

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# Discharge Day (from Unit 58)

- Neurosurgical team and physical therapist will need to clear you for discharge or transfer.
- Occupation Therapy will teach you how to get in and out of the car maintaining your spinal precautions.
- You will need to know your spinal precautions.

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# Average Length of Hospital Stay

- Microdiscectomy, laminectomy, etc: Same-day discharge home from the PACU
- Cervical Fusion: Anterior approach (from the front), 23 hour stay on U58
- Cervical Fusion: Posterior approach (from the back), 2 days on U58
- Lumbar Fusion: 2-3 night stay on U58

*YOU WILL NEED SOMEONE TO DRIVE YOU HOME  
WHEN YOU ARE RELEASED FOLLOWING SURGERY!*

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that we would want for our own loved ones.”*

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# General Post-Op Care

- Allow approximately 6 weeks for lumbar surgery and 4 weeks for cervical surgery for healing.
- Walking is the only exercise encouraged.
- No lifting anything over **8-10 lbs.**
- Minimize the use of stair and cars.
- No driving until you are seen for your 6-week post-op visit, unless otherwise instructed.
- Use your Nozin nasal sanitizer twice a day, every 12 hours.
- Daily CHG showers (*no soaking in the bath*)
- You will be sent home with prescriptions for pain medication. If you need a refill, call the office 3 days in advance. Prescriptions will not be addressed on weekends or after hours.
- The Maryland Department of Health & Mental Hygiene, you will be prescribed an opioid antidote called Naloxone (Narcan) in the event of an overdose.

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# Notify Your Nurse/Surgeon

- If weakness, numbness, or pain worsens
- If you have **trouble swallowing, swelling/mass, increase hoarseness** to your voice
- A temperature above **100.5**
- Notify the office immediately for any **drainage, redness, tenderness, swelling.**

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# Wound Care

- Keep wound clean and dry.
- If you have steri-strips, they will fall off on their own.
- You may take a shower, ***if your incision is not draining.***
  - Do not scrub the incision.
  - Dry area completely after showering. NO tub bathing for at least 4 weeks after surgery.
- Do not use lotions or moisturizes on your incision.
- Do not manipulate (pick or probe) your incision in any way.
- Schedule your post-op visit 7-14 days after surgery for a wound check for suture/staple removal

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# Wound Care

- A simple visual check for infection should be all that is needed each day
- Change dressing per your surgeon's instructions.
- Keep incision out of direct sunlight.
- Do not actively clean your incision unless you are specifically instructed to do so.

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# Wound Care

- **Lumbar Incision (lower back) & Abdomen Incision:** Clear dressing will stay in place for 48h. During this 48h, you may only shower if dressing is intact. After 48h, you can get your incision wet, but pat dry and place a new, clean, dry dressing of gauze & tape. Change daily until wound check.
- **Cervical Incision (front of neck):** Clear dressing will stay in place for 48h, then can be removed and incision open to air. Steri-strips will be under dressing and can get wet, but pat dry.
- **Cervical Incision (back of neck):** Clear dressing will stay in place for 48h. After 48h, you can shower and get your incision wet, but pat dry and place a new, clean, dry dressing of gauze & tape. Change daily until wound check.

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# Preventing Surgical Site Infection

- Use CHG with daily showers.
- Use 1 bottle each day for 5 days, for any concerns check with your surgeon if you need to use this past this point
- Nozin: Continue every 12 hours until your 1st post-op visit or until the bottle is empty (30 days, twice a day)



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# What Should My Incision Look Like?

Minimal redness, no drainage and no swelling.



Anterior Cervical  
Fusion



Posterior Cervical  
Fusion



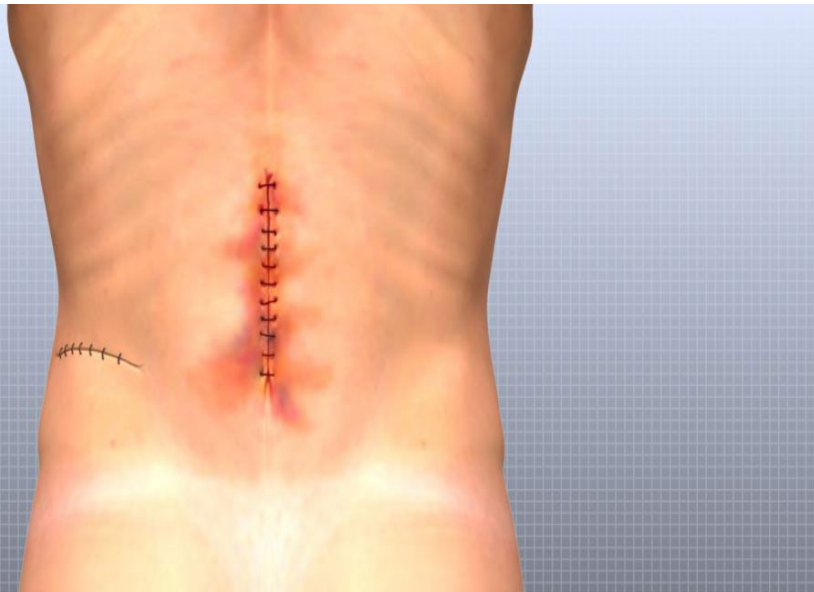
Lumbar Surgery

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# What Should My Incision **NOT** Look Like?

Swelling, spreading redness, warm, and tender.



