

Idiopathic Scoliosis

Patient Information Packet

Idiopathic Scoliosis

Bones, joints, ligaments, tendons, muscles – they all are responsible for keeping the body in motion. Children especially are prone to orthopaedic conditions and injuries because their bodies are in a constant state of growth. If your child has been diagnosed with idiopathic scoliosis, we know that you and your family may be under stress. So, at CHOC Children’s Hospital, we’ll approach your child’s treatment with sensitivity and support—for your child and your whole family. And it will be our constant goal to maximize your child’s function, strength and quality of life.

No one in the region offers more expertise in pediatric orthopaedics than CHOC Children’s Orthopaedic Institute. We understand that children are still growing and require specially trained experts with experience treating their unique needs. Whether it’s a broken bone, scoliosis, a sports injury or a developmental disorder, we’re here to help kids grow into healthy adults.

THE CHOC APPROACH

At the CHOC Spine Center, we treat more Orange County children and adolescents with spine conditions than any other hospital. From easing back pain to correcting the most extreme spine curvatures, our multidisciplinary team covers a wide range of spinal conditions and injuries. We are actively involved in researching the very latest and effective treatments, and we consistently measure against national benchmarks to ensure the best outcomes.

CORRECTING SCOLIOSIS FOR ANY AGE

From infants to children to teens, our specialists have fine-tuned the most innovative and successful treatments for scoliosis. We take a conservative approach to treatment, first observing, and then prescribing bracing and exercise if necessary. (Learn more about the Scoliosis Home Exercise Program on CHOC.org: <http://www.choc.org/orthopaedics/spine-center/scoliosis/exercises/>). When surgery is necessary, the Spine Center provides patients access to a full range of treatment options in a setting specially designed to treat kids and teens. Our surgeons utilize the latest techniques such as growing rods to preserve growth and corrective spinal fusion.

SPINE SURGERY AT CHOC

Spine surgery is used to correct deformities of the spine that cannot be corrected using less invasive methods. Our surgeons utilize the latest techniques such as growing rods to preserve growth while correcting the curvature and thoracoscopic-assisted spinal surgery. Our fully integrated procedure rooms are designed to provide patients with the very best in safety and precision. We utilize the state-of-the-art O-arm® Surgical Imaging System, a multi-dimensional surgical imaging platform that provides real-time, intra-operative imaging of a patient’s anatomy with high quality images and a large field-of-view in both two and three dimensions. We continuously monitor a patient’s spinal cord throughout the surgical procedure, and an autologous blood recovery system is used to minimize post-operative blood transfusions.

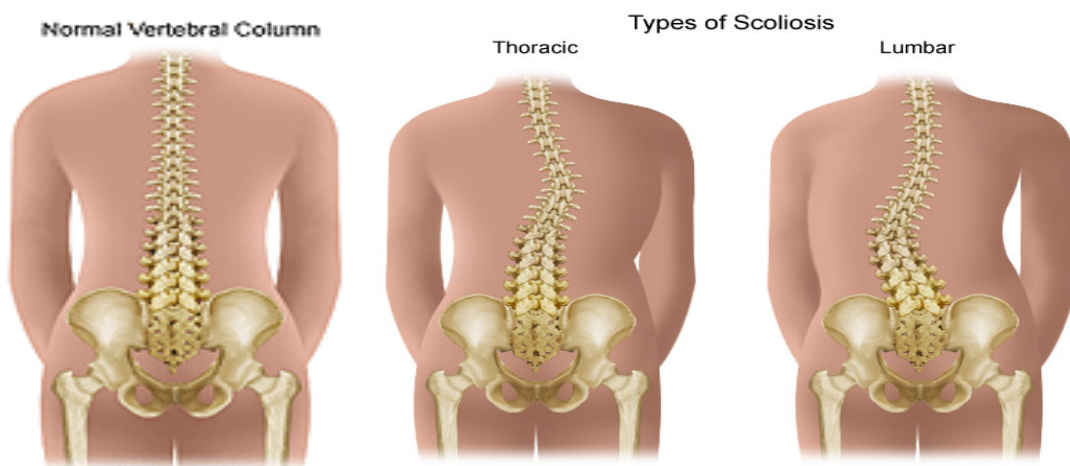


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Spinal Fusion Surgery For Idiopathic Scoliosis Patients

As children grow, they sometimes develop an abnormal shape or curvature of the spine. This curve may be seen by a doctor during an exam of the back, shoulders, rib cage and hips. Scoliosis is a sideways curvature that may cause twisting or rotation of the spine in different areas of the back. In early mild stages, a doctor may recommend physical therapy or a brace to help straighten the curvature.



Early diagnosis of scoliosis is important. Your child's pediatrician should check for scoliosis at every yearly physical exam. If your child's spine shows signs of curvature, the doctor may monitor it closely with X-rays every few months. If the curve worsens, or is more than 25 degrees, your doctor may refer you to the CHOC Children's Spine Center, where our spine specialists have fine-tuned the most innovative and proven scoliosis treatments available.

Spinal Instrumentation Surgery

The surgeon will make an incision in the middle of the back. Your/your child's muscles are moved to the side to allow the doctor to see the spine. Rods, screws, hooks or wires ("instrumentation") may be placed around and in the bones to straighten the spine and insure new growth is straight. The instrumentation pieces are permanent and hold the spine in proper position instead of a brace.

