

# Patient Discharge Instructions:

## Craniotomy

### Diet

- You may resume the type of diet you had before surgery. Eating a well-balanced diet is important for proper wound healing. The doctor or nurse will let you know if you need a specific diet or food consistency.

### Medications

- Your doctor will provide you with prescriptions for the medication you are to take at home. You may fill your prescriptions at the UCLA Outpatient Pharmacy, or you can have them filled at a pharmacy closer to your home.
- Before your discharge, your nurse will review with you and write down your medication dosage, schedule, and side effects. It is important to take your medications as ordered and try to stay on schedule.
- Do NOT take ibuprofen, aspirin, coumadin, xarelto or any other blood thinners unless instructed to do so by your surgeon.
- If you are unsure if a medication is safe, ask your physician and/or pharmacist.

### Comfort and Pain Management

- It is common to have a headache and/or pain after surgery. This may last a few days or a few weeks. You will have pain medications prescribed by your doctor for your pain management. The medication may be irritating to the stomach lining, it is advisable to take it with a teaspoon of applesauce or non-fat yogurt.
- Pain medication (narcotics) may cause constipation. A high-fiber diet may help if this occurs. If your symptoms do not resolve, use a stool softener or over the counter gentle laxative. If the medications are ineffective, call your doctor's office to discuss on-going pain management.
- Some medications such as Percocet, Vicodin and Norco contain Tylenol (Acetaminophen). Avoid taking these medications more frequently than directed; too much Tylenol can cause liver damage. Do NOT take over-the-counter products that contain Tylenol/Acetaminophen if you are already on these medications.
- DO NOT drive while taking narcotics!
- Eye/facial swelling is common after surgery and may take a few days to a week to disappear. Bruising may occur and will take one to two weeks to resolve. You may feel better if you sleep with two pillows under your head; keeping your head elevated will help reduce facial swelling.

### Expectations for Home

- You should clarify who will be picking you up on the day of your discharge (before 11:00 am). If you are returning home, please confirm who will be picking you up and who will be there for you when you return home.

### Overview of Daily Activities

- You may feel more tired for 1-3 weeks after surgery. Get plenty of rest.
- Walking:** Increase your activities slowly. Start with a gradual walking program of 5-10 minutes 2-4 times a day. Every few days, try to increase each session by a few minutes. You should walk every day. Walking will improve circulation, increase your feeling of well-being, and prevent pulmonary problems.

## Overview of Daily Activities (cont.)

- Lifting:** Do not lift more than 10lbs for at least 2 weeks or until your surgeon tells you to do so. Do not participate in sports or activities that increase your risk for head injury such as contact sports, bike riding, soccer, football, skateboarding.
- Other Activities:** Minimize activities that require you to bend your head downward (may increase headache) such as yoga, bending forward at the waist to pick up objects. Due to seizure risk, do not swim or hike alone. Avoid straining when having a bowel movement. Take laxatives as prescribed.
- When you see your surgeon in the follow-up appointment, he or she will discuss decreasing the limits on activity at that time. You may resume sexual intimacy when you feel well enough, but do not overexert yourself. **You must have clearance from your doctor before participating in any strenuous exercises/activity.**
- The brain will take roughly 2-6 weeks to heal. You may be very fatigued during this time. You may hear popping or dripping noises inside your head, but this is just a result of air and fluid reabsorbing after your surgery.

## Resume to Work/Driving/Air Travel

- You must have clearance from your doctor before returning to work, driving a car, or flying.** This will be discussed at your postoperative visit. Do not drive while you are on prescription pain medications.

## Wound/Suture Care

- Keep incision clean and dry at all times.
- Your incision will have either staples or sutures.
- Bathing/Incisional Care:** You may shower or bathe within 24 hours after surgery, however do not get your incision(s) wet until 4 days after surgery. We recommend that you shower with someone in the bathroom to assist you. Wash, do not scrub your incision. Do not immerse your head underwater. Your incision may be open to air; however you may cover the incision with a clean cap, scarf or hat.
- Surgical Dressings and Site Care:** You may remove your head wrap and/or dressings unless already removed or otherwise instructed 48 hours after surgery. There will likely be dried blood on the wrap and/or dressing. Your incision will have either staples or sutures. Keep the surgical incision clean and dry. You do not need to cover up the dressing at this point. If you have an abdominal or thigh incision, keep area clean and open to air. Cover with plastic wrap before showering. The "Steri-strips" on the incision will come off on their own. You may gently wash your abdominal or thigh incision with soap and water 4 days after your surgery.
- Helmet/Brace/Collar:** If you are prescribed a helmet, back brace, or neck collar, please wear as instructed (either at all times or when out of bed) until instructed (if you do not know how long to wear your helmet/brace/collar, please wear until follow-up appointment).
- Staple/Suture Removal:** You will be asked to return to the UCLA Neurosurgery Suture Removal Clinic in 10-14 days for removal (however 14-21 days if this is a second surgery going through the same skin incision). You will be provided with a handout explaining when and where to go. If you live far from UCLA, you may have your primary care physician remove your sutures/staples. Please discuss this with your physician and his team while in hospital.
  - **Neurosurgery Suture Clinic:** Every Monday from 2:00PM – 3:30PM.  
Wasserman Building, 300 Stein Plaza, Suite 420  
Los Angeles, CA 90095  
Phone: **310-794-1572**

## Follow-up Appointment

- You should be seen in our post-operative clinic approximately 2 weeks after your surgery. Follow up with your surgeon as directed.
- Please schedule an appointment with only your surgeon if not already scheduled.

## Rehabilitation Needs

- If indicated, our rehabilitation professional will assess you prior to your discharge. We will order any rehabilitation needs and equipment prior to your discharge.

## Signs to Watch for at Home

- Always try to call your doctor first if you are experiencing any of the symptoms below:**
  - Onset of severe, persistent headache not relieved by medication and rest
  - Onset of increased drowsiness, confusion
  - Onset of nausea, vomiting, or diarrhea
  - Onset or worsening of visual problems
  - Onset or worsening of speech problems
  - Onset of or increased weakness, numbness or tingling
  - Onset of or worsening of seizures
  - Onset of persistent fever  $>101^{\circ}$ , chills, or stiff neck
  - Onset of shortness of breath, chest pain, one-sided leg pain or swelling
  - Redness, warmth, swelling or unusual drainage from wound(s)
  - Drainage that is foul-smelling
  - Stitches become loose
- For life-threatening emergencies that cannot wait, please go to the nearest Emergency Room for immediate evaluation or dial 911.**

## CONTACT INFORMATION

During business hours, please call UCLA Neurosurgery: **310-825-5111**.

After 5:00 PM, please call the UCLA page operator: **310-825-6301**. Ask to have the neurosurgical resident on call contacted for urgent questions.