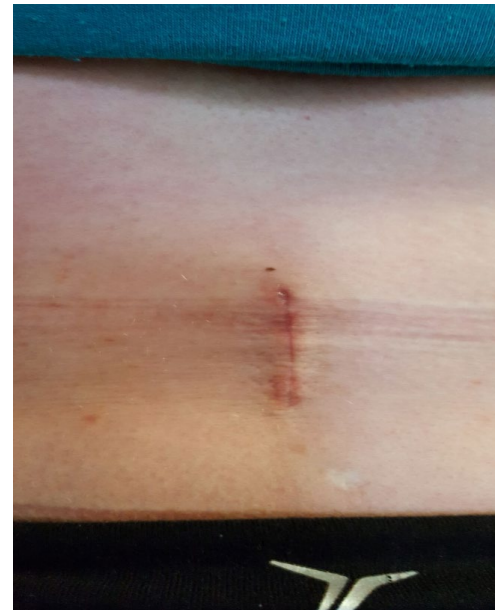
*“To every patient, every time, we will provide the care that we would want for our own loved ones.”*

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# What Should My Incision Not Look Like?

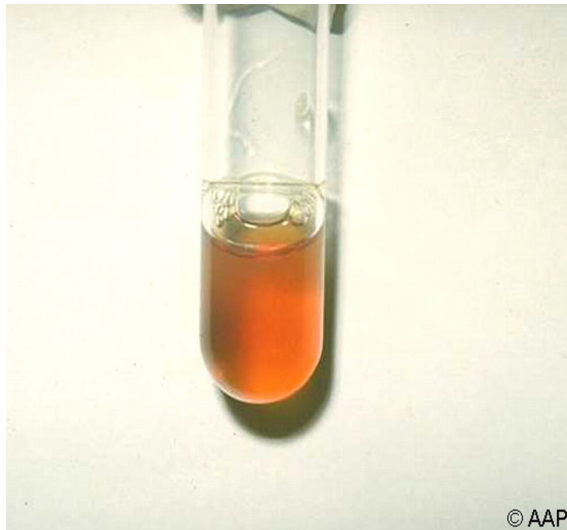
Do not let your waist band rub across your incision!



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that we would want for our own loved ones.”*

**GBMC**

# Call Your Surgeon If You Have Drainage



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## Discharge Day Checklist Guide - Spine

- \_\_\_\_ I have reviewed my discharge instructions with the nurse
- \_\_\_\_ I know who is my support person/help at home
- Post-op Physical Therapy/Occupational Therapy Agency: \_\_\_\_\_
  - Phone # \_\_\_\_\_
  - If I haven't heard from the Physical Therapy Agency 3-days after discharge or have any issues with scheduling, I will call my surgeon's office as soon as possible
- \_\_\_\_ Do I have my prescription(s)?
  - Medication(s) **MUST** be picked up the day of discharge
  - GBMC Walgreens can deliver your medications to your room, accepts cash or credit cards
- \_\_\_\_ Do I know the reason for and side effects of my prescriptions?|
- I have my...
  - \_\_\_\_ Walker and/or cane (if you do not have one, insurance approval is needed)
  - \_\_\_\_ Dressing material: gauze and Tegaderm/tape (if needed)
  - \_\_\_\_ 5 Bottles CHG Solution and Disposable Wipes
  - \_\_\_\_ Nozin<sup>®</sup> Nasal Sanitizer<sup>®</sup> 12-mL bottle and starter cotton swabs
  - \_\_\_\_ Back brace or cervical collar (if ordered)
  - \_\_\_\_ Belongings that I brought into the hospital
- I will call my surgeon's office with any signs of infection such as, redness, swelling, tenderness, or puss-like drainage
- Please contact your surgeon's office with any questions at ( \_\_\_\_\_ )



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# Thank you for choosing GBMC for your Spine Surgery!



**Joint and Spine Center**  
**6701 N Charles St**  
**Towson, MD 21204**  
**Phone: 443-849-6261**  
Email: [jointspinecenter@gbmc.org](mailto:jointspinecenter@gbmc.org)  
Website: [www.gbmc.org/JointandSpine](http://www.gbmc.org/JointandSpine)

ACTIVATE your **MyChart** today





**S** SHUTTLE STOP    **V** VALET PARKING

N

**V** VALET SERVICES

Valet services (cash ONLY) will be available Monday through Friday at the following times/locations:  
7 a.m. - 6:30 p.m.

- Louis and Phyllis Friedman Building entrance
- Labor & Delivery (OB entrance) the Yaggy Atrium
- The Bus Loop outside Einstein Bros. Bagels (PPE)
- Physicians Pavilion West (PPW)

Labor & Delivery D

GOR 4th floor

Diagnostic Center LAB

Pavilion East

Pavilion West

**S** SHUTTLE STOP    **V** VALET PARKING

N

**S** SHUTTLE SERVICES

Beginning 11/9/2023 GBMC will provide shuttle services on a continuous loop Monday - Friday 7 a.m. - 5 p.m.

The shuttle accommodates 4 passengers at a time and will pick up from 3 locations:

- Friedman Building entrance
- PPW, Physicians Pavilion West
- Bus loop, Physicians Pavilion East (PPE)

NORTH CHARLES STREET

CENTER

GATEHOUSE DRIVE

NORTH CHARLES STREET

LA PETITE ACADEMY OF TOWSON

SANDRA R. BERMAN PAVILION

BLUEBELL PARK

BERMAN LOT

LOUIS AND PHYLLIS FRIEDMAN BUILDING

EMERGENCY DEPARTMENT

DAFFODIL PARK

LILY PARK

TULIP PARK

PHYSICIANS PAVILION NORTH

PHYSICIANS PAVILION WEST

PHYSICIANS PAVILION EAST

IRIS PARK