Potential Complications Of Spinal Instrumentation

BLEEDING:

Some bleeding is expected during the surgery but extra care will be taken to lessen the amount of bleeding. During the surgery, bleeding is controlled by cauterizing vessels. The loss of blood is also lessened by using a Cell Saver machine which suctions, washes and filters blood so it can be given back to the child's body instead of being thrown away. These steps are done to reduce the chances of the child needing a blood transfusion. If the surgeon thinks you/your child may need a blood transfusion, you will be asked to donate blood a month before surgery.



INFECTION:



Many things are done to lessen the risk of infection during surgery. Several days before the surgery, you will wash you/your child's back with special anti-bacterial soap. This will be repeated on the day of surgery as well. Sterile technique (a method used to keep the area free from germs) is used in the operating room to help prevent infection. You/your child will also be given antibiotics right before the surgery, during (for long procedures), and after the surgery. Finally, the surgeon will wash out the surgical site in your/your child's body with special antiseptic solution before the incision is closed.

NERVE INJURY:

During the surgery the surgeon will observe you/your child closely for any changes related to the nervous system (how the body interprets and relays messages for the senses). The spinal cord will send signals/electrical activity to your/your child's muscles—the surgeon will monitor these signals during the surgery. A Neurologist (a doctor who specializes in this body system) will also be present during the surgery. This type of monitoring gives the surgeon information so that the necessary action can be taken to solve any problem if it occurs during surgery. Nerve injury can occur but is very rare. It is important that you talk with your orthopaedic surgeon about this before the surgery as well as any other concerns you may have.



Idiopathic Scoliosis Surgical Checklist

AS YOU PREPARE:

| PICK UP YOUR MEDICATIONS

If your doctor gives you/your child a prescription for vitamins to help make you/your child stronger for surgery, please get them from the pharmacy.

| CONTACT THE ORTHOPAEDIC SURGERY SCHEDULER: 714-633-1079



Once you have completed all of the appointments from the above list, call the orthopaedic doctor's surgery scheduler to set the date and time of surgery. Let the scheduler know if you want to donate blood because it affects the timing of surgery. Please allow at least 2 weeks to get authorization from the insurance company. If you have any questions, please call anytime.

| MAKE YOUR PRE-OP APPOINTMENT: 714-509-8788

Once you have been given the date and time of surgery, make your pre-op appointment in the Orthopaedic Clinic at CHOC. This important appointment needs to be made within 2 weeks before your surgery date. Please plan for a 3 hour visit as we will need to talk about medical history, do a physical exam, go over all information about the surgery (including pre-op teaching and a hospital tour), and may need additional X-Ray pictures.

Pre-op Appointment/Time: _____

Surgery Date/Time: _____

Four Weeks Prior To Surgery

Blood Donation Choices:

1 | AUTOLOGOUS DONOR BLOOD DONATION (714) 509-8339



the surgery.

Autologous blood donation is self-donation of blood. Autologous blood transfusion is the collection and re-infusion of the patient's own blood. Blood is drawn from you/your child at least **four weeks before the surgery** and kept for possible transfusion at the time of surgery.

Are you interested in having you/your child donate you/their own blood for surgery? If so, please contact the surgery scheduler and he/she will notify blood donor services to schedule the blood draw appointments.

This conversation with the surgeon's scheduler should take place when scheduling

2 | DESIGNATED DONOR BLOOD DONATION (714) 509-8339



child's blood.

A designated blood donation is given by a specific individual to be made available for transfusion to a designated patient. If a family member would like to donate blood for you/your child (designated donor), please contact the blood donor services to schedule the blood draw appointment. You will need to contact the surgeon to get a prescription for the donor to donate blood. You/your child may need to go with the designated donor to the first appointment to make sure the donor's blood is a safe match to your/your

3 | BANKED BLOOD



Banked blood is available for patients who choose not to use the donor program. Banked blood is collected by the blood bank, carefully checked for diseases and considered safe for transfusions. If you choose to use banked blood, you/your child will be carefully tested and matched before any blood is given.

Two Weeks Prior To Surgery

WE ARE PREPARING FOR YOUR STAY WITH US:

| **PRE-REGISTER: 888-770-2462 OPTION 5**

Call CHOC Children's Admitting Department to pre-register the hospital stay. When you call, you will be asked for your phone number, address, contact information, insurance information and surgery date and time.



| **CALL AND SCHEDULE PRE-OP LAB WORK APPOINTMENT**

Schedule an appointment for lab work to be done. This should be coordinated with the orthopedic surgery scheduler.

The lab work (blood test, urine test, etc.) needs to be done within **48 hours** of your scheduled surgery date and time. If you have questions about lab work times please contact the orthopaedic surgery scheduler at 714-633-1079.

| **PRE-SURGICAL ADMISSION HOSPITAL TOUR: (714) 509 - 8473**



The pre-tour is a great way to get comfortable before your stay at CHOC. You will meet one of our Child Life Specialists who will give you a tour of pre-op and post-op areas, including what a typical hospital room looks like. They will also show you the resources available to you during your stay.

Also on your tour, you will receive some pre-op teaching and may meet some of the health care professionals that will care for you during your hospital stay.

The Week Of Surgery

IMPORTANT NOTE:

DO NOT USE ASPIRIN OR NSAIDS FOR 7 DAYS BEFORE SURGERY

You/your child should not take Aspirin, Ibuprofen, Motrin, Aleve or any medicine that has Aspirin in it the week before surgery. Aspirin makes the blood thin which can cause you/your child to bleed more easily in surgery. Tylenol (acetaminophen) is safe to use for pain. Please be sure to use Tylenol (acetaminophen) as directed on the package instructions. Please talk to the surgeon if you have any questions.

