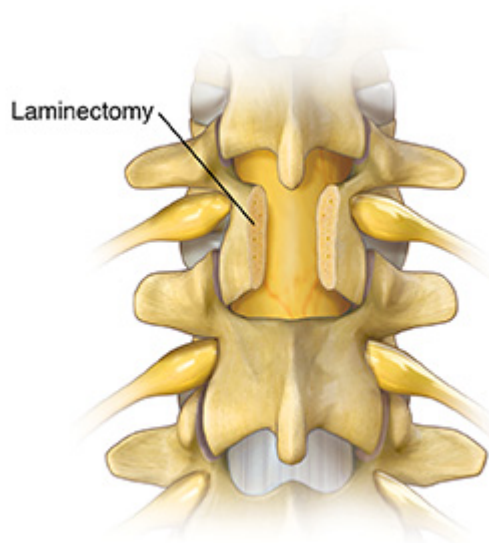


Laminectomy

Vertebrae are the bones that make up the spine. Laminectomy is a surgery that removes the part of the vertebra called the lamina. This takes pressure off nerves in the low back and helps reduce symptoms. A similar surgery is called a laminotomy. For a laminotomy, only part of the lamina is removed.

A laminectomy is usually done to remove pressure from the spinal cord or the nerve roots. It can also be done to access a tumor, an infection, an abnormal blood vessel, or a blood clot. A laminectomy can be followed by a fusion of the vertebrae.



The entire lamina is removed from the affected vertebra.

Before your surgery

Be sure to follow all of your doctor's instructions on preparing for surgery.

- Follow any directions you are given for not eating or drinking before surgery.
- If you take a daily medicine, ask if you should still take it the morning of surgery.
- If you take any blood-thinning medicines, such as aspirin, discuss them with your doctor at least a week before surgery.
- At the hospital, your temperature, pulse, breathing, and blood pressure will be checked.
- An IV (intravenous line) will be started to provide fluids and medicines needed during surgery.

During your surgery

- Once in the operating room, you will be given anesthesia.
- After you are asleep, an incision is made near the center of your low back. The incision may be 2 to 6 inches long, depending on how many vertebrae are involved. You may have 1 or 2 drains, which will be removed in the next few days.
- During a laminectomy, the lamina, or bone that forms the back of the spinal canal, is removed from the affected vertebra. The opening created may be enough to take pressure off the spinal cord or the nerve roots. If needed, your doctor can also remove any bone spurs or disk matter pressing on the nerve root. After laminectomy, the opening in the spine is protected by the thick back muscles, which are closed over the bony defect.
- Once the nerve is free of pressure, the incision is closed with stitches or surgical staples.

After your surgery

After surgery, you'll be sent to the PACU or postanesthesia care unit. When you are fully awake and stable, you'll be moved to your room. The nurses will give you medicines to ease your pain. You may have a small tube called a catheter in your bladder. Soon, healthcare providers will help you get up and moving. You'll also be shown how to keep your lungs clear with coughing and deep breathing exercises.

When to call your healthcare provider

Once at home, call your provider if you have any of the symptoms below:

- Unusual redness, heat, or drainage at the incision site
- Increasing pain, numbness, or weakness in your leg
- Fever over 100.4°F (38°C), or higher, or as advised

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