

SPINAL CORED STIMULATION/PERIPHERAL NERVE STIMULATION TRIAL INSTRUCTIONS

POST SEDATION INSTRUCTIONS

- You may feel groggy for up to 24 hours.
- **DO NOT DRIVE**, or operate machinery today.
- **DO NOT** sign legal documents for 24 hours.

ACTIVITY RESTRICTIONS DURING THE TRIAL PERIOD

- Do not drive with the SCS "on".
- Do not bend or twist at the waist.
- Do not lift anything that weighs over 5 pounds.
- Keep the dressing dry. Do not shower. (sponge baths only)
- When you lie down, "log roll" (keep spine aligned) to change positions. Do not sleep on your stomach.
- Wear the abdominal binder all the time.
- Limit stair climbing and strenuous activity.

CARE OF THE INJECTION SITE

- **CHECK THE DRESSING DAILY.** It should be intact.
- Notify the spine and Pain Center if you have any of the following: redness, drainage, swelling, chills or fever over 100F degrees.

SPECIAL INSTRUCTIONS

- Take your temperature daily.
- The programmer box is expensive. **DO NOT** drop or get wet.
- Do not pull on the cable or leads. **DO NOT** disconnect the cable and lead.
- Do activities that normally cause you to have pain and try different programmer settings.
- Record the results in the log for an accurate trial.

MEDICATIONS

- Continue to take all routine medications.

**If you have a problem specifically related to your procedure, please
call our office at 484-526-7246.**

**Problems not related to your procedure should be directed to your
primary care physician.**

Allentown

501 Cetronia Road, Suite 125
Allentown, PA 18104
Fax: 833-219-0472

Anderson

1700 St. Luke's Blvd., Suite 200
Easton, PA 18045
Fax: 833-219-0473

Bethlehem

830 Ostrum Street
Bethlehem, PA 18015
Fax: 833-219-0471

East Stroudsburg

3 Parkinsons Road
East Stroudsburg, PA 18301
Fax: 833-219-0474

Leighton

575 South 9th Street
Leighton, PA 18235
Fax: 833-219-0477

Orwigsburg

1165 Centre Turnpike Route 61
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Fax: 272-639-5152

Quakertown

1534 Park Avenue
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Fax: 866-291-6192

Tamaqua

120 Pine Street
Tamaqua, PA 18252
Fax: 833-219-6192

Warren, NJ

Bone and Joint
755 Memoriall Pkwy., Bldg. 201
Phillipsburg, NJ 08865
Fax: 833-219-0476

Phone: 484-526-7246

THESE INSTRUCTIONS HAVE BEEN REVIEWED WITH ME.

PATIENT SIGNATURE

NURSES SIGNATURE

DATE



Contact the company representative with any questions regarding settings or operation of the external programmer box.

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