THREE DAYS PRIOR TO SURGERY

SHOWER WITH ANTIBACTERIAL SOAP; HIBICLENS®

To help prevent infection, an antibacterial soap called Hibiclens® needs to be used to wash your/your child's back before surgery. You can buy Hibiclens® over the counter at most drugstores; it does not require a prescription from your doctor.

1. Change your/your child's sheets so that they are clean.
2. Wash your hands with Hibiclens® for 15 seconds then rinse with water.
3. Wash your/your child's hair and face per normal routine. **Do not wash the face, eyes, ears, mouth or anywhere above the chin with the Hibiclens®.**
4. Pour the Hibiclens® soap on your hands and use only your hands to wash your child. Do not use a washcloth or a luffa.
5. Pay close attention to wash the back of the neck where the hair starts, back, underarms and sides.
6. Rinse with water and dry with a **clean** towel.



TWO DAYS PRIOR TO SURGERY

REPEAT SHOWER WITH ANTIBACTERIAL SOAP; HIBICLENS®

Repeat the steps as above in "Three Days Prior to Surgery."

One Day Prior To Surgery

CLEANSE SURGICAL AREA (BACK AND SIDES) WITH CHG® CLOTH

1. *Shower your child as you would normally and dry your child with a clean towel.*
2. Take one of the CHG® cloths and wash your child's back starting at the center and moving out in a circular motion making wider and wider circles until you reach the sides of the back, the neck and upper part of the buttocks. Do not use a luffa.
3. Repeat using the second CHG® cloth.
4. **Do not return to the center of the back with the CHG® cloth.** This insures that the cleanest part of your child's back is where the incision will be made.
5. **The CHG® cloth must be used to wash the back and sides only.**
6. **Let your child's back and side's air dry.**
7. Do not use lotion and do not flush the CHG® cloths down the toilet. Put the cloths in the trash.

TELEPHONE CALL WITH PRE-OP NURSE:

A CHOC nurse from the PreAnesthesia Testing (PAT) Unit will call before the surgery. He/she will tell you what time to arrive, give you instructions about when you/your child needs to **stop eating and drinking (8 hours prior to the surgery)** and tell you where to park. You may ask the nurse any questions that you have about the surgery or medications.

HOSPITAL PACKING LIST:

Pack a suitcase to bring with you to the hospital. We recommend packing the following items:

- Comfortable, loose clothes like gym shorts, yoga pants or pajamas. Make sure you bring tops that don't have buttons or zippers in the back. We will provide you slippers, but you also may bring your own.
- A favorite pillow, blanket or stuffed animal to make your stay more comfortable.
- Toothbrush and toothpaste.
- Comb or brush.
- Books, magazines, music, a laptop/tablet, games and other items to keep you occupied. All of our rooms have WiFi available.
- Movies, as many of our rooms have DVD players.
- Because of the medications used for surgery, many girls have their menstrual cycle while in the hospital, and you may want to bring feminine hygiene products just in case.

On The Day Of Surgery

☐ BEFORE ARRIVING | INSTRUCTIONS

You/Your child needs to stop eating food and drinking liquids including water, gum or candy 8 hours before surgery is scheduled. This is for safety and comfort.

We recommend that girls wear their hair in pigtails or two French braids on either side of your head. You will spend a lot of time lying on your back over the next few days, and this will keep the back of your head comfortable and your hair untangled. Also, Remove any jewelry and contacts.

☐ ARRIVAL TIME | PARKING

You need to arrive at CHOC at least two hours before your surgery is scheduled. This time is necessary for parking, registering in the Admitting Department and completing preparations for surgery in the Pre-op Unit. Enter at the main entrance of the hospital (1201 W. La Veta Ave) at the valet stand under the red canopy (See below for Valet Information). If you arrive before 5:15 am, you will need to park your own car in CHOC Visitor Parking which is located immediately west of the hospital.

Hours: Main Lobby Valet – 5am–8pm, Mon-Fri, excluding holidays

ED Valet – 24 hours/day, Mon-Sun, including holidays

- First 30 minutes free
- \$2 flat rate w/validation
- CHOC Outpatient Pharmacy: Free with validation
- Clergy or social workers with proper identification visiting patients and families: Free – show ID at self-parking booth upon exit
- Weekly, monthly, and quarterly passes are available at the parking booth and valet stands (\$10/week, \$30/month, \$75/quarter)
- \$8 Valet – \$2 with Rehab badge, ED discharge, or Surgery discharge call-down *with patient in vehicle only*

Please note parent wrist bands, room numbers, paperwork, or staff signatures will no longer be accepted as forms of parking validation.

Other Visitors (non- parents/guardians)

- First 30 minutes free
- ½ hour to 4 hours – \$5
- More than 4 hours – \$8
- Valet – \$8

Even though you will be in the hospital for an extended period of time, we recommend that you leave your suitcase in your car until after the surgery. This will prevent your family from having to keep track of many items until you're settled.

☐ FRONT DESK | CHECK IN

After parking, you may check in at the main entrance of the hospital, located near the intersection of Pepper Street and La Veta Avenue. You will check in at the Admitting desk, near the main entrance on the first floor of the hospital. Please bring your insurance card. After registration, you will be escorted to the Procedure Center on the third floor of the hospital.

