Dhruv B. Pateder, MD, FAAOS

TOWN CENTER ORTHOPEDIC ASSOCIATES SPINE SURGERY

POST-OPERATIVE PAIN MANAGEMENT

- Post-operative pain is to be expected and will vary depending on several factors: the type of surgery, prior use of narcotic pain medications, and personal tolerance of pain. Your post-operative pain management will be discussed preoperatively and on an individual basis prior to discharge.
- Do NOT take any anti-inflammatory pain medication (also none as NSAIDsnon-steroidal anti-inflammatory drugs) for the first three months following surgery, as they may inhibit your body's efforts to fuse (mend the bones together). The medications include (but are not limited to): Motrin/Ibuprofen/ Advil, Alleve/Naprosyn, Excedrin, Lodine, Relafin, Celebrex, Daypro, Vioxx, Bextra, Aspirin, etc. The exceptions to this rule are IF we place you on these medications after surgery or if your internal medicine/family physician feels that you should be on Aspirin for cardiac issues or NSAIDs for other medical issues.
- The following mediations are prescribed for most patients unless there are contraindications:
 - a. Narcotics (Percocet, Vicodin, Dilaudid, etc.)
 - b. Muscle relaxers (Robaxin, Flexeril, etc.)
 - c. Steroids (Medrol Dose Pack)

• Some patients will also require short-term use of a longer acting narcotic pain medication (MS Contin, Oxycontin, etc)

Medications will only be refilled during office hours. Please be aware of how
many pills you have left so that you will not run out when the office is closed.

ALWAYS FEEL FREE TO CONTACT US WITH YOUR CONCERNS & QUESTIONS.

ADMINISTRATIVE QUESTIONS: Pamela Alcantara 703 483 4679

MEDICAL QUESTIONS: April Cournoyer, PAC 703 483 4656