



Inland Neurosurgery Institute

BRAIN, SPINAL, STEREOTACTIC, AND MICRONEUROLOGICAL SURGERY

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Diplomate American Board of Neurological Surgery

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Eligible, American Board of Neurological Surgery

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Discharge Instructions – Burr Hole Subdural Evacuation

General:

- Take the pain meds given you by your physician only as needed.
- Don't drive until cleared by your surgeon
- Do not have any dental/surgical procedures 2 weeks before & 2 months after your surgery
- Take stool softeners, lots of fluids, high fiber foods, and fruits/vegetables to prevent constipation.
- Stay mobile by walking (up to 30 minutes at a time)
- **AVOID:**
 - o Bending over or lifting more than 10-15 pounds
 - o Excessive activity for the first month after surgery
- Follow-up with your surgeon as indicated in your surgery packet.

Wound care:

- Keep wound dry for 5 days
- If your wound has a dressing, remove it 2 days after surgery (leave any glue and sutures in place)
- Shower after 5 days but do not take baths or swim
- After showers, dab wound dry
- Do not scratch wound

Notify surgeon:

- If your oral temperature is above 101 F
- If wound is leaking, red, or increasingly swollen
- If headaches worsen, you develop new weakness, or cannot urinate
- If you develop nausea, vomiting, sleepiness, or vision/speaking problems