☐ PRE-OP UNIT | ADMISSION

After completing the admission process, you will come to the Pre-op Unit with someone from the Admitting Department.

- When you arrive in the Pre-op unit, we will ask you questions about your/your child's medical and surgical history, do vital signs, give a **CHG®** back wash and start an IV.
- You will talk to your surgeon and meet the doctors who will take care of you/your child in the operating room.
- The family can stay with the child until they go into the operating room for surgery.
- We can give you/your child medicine to help relax before going to the operating room if needed.

Questions: If you have any questions about the eating and drinking restrictions, how to get to CHOC Children's, parking, or anything else regarding the hospital admission, please call the Pre-op Unit at 714-509-8576.

Notes:

Who's Who On Your HealthCare Team?

There are many people on your healthcare team. We all work together to meet your/your child's needs. We all work towards the same goal—ensuring that you/your child receive the best care possible. You/your child may meet different people and it may get confusing, so this handout is here to help you. It can be hard to remember everyone's name and what they do. It's OK to ask the members of your team who they are, what they do, what their jobs are and how you can reach them.



YOU! You are such an important part of this team. Your questions, your input, and your feedback are all very valuable. You know your child best, and we would like to work with YOU so we can best meet you and your child's needs. So you will be an active member in your [child's] care and will be involved in treatment activities.



Orthopedic Surgeons are “Attending” doctors who has completed training and is in charge of your care. They had specialized training in pediatric orthopedic surgery. He/She will Treat and coordinate your medical care and overall recovery (after surgery) program. Your orthopedic surgeon might also supervise a team of students, residents, and fellows — which means he or she may bring other people on rounds to visit patients.



Orthopedic Resident is a doctor who has graduated medical school and is now training in a medical specialty area, such as pediatrics or internal medicine. Doctors spend 3 to 7 years in residency training before taking tests to receive board certification in their specialty. Residents can care for patients in a teaching hospital, but they are supervised by Attending Physicians. Residents are great advocates for your medical needs and orders since they directly communicate and make recommendations to the Attending Physician.



Registered nurse (RN) is the person who will take care of you during your stay in the hospital. They can give medication, performs small treatments and procedures. They will also help with getting you out of bed to walk, and teach you how to take care of yourself after surgery. They work closely with MDs, Clinical Associates (Nursing Assistants)s, and the rest of your healthcare team. They are your point person as they are in direct care of your symptoms and needs. RNs have graduated from a nursing program and have a state license.



Physical Therapist. A physical therapist will provide education and teach you how to move with spinal precautions (movements such as log rolling). They will help you sit up after surgery and help you start walking and perform stairs if necessary. They will educate your family to help you to the restroom during your hospital admission, and ensure that your family can help you with all mobility required for a safe discharge home.



Clinical Associate (CA). A **Clinical Associate** is a nursing assistant who assists with activities of daily living (ADLs) such as hygiene and personal needs. They can provide some bedside care under the supervision of a nurse or other health care professional. CAs, by definition, does not hold a license or other mandatory professional requirements for practice, though many hold various certifications.



Child life specialist. Child life specialists offer comfort and the chance to talk about feelings. They're great resources for helping manage any emotions like stress & anxiety, while you're in the hospital. A child life specialist can help you deal with everything from getting blood drawn to missing school. They also help patients cope with a diagnosis of a serious illness.



Unit Secretary. They are a part of the healthcare team that helps to answer the phones/patient call lights and complete paperwork. They are useful guides and can tell you where to find things in the hospital such as showers, bathrooms, and cafeteria, etc.



Chaplain. A chaplain is available to provide spiritual support during your hospital stay. We have prayer sessions/spiritual support for you and your family held in the meditation/prayer room Monday – Friday from 1:30 – 2:00PM



Volunteer. Volunteers of all ages, from high school students to retirees, donate their time to help patients in hospitals. The tasks volunteers do vary from hospital to hospital, but might include bringing games and books to patients or taking them for a walk around the hospital.

Frequently Asked Questions

We look forward to taking care of you during your orthopaedic surgery. Our team will partner with you and your family to provide excellent care every step of the way. To help prepare you, please review the frequently asked questions below.

WHAT CAN I BRING TO THE HOSPITAL?

- You may bring anything that will make your stay more comfortable. This includes your favorite music, books, magazines, toys, photographs, pillows, blankets or stuffed animals.
- You may bring your own laptop to play games or watch movies. If available, CHOC may provide a laptop to play games. CHOC has wireless internet access. You must bring your own chargers for your cellphones, tablets, and laptops.
- We will give you a hospital gown to wear during your stay. At the end of your hospital stay, you may feel more comfortable in your own clothes, such as pajamas, robe, slippers, sweats or socks. Your nurse can help you decide when you can wear your own clothes.
- Remember to bring your toothbrush, toothpaste, comb/brush and any other personal hygiene items that you normally use.
- Bring a list of all the medications that you are currently taking. You may want to ask your parents for help with this list.
- If you have a Bi-Pap/ C-Pap machine, please bring this with you.

WHERE DO I GO ON THE DAY OF THE SURGERY?

- Please go to the front desk in the lobby of CHOC. You will be directed to the admitting department. They will walk you to the Pre-op unit.

WHAT IS THE PRE-OP UNIT?

