



**J. Michael Desaloms, 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 please have patience.
- A post-operative CT/MRI will be ordered and reviewed the day after your surgery. Like any major surgery, it will take your body time to recover from this procedure, so make sure you 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 as this will increase your intracranial pressure and can cause complications.
- Absolutely no alcoholic beverages. This 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 the clinic to verify the date and time.

**Call our office if you have:**

- Fever of 101°F or higher.
- Unrelieved nausea or vomiting.
- Difficulty breathing or chest pain.
- Postural Headaches 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 level of consciousness (increased confusion, memory loss, speech abnormalities).
- Any changes in hearing or vision.
- New onset of seizures.
- If the office is closed and you cannot reach the 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 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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**Craniotomy Post-Operative Instructions (cont.)**

**Activity**

**First Week:**

- 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. Lack of movement can increase the risk of blood clots and pneumonia. Start by walking 1-2 blocks per day and increase as tolerated.
- No sexual activity.

**Second Week:**

- Make sure to attend post-operative visit for suture/ staple removal and evaluation.
- Increased ambulation daily as tolerated.
- No driving but may ride as a passenger.
- May climb stairs with assistance and if you are non-symptomatic.
- Try to ween narcotic medications and replace with non-narcotic pain medication.
- No Sexual activity.

**Third Week:**

- Continue to increase activity and you are allowed to perform basic tasks.
- May resume sexual activity if non-symptomatic.

**Fourth Week:**

- Increase activity as tolerated.
- May return to work if cleared by Dr. Desaloms.
- May resume driving if cleared by Dr. Desaloms.

**Contact Numbers**

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