



Ian P. Rodway, M.D. is a Fellowship trained, Board Certified Orthopaedic Spine Surgeon. Dr. Rodway has been practicing spine surgery at Beacon Orthopaedics since August 2008 and has extensive experience in all aspects of spine surgery. We pride ourselves on our excellent service standards and an unequalled reputation for top quality patient care.

CERVICAL DISC HERNIATION

- CERVICAL DISC HERNIATION
 - DISC BULGE CAUSING COMPRESSION OF NERVE ROOTS AND/OR SPINAL CORD
 - CAN RESULT IN STENOSIS, RADICULOPATHY, AND/OR MYELOPATHY
 - DIAGNOSIS CONFIRMED WITH MRI



COMMON DIAGNOSIS FOR CERVICAL SPINE SURGERY

- CERVICALGIA
- DEGENERATIVE DISC DISEASE
- FACET ARTHROPATHY
- HERNIATED DISCS: _____
- MYELOPATHY
- OSTEOARTHRITIS
- OSTEOPOROSIS
- RADICULOPATHY
- SCOLIOSIS
- SPONDYLOLISTHESIS
- STENOSIS
- STRAIN
- TRAUMA/FRACTURE
- OTHER _____

B

What to expect when Dr. Rodway suggests

Cervical Spine Surgery



ACDF – Cervical Fusion

This surgery is performed on the neck to relieve pressure on one or more of the nerve roots, or on the spinal cord itself. Dr. Rodway uses a small incision on the front of your neck to reach the affected areas. After the soft tissues of the neck are separated, Dr. Rodway removes the disc (the jelly like material between the bones or vertebrae of your neck) and any bone spurs that may be pinching or compressing a nerve or the spinal cord. The space is then filled with a bone spacer, such as cadaver bone also called an allograft, or a cage. You will then have implants, such as titanium screws and a plate placed for support.

Goals of the Surgery

- Restore alignment of the spine
- Improve arm and neck pain
- Limit motion across degenerated segment of the spine.

To learn more, visit our website at www.BeaconOrtho.com. When you click "spine" from the body part selector, you can click "Learn More" to find video content covering an array of neck and spine procedures.

Common Questions

How long does it take to heal? The actual fusion part of the surgery takes between 3 months and 1 year. Most patients return to work with some lifting restrictions within 2-3 weeks.

Will a fusion affect my range of motion? Most of the range of motion in your neck occurs between your skull and the top 2 vertebra. Each other level only contributes about 7 degrees. Most patients do not report a decrease in range of motion. In fact often patients perceive improved range of motion since they can now move their head and neck without pain.

Where does the bone graft come from? Bone graft will come from a donor graft or cadaver bone, known as an allograft.

Will I set off a metal detector? It is unlikely that the titanium plate and screws will set off airport metal detectors. It is also safe to have a MRI after surgery if one is needed.

Will I have to stay in the hospital? This surgery is done typically as an out patient procedure unless there are multiple levels involved or you have multiple health conditions. If you do require a hospital stay, most patients go home the following day after surgery.

What are the risks? As with any surgery there are multiple risk involved and these will be discussed at your preoperative visit.

What to expect after surgery

- Your arm pain will be improved after surgery. If you experience numbness, tingling, and/or weakness this may take longer to improve but most patients do see improvement in these areas.
- No lifting or overhead activity for several weeks.
- No driving for 2 weeks.
- You will have a cervical collar for support that you will wear for two weeks after surgery.
- Physical therapy will begin 6 weeks after your surgery.

Outcomes

Most patients experience favorable outcomes after this surgery. In most cases patients have relief from their pain and are able to successfully return to their normal activities of daily life.

Contact Us

Ian P. Rodway, M.D.
Beacon Orthopaedics

(513) 354-3700 extension 3644

jgander@beaconortho.com

Visit us on the web:
www.beaconspine.com