Discharge Information and Instructions after Posterior Fossa Surgery

The following guidelines are intended to answer common questions that you may have after surgery. Please ask your nurse or doctor if you have other questions.

What to expect:

- Swelling and/or bruising on your scalp or neck area are common after a posterior fossa surgery. They usually disappear within 2-4 weeks after surgery.
- Some neck pain and headache can be expected after surgery. In most cases, these will gradually go away within a few weeks.
- Try not to keep your neck rigid to avoid the pain because this will only prolong the stiffness and aching.
- Some patients may feel dizzy and have some imbalance after this operation. Walking and other activity will help your body adjust and will speed recovery of your balance.

Activity:

- Walking is encouraged as much as possible. When you are tired or have a headache, stop and rest.
- Increase your activity gradually so that you are back to your normal routine 4-6 weeks after surgery. Guide your activity by your own progress. Avoid heavy lifting or straining in the first six weeks post op. Sexual activity may be re-started, as you feel able.
- Ask your doctor or nurse practitioner when you can resume driving after surgery.

Care of the incision:

- Wounds heal best in a clean moist environment.
- It is safe to shower 5 days after surgery with regular shampoo. Gently shampoo hair and incision to soften scabs and dead skin cells around the wound. Pat incision and area around the incision dry. Do not blow dry near the incision.
- Apply a thin layer of antibiotic ointment (i.e. Bacitracin over the counter) to the incision 1-2 times a day to keep the incision moist. The wound can be left open to air or you may place a small dressing to prevent ointment from getting on clothing. Use non-stick dressings and minimal adhesive tape around incision.
• Small amounts of bleeding may occur as the wound is healing, blot dry with a clean tissue and apply gentle pressure.

• Sutures and staples can be removed 10-14 days after surgery by a primary care physician, nurse practitioner and/or registered nurse (unless you have the re-absorbable type, which require no removal).

• Call the neurosurgery clinic at (415) 353-7500 if any drainage, puss, increased swelling or redness occurs.

Medications:

• Before you are discharged, be sure you understand how to take the medications you are prescribed. The pharmacist, nurse or doctor will review the medications with you.

When to call for help:

• Severe or increasing headaches.
• Nausea or vomiting.
• Severe or increasing stiffness in your neck.
• Clear watery drainage from incision area, nose, ear or down the back of your throat. This may mean you have a leak of cerebrospinal fluid.
• Drainage, pain, tenderness, redness or swelling of the incision; or failure of the incision to close and heal.
• Fever > 101° F (38.5° C).
• Any new changes in your neurological function (confusion, forgetfulness, inability to stay awake).

Who to call:

• The Neurosurgery Clinic at (415) 353-7500 is able to receive calls 24 hours a day. Someone will be able to answer your question or direct your call to the appropriate person to help you.

Follow up appointment

A post-operative appointment may have already have been scheduled for you. Please contact our clinic directly if you do not know the date, or need to change it.

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