- You will go to the Pre-op Unit where the staff will get you ready for surgery.
- You will be cared for by a RN. Your nurse will take your “vital signs” which are your heart rate, breathing rate, temperature and blood pressure. Your nurse will ask you questions about your health history, address your concerns and have a parent sign consent (permission) for the surgery.
- You will change into a hospital gown. In the OR, you will be in only your hospital gown. Personal items and clothing can be left with your family or can stay with you.
- You will have an IV placed in your arm or hand. Some medications and fluids will be given at this time through the IV.
- You will have the opportunity to talk to the surgeon and the anesthesiologist (the doctor that keeps you asleep and comfortable during the surgery) before you go into the operating room (OR).
- A staff member will bring you into the OR.

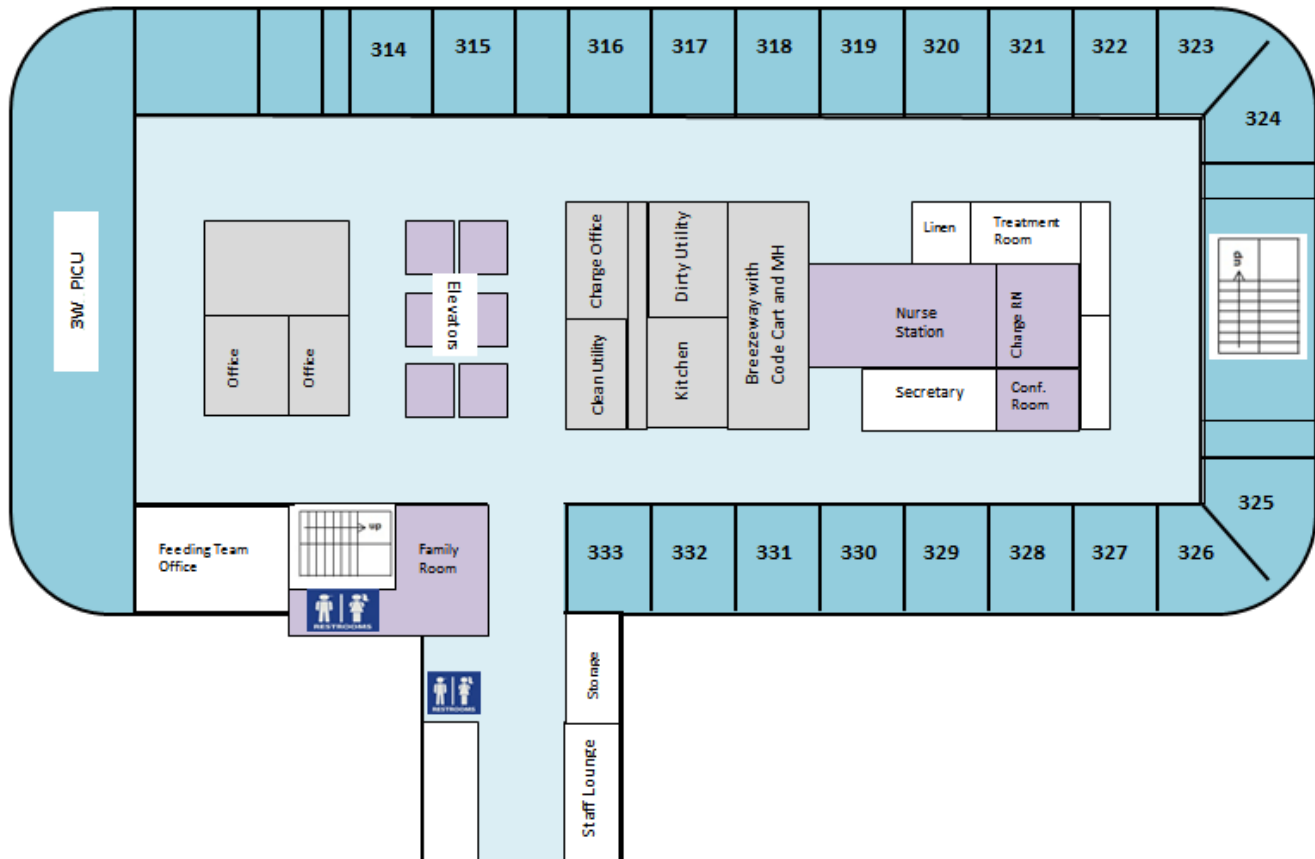
WHAT HAPPENS IN THE OR?

- The surgeon will perform your surgery in one of CHOC's state of the art surgical suites.
- The staff who will help with your care will be wearing deep blue scrubs and have caps on their heads to cover their hair. They will also wear face masks while in the operating room, so the only time you'll be able to see their faces will be in the pre-op unit.
- The OR will feel cold and have bright lights. The nurses will give you a warm blanket, but please ask for another blanket if you are still cold.
- After getting all of your monitors on (EKG, Pulse Oximeter, Blood Pressure cuff), one of the doctors who will be there during your surgery, called an anesthesiologist, will put you to sleep using your IV that was started in the pre-op unit. After you are asleep, more monitors and tubes will be placed such as an arterial line (for blood pressure) or central line (to give you fluids) or foley catheter (for your pee).
- You will be asleep for the entire surgery, and will be turned over onto your stomach. Being on your stomach for several hours can make your face a little puffy after surgery, but this will go away in a few hours.
- Your family members will wait for you in the lobby during the surgery, your operating room nurse will be calling them and giving them telephone updates during surgery.
- During surgery you will also be taken care of by a highly skilled team of RN's, Surgical Scrub Tech, Cell Savor Perfusionist, and Neuromonitoring Specialist. A Neurologist will be reviewing the sensory and motor function of your nerves remotely through the interface of the Neuromonitoring Specialist. The Cell Savor Perfusionist will help to collect any blood that is lost during surgery and process it so that it can be given back to you at the end of the surgery, so you don't lose too much blood for the procedure.
- When the surgery is over, you will be taken to the post-anesthesia care unit (PACU) where you will wake up.

