



Jason Taub, M.D.

Craniotomy Post-Operative Instructions

General Instructions

- In general the length of hospital stay varies between 3-7 days and full recovery may take 6-12 weeks so have patience.
- A post-operative CT/MRI will be ordered and reviewed the day after surgery. Like any major surgery, it will take your body time to recover from this procedure so make sure go get plenty of rest.
- Please make sure you have a family member/friend stay with you at home 48 hours post-operatively to monitor you for any changes.
- Avoid keeping the head of your bed flat. Use extra pillows while sleeping. No sofas or recliners for the first 2 weeks post-operatively.
- No lifting, this will increase your intracranial pressure and can cause complications.
- Absolutely no alcoholic beverages. These will make you more likely to develop a seizure.
- If craniotomy was because of a brain tumor or mass, radiation oncology and neuro-oncology consults and appointments will be needed
- Make sure you have your post-operative clinic appointment scheduled (typically 2 weeks post-operative). Call clinic to verify date and time.

Call Our Office if you have:

- Fever of 101.5 degrees or higher
- Unrelieved nausea or vomiting
- Difficulty Breathing or Chest Pain
- Postural Headache or any new headache
- A sudden increase in severe pain, numbness or weakness
- Loss of bowel or bladder control
- Drainage from your incision (other than occasional spotting of blood)
- Acute changes in the level of consciousness (increased confusion, memory loss, speech abnormalities)
- Any change in hearing or vision
- New onset of seizures
- If the office is closed and you cannot reach an On-Call Physician, go to the nearest Emergency Room for Evaluation.

Medication

Steroids: These will be given to you to decrease post-operative brain swelling and will be tapered by physician. These medications might elevate your blood sugar so be cautious and check your blood sugar regularly if you are a diabetic. Increased blood glucose will increase brain swelling.

Antiseizure Medicine: These medicines (Dilantin, Phenobarb, Tegretol, Depakote, Keppra) will decrease your chance of post-operative seizures. Please take as directed.

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Activity

1st Week Post-Operative:

- Get lots of sleep, your body will need it to recover quicker.
- No lifting or straining.
- Use skin sensitive shampoo like “baby shampoo” until incision is well healed.
- You may ride as a passenger in a vehicle but no driving.
- Early ambulation is encouraged to decrease your risk of increased risk of blood clots and pneumonia. Start off with 1-2 blocks a day and increase as tolerated.
- No sexual activity.

2nd Week Post-Operative:

- Make sure to attend post-operative visit for suture/staple removal and evaluation.
- Increase ambulation daily as tolerated.
- No driving, but may ride as a passenger.
- May climb stairs with assistance and not symptomatic.
- Try to wean narcotic medication and replace with non narcotic pain medication.
- No sexual activity.

3rd Week Post-Operative:

- Continue to increase activity and are allowed to perform basic tasks.
- May resume sexual activity if not symptomatic.

4th Week Post-Operative:

- Increase activity as tolerated.
- May return to work if OK with Dr. Taub.
- OK to drive when directed by Dr. Taub.

Please call our office if you have any questions or concerns:

LaTonya, MA 214-445-6960 Direct or 214-750-3646 Main