

**Moe R. Lim, MD**  
Adult Spine and Cervical Spine  
Patient Appointments: (919) 957-6789

**What to Expect with a Posterior Lumbar Fusion**

***Surgery***

- Incision(s) will be vertical and approximately 2 - 8 inches long.
- Surgery can take 3 - 6 hours, depending on the extent of surgery.

***Length of Stay***

- Most patients go home 1-3 days after surgery.

***Pain***

- In addition to the incisional pain in the back, you may experience referred pain in the hips, buttocks, and thighs.
- You may experience “reminder pain” after your surgery. This pain is due to postoperative swelling and irritation of the nerves, and will resolve gradually.
- You will be prescribed narcotic pain medications after surgery. To avoid side effects such as excessive sedation and constipation, take the pain medication only when you are having pain, and stop taking them as soon as you can.
- You may drive after you have stopped taking narcotics.

***Brace***

- You will be given a brace to provide additional stabilization for the fusion. The brace is to be worn at all times until we remove it at 6 - 12 weeks after surgery.

***Mobility***

- The nursing and/or physical therapy staff will assist you with getting out of bed the first time after surgery.
- At home, we encourage walking multiple times a day as tolerated. Walking will help to prevent potentially life-threatening blood clots in the legs.
- Most patients are able to begin to perform activities of daily living several days after surgery. You should not lift anything over 10 pounds until cleared by your surgeon.
- Most patients begin postoperative physical therapy at 6 - 12 weeks after surgery.

***Work and Sports***

- Most patients return to deskwork at 2 - 6 weeks after surgery.
- Most patients return to heavier work and sports at 3 - 6 months after surgery.

***Nutrition***

- If you find that you do not have an appetite after surgery, try drinking nutritional supplements like Boost or Ensure.

***Medications that Affect Spinal Fusion***

- You must stop taking aspirin and other blood thinners (e.g. warfarin, Coumadin, Aggrenox, Plavix, etc.) for 5-10 days (depending on the specific drug) prior to surgery.
- You must avoid anti-inflammatory medication (e.g. ibuprofen, Motrin, Advil, Naprosyn, Aleve, etc.) for 7 - 10 days prior to surgery and for 10 weeks after your surgery.
- You must discontinue the use of bisphosphonates (e.g. Fosamax, Actonel, etc.) for 2 weeks prior to surgery and 8 weeks after your surgery.
- You must avoid nicotine exposure for at least 2 weeks before and 12 weeks after your surgery. This includes second-hand smoke.

***Follow-Up Care***

- You will need to follow-up with us periodically with x-rays for 2 years after surgery.

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For more information, visit the patient education website of the American Academy of Orthopaedic Surgeons at <http://orthoinfo.aaos.org>