WHAT IS THE PACU?

- The PACU is sometimes called the recovery room.
- After surgery, you will wake up here and stay here for a few hours before going to your hospital room.
- You will be taken care of by a RN.
- It may be noisy with a lot of bright lights and a lot of people talking. You may feel cold. The staff members will give you warm blankets to keep you comfortable.
- Parents may visit you in the PACU.
- After the PACU, you will be moved to the post-operative inpatient surgical unit on 3 East, or if medically necessary, to the pediatric intensive care unit (PICU).

What is the surgical floor?



- You will move to the surgical unit in the North Tower of CHOC, and will try to be placed into a private room.
- You will be monitored by a RN who takes care of up to 4 patients during their shift.
- The RN will help you with pain, walking, eating, nausea, and going to the bathroom to pee and poop.
- There is always a charge nurse available along with your RN and CA team.
- The RN will include you in the plan of care each day to help you achieve your goals each day to get you home.
- You will also be seen by a physical therapist, a child life specialist and a CA.

General Things To Know About Your Stay



MEALS

When you are awake enough to eat after surgery, you will start with clear liquids (water, ice chips, popsicles, juice, jello, etc) and slowly work towards eating regular food if your stomach does not get upset and you do not throw up.

When you are allowed to eat, you can use our room service style menu.

If your doctor says that you are on a regular diet, family and friends are welcome to bring you food from home.

If you are on special nutritional formula or diet, please inform the nurse/doctor for a special diet order.

CONSTIPATION

Constipation is a common problem for patients who have recently had spinal surgery.

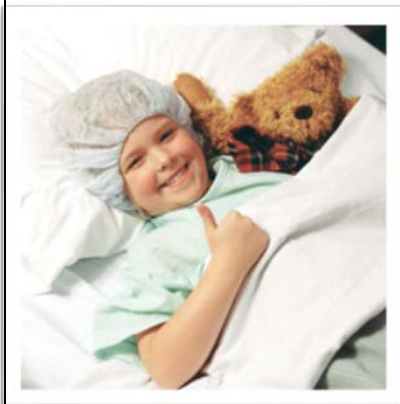
The following can help relieve constipation:

Drink 6-8 glasses of water each day.

Eat foods high in fiber such as fruit, beans, bran, whole grain breads and vegetables.

Move around as tolerated (sit, stand, and walk).

Your doctor will order a stool/poop softener or laxative to help prevent/relieve constipation. If you are on a current bowel program that includes medications such as Miralax® and/or Cone enema, you will need to inform the nurse/doctor so this program can be maintained.



FOLEY CATHETER

When you wake up from surgery you will notice that you have a small tube in place that is used to help drain your pee until you are able to get up safely from your bed to use the bathroom. It usually only stays in until you are walking, which should be the day after your surgery.

COMPRESSION LEG PUMPS

- When you wake up from surgery, you will have cloth around the bottom of both of your legs.
- The cloth is attached to a machine that causes the material to gently squeeze your legs and turn on and off automatically. It is not painful.
- This device helps your blood move through the body by gently squeezing your legs (very much like a massage). It will stay on you while you are not walking.



CENTRAL LINES, ARTERIAL LINES AND IV'S



Before you go in for surgery, a nurse will place an IV in one of your arms. This is a small, tube-like catheter that allows the nurses and doctors to give you medicine. When you wake up from surgery, you will notice that you have \ more IVs in your body. You may have one in your wrist and one near your neck—these are called an arterial line (wrist) and a central line (neck). These lines allow your nurse to give you medicine, watch your vital signs more closely and draw blood without having to poke you. Prior to going to the surgical unit, the arterial line will be removed.

INCENTIVE SPIROMETRY (IS)

- This device measures how much air can go into your lungs.
- The breathing tube is connected to the air chamber and has a mouthpiece at the end. The indicator is found inside the device.
- This device exercises the muscles used for breathing, which are important for keeping your lungs healthy while sitting in bed.
- The nurse or respiratory therapist will explain how to use this and how often you need to do it.



ACTIVITY AFTER SURGERY

- After surgery, the nursing staff will encourage and help you move as soon as possible after surgery. They will help you move from side to side by log rolling you every 2-4 hours, as well as getting you out of bed to the chair. Moving around after surgery helps with your healing process.
- Log rolling occurs when the shoulders and hips must be turned at the same time. The nurses will use pillows to help position your body and keep you comfortable.



Visit <http://www.choc.org/orthopaedics/spine-center/scoliosis/surgery> to view CHOC's physical therapy video.

