

Division of Pediatric Orthopaedics

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Scoliosis Surgery - What to expect

There are two general types of scoliosis surgery. One is a posterior spinal fusion, in which one incision is made in the back. The other is an anterior/posterior spinal fusion, in which two incisions are made - one in the back and one in the front. The latter procedure is usually used for more severe curves of the spine.

The most important part of preparing for surgery is the pre-operative planning. During this time, many important decisions must be made and a number of tasks need to be completed. Below is a list to help you keep track of them.

Check List for the Patient

- ___ **Pre Admission Testing Date _____ Time _____**
- ___ **Blood Bank (see attached pamphlet for information and prescription)**
- ___ **Iron supplements prior to surgery**
- ___ **MRI Test, if applicable**
- ___ **Clearance from pediatrician, if applicable**

Blood transfusion during and/or after is likely when undergoing scoliosis surgery, however there are instances when it is not necessary. The decision that you must make for your child is whether or not to accept blood directly from the blood bank. There are other options such as "autologous" and "directed" blood donations. Autologous blood donation is blood that the patient donated from him/herself prior to the surgery. Children over the age of 18 may participate in this program. Directed blood donation is blood donated by parents, siblings or any other family members and friends. Directed blood donors must match the blood type of the patient. In both types of blood donation, the blood is taken from the donor and stored until the time of surgery. See the enclosed pamphlet for more information and phone numbers for scheduling.

The Day of Surgery

On the day of the surgery, you should report to University Hospital, Same Day Surgery Dept. Room 250 on the E level. The nurses will register your child and begin preparations for the surgery. You can expect the surgery to take approximately 5 - 7 hours.

Immediately after the surgery, your child will be taken to the post-anesthesia recovery unit. At this time you will be allowed to see your child, and stay with him/her as they wake from the anesthesia.

After a few hours in anesthesia recovery, your child will then go to the Pediatric Intensive Care Unit. This is a special hospital room where close attention and monitoring is given to the patient by the medical staff. Your child may be in this type of room for 1-2 days depending on how fast they recover. Each child is unique with regard to the recovery process. During these couple of days, your child will begin to sit up in bed and then in a chair.

After the PICU, your child will be transferred to a regular hospital room where she/he will continue moving from bed to chair and begin walking with the aid of a physical therapist. Gradually, the soreness they feel will become less and less. In some instances, it may be necessary to wear a brace after the surgery. This is dependent on the quality of the bone in the spine as well as whether the growth spurt has occurred yet.

After a total of about 7-10 days in the hospital your child will be ready to go home. You should expect him/her to be out of school for about 6 weeks. There must be no participation in contact sports for about 1 year. Gradually, your child will be able to resume their regular activities and sports.

Surgery Date: _____ **Time:** _____

If you have any questions or problems, please do not hesitate to contact Emily or Michele at 973-972-0246.