

Cervical Spine Injury and Neck Collar

You have injured the part of your spine that's in your neck, also called the **cervical spine**. You may have had surgery on this part of your spine.

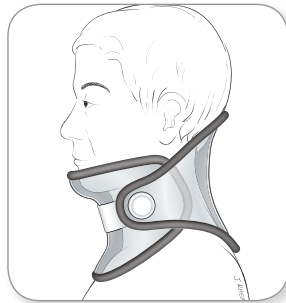
To protect your spine while it heals, you'll need to wear a neck collar, also called a **cervical collar**. You'll also need to limit certain activities for several months.

Wearing your collar

You must wear the cervical collar at all times, even while you shower or sleep. Not wearing the collar could cause more pain, further injury, or even permanent disability.

Because you'll need to wear the collar while showering, plan ahead so you'll have time for the collar to dry after your shower.

Remove the collar only to change the pads. Take the collar off and put it back on while you are lying in bed, and with help from someone else. Follow the steps you were shown in the hospital. It's very important NOT to move your neck while the collar is off.



If you had surgery

- Change your bandages at least daily, or more often if they become soiled. If your incision was sealed with **steri-strips**, you may shower with them. Do not pull off the steri-strips. In time they will fall off on their own.
- Check your incision site every day for signs of infection. These include redness, swelling, increased pain, extra warmth, or pus. If you see any of these, call your healthcare provider.

Activity do's and don'ts

For 3 to 6 months, **DON'T** do the following activities:

- Don't lift more than 10 pounds. In other words, don't lift anything heavier than a gallon of milk.
- Don't drive with your neck collar on.
- Don't do any activity that involves pushing, pulling, or twisting. For example, don't vacuum, mow, or shovel.
- Don't do any activity that could cause injury, such as contact sports or high-impact exercise. Avoid basketball, wrestling, and any sport that requires a helmet. Avoid hiking, biking, running, horseback riding, or ATV riding.

DO the following activities:

- Walk, do low-impact exercise, and resume normal daily activities. (You may resume sexual activity when your doctor says it's okay.) Be careful not to overdo.
- Keep your follow-up appointment with your primary care provider or the Trauma Service.
- You can return to work when your doctor says it's okay.

Warning signs — when to get help

If you have any of the symptoms below — especially if they are getting worse — **call the Trauma Service or go to the nearest emergency department:**

- Numbness, tingling, or burning.
- Arms or fingers feeling cold to the touch.
- Change in color — skin turning bluish or pale.
- Fever of 101.5°F or higher.
- Severe pain that is not relieved by pain medication.
- Signs of infection after surgery. These include swelling, redness, extra warmth, or pus oozing from the surgery site.

About managing pain

Pain medication won't relieve 100% of your pain, but it will make the pain more tolerable. Your need for pain medication should decrease over time, until eventually you don't need it. Ice can also be helpful for pain and swelling.

The Trauma Service and pain medication

The Trauma Service team can address only short-term pain. Because the Trauma Service does not manage chronic (long-term) pain, see the policies below:

- When you leave the hospital, you'll be prescribed enough pain medication to last until your follow-up visit, if taken as directed. During the follow-up visit, you may be given one refill prescription, if needed.
- The Trauma Service does NOT refill pain medications over the phone.
- The Trauma Service will NOT replace a prescription that's lost or stolen, or refill a prescription if you run out of medication early.

If your pain continues beyond 3 or 4 weeks, you'll need to see your primary care provider about managing pain.

Safety with opioid medication

Opioids are strong medications that change the way the brain processes pain. Examples include hydrocodone or oxycodone. Opioids can be dangerous if you don't use them correctly. To increase your safety, see useonlyasdirected.org and follow these general rules:

- **Don't drink alcohol or use recreational drugs** while taking opioid pain pills. This is especially important if you have injured your liver.
- **Don't take sleep aids, anti-anxiety medication, or other pain relievers** without your doctor's permission.

- **Don't drive a car, operate dangerous machinery, or care for others while taking the medication.** Opioid pain pills may harm your judgment.
- **Never share your pain medication.** Don't give a pill to a friend or family member, even if the person is in pain. Sharing pain medications is dangerous and illegal.
- **Lock up your pain medication** so that others cannot take it. (Some opioid medications may be a target for break-ins and theft.)
- **Take the medication only as long as you need it.** When the pain gets better, stop taking the medication. To avoid side effects from stopping suddenly, you may want to reduce the dose a little at a time for a few days.
- **Watch for side effects.**
 - The most common effect is constipation. Drink extra water and take a laxative or stool softener if needed.
 - The most serious side effect is decreased breathing, especially while you sleep. This can be deadly. If family or friends notice this problem, they should get medical help right away.
- **When you've finished taking the medication, get rid of leftover pills by properly disposing of them or dropping them off at a drug collection site.** For a list of sites, see: useonlyasdirected.org/safe-disposal-drop-off-locator For other information on safe disposal, see: useonlyasdirected.org/safe-disposal

Safety with over-the-counter pain pills

- **Don't take more than the maximum daily limit of over-the-counter pain pills.** Check the bottle for the number of pills you can safely take each day.
- **Especially, don't take too much acetaminophen (Tylenol).** Don't take more than 3,000 mg total every 24 hours. Some prescribed pain pills already contain acetaminophen. Ask your pharmacist if this is the case for you.