

PACIFIC MOVEMENT DISORDERS CENTER

AT PACIFIC NEUROSCIENCE INSTITUTESM

DBS SURGERY DISCHARGE INSTRUCTIONS

Although post-operative recovery is somewhat different for every one, here are some helpful guidelines for the first few weeks after surgery.

ACTIVITY: For the first week post-surgery, avoid heavy lifting (over 5 lbs), but remain active. We recommend short walks separated by period of rest. After 4 weeks post-surgery, you can gradually resume all your activities including exercising, and practicing sports.

BATHING: You may shower or bathe when you go home. We recommend wearing a shower cap for the first 4 days after surgery to keep the scalp wounds dry. Following that period, you can clean your hair but avoid rubbing over the wound area. In addition, avoid getting the chest incision overlying the pulse generator wet for the first 4 days after surgery by covering it with plastic wrap. This incision is covered with Dermabond skin glue and does not require any bandage. The glue will peel off on its own over a period of about 1-2 weeks.

STAPLE REMOVAL AND WOUND CARE: The staples will be removed approximately 7 to 10 days after the surgery. The incision covering the pulse generator on the chest does not have staples. This incision has internal dissolvable sutures and the surface is covered with Dermabond skin glue. As with the other wounds, we recommend to avoid rubbing or scratching over the incision area. The glue will peel off on its own over a period of about 1-2 weeks.

DRIVING: You may resume driving two weeks after surgery provided that you are only using over-the-counter medication to control your pain by that time.

DIET: You may resume the type of diet you had before surgery.

WORK: You should have clearance from your doctors before returning to work. Generally 2-3 weeks off is recommended before resuming, although desk or computer work may be possible 7-10 days post-surgery.

WARNING SIGNS:

- Drainage from any wounds (may represent a sign of infection).
- Redness, warmth and swelling around the wounds.
- Persistent headache not relieved by medication and rest. (It is normal to have some mild to moderate headaches for up to 2 weeks after surgery).
- Persistent chills; onset of fever (over 100°F).

If any of the above symptoms occur contact Dr. Langevin's office. On weekends and after hours, the answering service will forward calls to the doctors. If the problem is urgent, you may need to go to the Providence Emergency room or your local emergency room.

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DBS SURGERY DISCHARGE INSTRUCTIONS / CONTINUED

MEDICATIONS: After the surgery, you should resume all the medication that you were taking for your movement disorder. You should suspend use of anticoagulation medication (warfarin, Pradaxa) and antiplatelet medications (such as aspirin, Plavix) for a period of 1 week after the surgery. You may be given prescriptions for new medications to take at home and possibly for medications previously prescribed; you may fill these at any pharmacy. Before discharge, your nurse will review your medication dosage, schedule and side effects. It is important to take medications as ordered.

Possible discharge medications include:

Pain Medication: This medication may include Tylenol or a narcotic formulation (Lortab, Vidocin). It should be taken only as needed every 6 hours.

Stool softener: This medication will be prescribed if you require a narcotic formulation to control your post-operative pain. It should be taken twice a day while you are on the pain medication. It should be held for loose stools.

APPOINTMENTS AFTER HOSPITAL DISCHARGE:

- **Follow-up with Dr. Langevin:** 1-2 weeks after surgery.
Please call 310-582-7433 to schedule an appointment.
- **Follow-up with Dr. Petrossian and/or your neurologist:** 2-3 weeks after surgery.
Please call 310-582-7433 to schedule an appointment.

For additional information, and to learn more about a Patient Support Group, visit our website below or contact our office.

Thank you for choosing Pacific Movement Disorders Center.