PHYSICAL THERAPY

- Physical Therapy will play a big role in your rehabilitation. They will teach you how to move and teach your family how to help you appropriately after surgery.
- Physical Therapy may start as early as the day of surgery.
- At the first visit, the physical therapist will teach you how to log roll and sit at the edge of the bed.
- During your stay, you will learn to get out of bed, use the restroom, walk in the hallways, and perform stairs (if necessary).
- The physical therapy team will see you twice a day to progress your mobility until you are safe to discharge home.
- Family members are encouraged to work with physical therapy to learn techniques to help you move.
- The physical therapist will determine if you have any equipment needs prior to discharge.



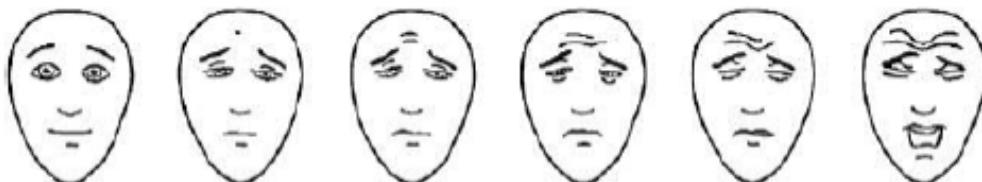
TIREDNESS

- After surgery, you may feel very sleepy and want to sleep a lot.
- The medications that help with pain will also make you sleepy.
- The hospital may be noisy and the bed may feel different from your own, you may not sleep as well as you do at home. So please let us know if the noise level is too loud at any point during your stay.

WHAT DOES A PAIN LEVEL MEAN?

- At CHOC it is our job to help take care of your pain. We will listen to you when you tell us that you are having pain. Your nurse will ask you about your pain many times throughout the day/night.
- Pain scales help the nurses and doctors know how much pain you are having. We use numbers or faces to help you tell us how much pain you are having.

CHOOSE A NUMBER FROM 0 TO 10 THAT BEST DESCRIBES YOUR PAIN
Seleccione un número del 0 al 10 que describa mejor su dolor.



PAIN CONTROL

- After surgery, your pain will be controlled by a patient-controlled analgesia (PCA) pump.
- The PCA pump is connected to your IV by tubing once you are settled in the surgical unit.
- You will be given continuous pain medication through the PCA.
- You will also be taught how to give yourself extra pain medication by pressing a button connected to the PCA.
- You can usually get out of bed, walk and do other activities with the PCA pump.
- When you are able to eat food (usually 2 days after your surgery), your PCA will be removed and you will take pain medication by mouth.

Please talk to your healthcare team about ways to help you with your pain through methods other than medicine, such as playing games to keep your mind off the pain.



WE BELIEVE THAT YOU ARE THE EXPERT ON YOUR PAIN:

- Scoliosis surgery is a painful and long procedure. We try to keep you as comfortable as possible, but we need your help. You must be very honest with us and tell us how you are feeling.
- Talk to your nurse and doctor about your pain. As soon as you start feeling uncomfortable, talk to your nurse about the pain.
- Tell your nurse or doctor if your pain level is not okay and you are not feeling better.
- Your comfort is very important to us. We will work with you to manage your pain in order to participate in daily activities and to heal.

After Scoliosis Surgery

WHAT ARE MY ACTIVITY LIMITS AFTER SCOLIOSIS SURGERY?

- During your hospital stay your nurses, doctors and PT will help you with your daily activities and teach you how to move around at home.
- When you are at home, you will need to take it easy for 4-6 weeks.
- **No swimming in pool or ocean, or soaking in the tub for six weeks postop.**
- Home schooling/tutoring will be needed during this time; please contact your school to set this up.
- Your doctor will provide you with a letter to give to the school for the home schooling/tutoring.
- You will need to see the doctor 2 weeks after the surgery. If everything is well, the next follow up appointment will be made for 2-6 months after surgery.
- Limit activities that may cause twisting or rotation of the spine during the first 3 months (ie. swinging a baseball bat or tennis racket).
- No physical education or team sports for up to 6 months after surgery.
- It is okay to start light exercise such as walking distances or using an exercise bike after surgery. Remember **NO overhead lifting, twisting or contact sports.**
- At your 6 month check-up, you can discuss with your doctor about doing more activities.



HOW LONG WILL THE INCISION BE AND WILL IT LEAVE A SCAR?

- The length of the incision will depend on the number of back bones that need to be fused.
- You will have stitches on the inside of the incision that do not need to be removed.
- You may have staples on the outside of the incision that need to be taken out several weeks after surgery.
- Have your parent clean the incision gently. Don't be rough with the incision area; it may cause a problem or make the scar worse.
- Limit the amount of sun to the scar. Apply sun screen to the scar and reapply often.

CAN YOU SEE OR FEEL THE HARDWARE UNDER THE SKIN?

- The instrumentation should look and feel the same as the spine does now.

WHEN WILL I BE ABLE TO GET UP AND WALK FOR THE FIRST TIME AFTER SURGERY?

- Yes, physical therapy and nursing will help to sit you up first. Then, they will get you to stand within 24 hours of your surgery.

WHEN CAN I TAKE A SHOWER?

- In most cases, you may shower after your first appointment with your doctor (usually 2 weeks after surgery). Please check with the doctor first.
- Do not rub your incision.
- Do not bathe or soak in a tub until the incision completely heals, which usually is about 6 weeks.
- If you have long hair, you may want to go to a hair salon and have them wash your hair during the first 2 weeks after surgery.

WHEN CAN I GO BACK TO SCHOOL?

- In most cases, you may be able to go back to school about 6 weeks after the surgery. Check with your doctor first.

