Description of Procedure
A spinal cord stimulator (SCS) is a device used to control pain after other treatments have not worked. The SCS delivers a small amount of electrical current to your spinal cord to block pain. SCS placement is surgery that is done in 2 stages. In the first stage, a temporary SCS is placed and left in for about a week. In the second stage, a permanent SCS is placed if the temporary device reduced your pain. You will get a remote control to turn the pulse generator on and off and adjust the pulses.

TREATMENT: What will happen

- Temporary lead placement: You may get general anesthesia to keep you asleep during the surgery or local anesthesia to numb the surgery area. Your surgeon will place the temporary leads along your spine. An x-ray will help him put the leads in the right place. The leads will be connected to wires and attached to a pulse generator outside your body.

- Permanent lead placement: You will get general anesthesia to keep you asleep during the surgery. Your surgeon will remove the temporary lead and replace it with a new, permanent lead through an incision or needle in your back. He will tunnel the wires under your skin. The wires will be connected to the leads on your spine.

Care Agreement
You have the right to help plan your care. Learn about your health condition and how it may be treated. Discuss treatment options with your caregivers to decide what care you want to receive. You always have the right to refuse treatment.

Risks
The spinal cord stimulator may not work correctly and you may need to have it replaced. You may develop a headache, or your pain may get worse. Surgery may cause you to bleed or to leak spinal fluid. After surgery, you may get an infection at the incision site. You may also get a serious infection, such as an abscess near where the leads are placed. This may lead to paralysis or become life-threatening. Without treatment, your pain may get worse.

Reasons to Call Your Doctor
- You cannot make it to your surgery.
- You have a fever.
- You get a cold or the flu.
- You have questions or concerns about your surgery.

Seek Care Immediately
Your pain gets worse

Questions
Call (952) 405-6714

Instructions on how to prepare for surgery continued on back
Getting Ready

The week before your surgery:

• Write down the correct date, time, and location of your surgery.

• Ask your caregiver if you will need to stay in the clinic after your surgery. If you will be able to go home after the surgery, arrange for someone to drive you. Do not drive yourself home.

• Ask your caregiver if you need to stop using aspirin or any other prescribed or over-the-counter medicine before your procedure or surgery.

• Bring your medicine bottles or a list of your medicines when you see your caregiver. Tell your caregiver if you are allergic to any medicine. Tell your caregiver if you use any herbs, food supplements, or over-the-counter medicine.

• Tell your caregiver if you have a blood disorder or have ever had a bleeding problem.

• Tell your caregiver if you are taking any medicine that may cause you to bleed more, such as blood thinners.

• You may need blood or urine tests to check for infection and make sure your body is okay for surgery. You may also need an MRI to check your spine before your caregiver places the SCS. Ask your caregiver for more information about these and other tests you may need. Write down the date, time, and location of each test.

The night before surgery: Ask caregivers about directions for eating and drinking

The day of your surgery:

• Ask your caregiver before you take any medicine on the day of your surgery. Bring a list of all the medicines you take, or your pill bottles, with you to the clinic. Caregivers will check that your medicines will not interact poorly with the medicine you need for surgery.

• You or a close family member will be asked to sign a legal document called a consent form. It gives caregivers permission to do the procedure or surgery. It also explains the problems that may happen, and your choices. Make sure all your questions are answered before you sign this form.

• Caregivers may insert an intravenous tube (IV) into your vein. A vein in the arm is usually chosen. Through the IV tube, you may be given liquids and medicine.

• An anesthesiologist will talk to you before your surgery. You may need medicine to keep you asleep or numb an area of your body during surgery. Tell caregivers if you or anyone in your family has had a problem with anesthesia in the past.

The night before surgery: You will be taken to a room to rest until you are fully awake. Caregivers will monitor you closely for any problems. Do not get out of bed until your caregiver says it is okay.