WHAT ABOUT GOING TO THE DENTIST?

- Try to not go to the dentist for 6 months after your surgery.
- If you must go, tell your dentist that you need to take antibiotics to prevent an infection.
- Your dentist should be able to prescribe the antibiotics.

DO I NEED A SPECIAL NOTE TO GO THROUGH A METAL DETECTOR?

- You will not need a special note to go through the metal detector.
- The material used for the surgery should not make the metal detector beep. If it does, you can show the security your scar and let them know that you have had scoliosis surgery, so be sure to dress comfortably.

TIPS AFTER SURGERY

- Keep the incision area clean and dry.
- If you have a fever, redness, or drainage or your incision smells stinky, contact your doctor.
- If the dressing gets wet or dirty, clean the incision as instructed and replace the dirty dressing.
- Increase your sitting time each day. For walking, increase your activity by 5-10 minutes per day.
- You need to check your skin for areas of redness. Call your doctor if you see redness that will not go away after 15 minutes.
- Your doctor will let you know which physical activity you are allowed to do. Remember NO overhead lifting, twisting or contact sports.
- You may have some pain after spinal surgery. When you go home, your doctor will prescribe pain medication if you need it.



CHOC Children's Map



CHOC Children's
1201 W La Veta, Orange, California 92868 (714) 997-3000

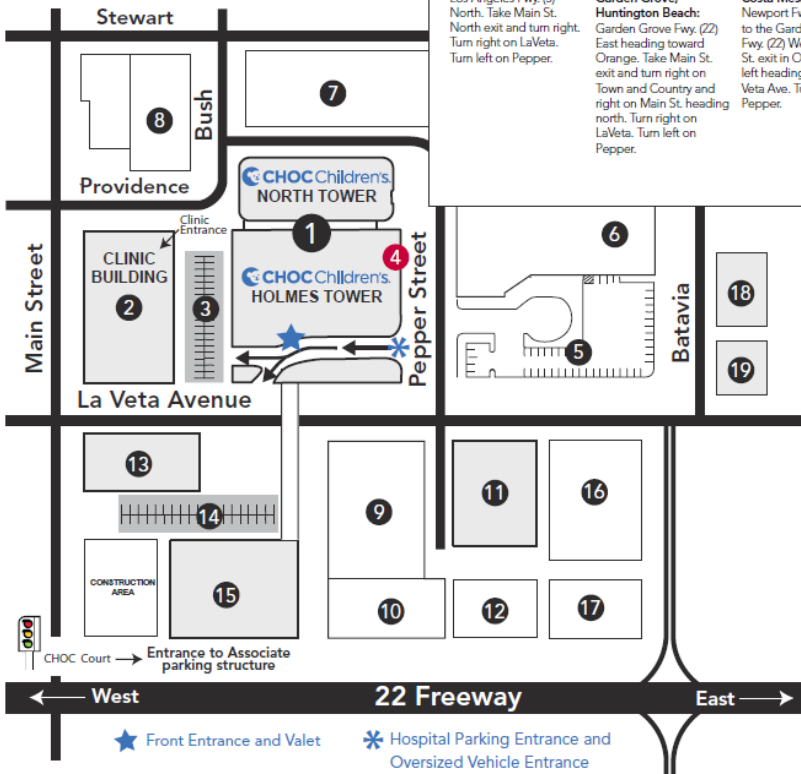
From South County:
Los Angeles Fwy. (5) North. Take Main St. North exit and turn right. Turn right on LaVeta. Turn left on Pepper.

From Westminster, Garden Grove, Huntington Beach:
Garden Grove Fwy. (22) East heading toward Orange. Take Main St. exit and turn right on Town and Country and right on Main St. heading north. Turn right on LaVeta. Turn left on Pepper.

From Newport Beach, Costa Mesa:
Newport Fwy. (55) North to the Garden Grove Fwy. (22) West. Take Main St. exit in Orange, turn left heading west on La Veta Ave. Turn right on Pepper.

From Buena Park, Fullerton:
Riverside Fwy. (91) East, to Orange Fwy. (57) South heading toward Orange. Take the Garden Grove Fwy. (22) East. Take Main St. Exit and turn right on Town and Country and right on Main St. heading north. Turn right on LaVeta. Turn left on Pepper.

From Anaheim Hills, Yorba Linda, Placentia, Corona/Riverside areas:
Newport Fwy. (55) South to Garden Grove Fwy. (22) West heading toward Long Beach. Take Main St. exit in Orange, turn left heading west on La Veta Ave. Turn right on Pepper.



- 1 CHOC Children's
- 2 CHOC Clinics
- 3 CHOC Hospital & Clinic/Visitor Parking
- 4 CHOC Emergency Department
- 5 St. Joseph Hospital Parking
- 6 St. Joseph Hospital
- 7 St. Joseph Hospital Expansion
- 8 Providence Building
- 9 St. Joseph Outpatient Pavilion
- 10 St. Joseph Outpatient Pavilion Parking
- 11 Centrum North Building/CHOC Children's Neurology Clinic
- 12 Centrum North Parking
- 13 CHOC Commerce Tower/CHOC Children's Urology Center
- 14 CHOC Commerce Tower Parking
- 15 CHOC Associate Parking Structure
- 16 SJH Center for Cancer Treatment and Prevention
- 17 SJH Cancer Center Parking
- 18 Ronald McDonald House
- 19 Batavia Woods Medical Offices

* Map not to scale