# Johns Hopkins Information for the patient in a Halo-Vest

## What is a halo-vest?
A halo-vest is a brace that is used to immobilize and protect the cervical spine and neck after surgery or accident. The halo is a ring that surrounds the head and is attached by pins to the outer portion of the skull; however, some Halos are pinless but are only used in certain situations. The vest is usually lined with sheepskin and worn on the torso. Rods known as “uprights” are connected to the vest and extend up to the halo. There will be screwdrivers taped to the uprights. These are to be left on at all times because they will be needed in the event of an emergency.

## Length of time in the Halo
Your surgeon will determine how long you need to be in the halo-vest. The length of time depends on the type of surgery, injury, individual health characteristics, and the healing process. X-rays will be taken to monitor the healing process. During these visits the doctor will discuss future plans with you.

## Preparation
- The use of a hospital bed may be an individual preference depending on the home environment.
- Identify obstacles that may be safety concerns before the patient returns home.
- Prepare activities for the patient during the recovery period, while mobility will be limited.
- For proper hygiene, consider cutting yours or your child’s hair prior to application of the Halo. Long hair will get caught in the pins and will make removal complicated.

## Activities
- Check with the doctor before going home to see what activities will be okay.
- Remember that balance, center of gravity, and coordination will be affected. You may need a walker for assistance.
- Due to weight of the Halo and your stature, you may not be able to walk.

## Eating
- During mealtime, try to avoid dropping food and liquids into the vest.
- Eating in restaurants is allowed.
- Do not consume any alcohol. This can interact with medications and increase the chance of falls.
| Hygiene | • Soaking in the tub and showering are not permitted. Sponge baths must be used during this time.  
• Do not allow water or soap to get into the vest. This may create a breeding ground for bacteria.  
• Use a soft cloth to remove any skin moisture around the edges of the vest.  
• Be sure to discuss hair care needs with your doctor. |
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| Post-Op Pin Care | • Cleansing pin sites is important to avoid infections.  
• Examine pin sites for crusting, drainage, redness, tenderness, loosening, or swelling. Notify your doctor immediately if any of these symptoms are occurring.  
• Pins should be cleansed twice daily, in the morning and before bed.  
• Specific pin care will be explained by your doctor.  
• A clean cotton swab should be used for each pin site. Do not re-dip cotton swabs into the solution. |
| Skin Care | • Check skin twice daily for redness, drainage, or skin discoloration. If any of these symptoms are noticed, notify your doctor immediately.  
• Inspect all areas that are covered by the vest and where vest edges meet the skin. A flashlight is a helpful tool to achieve full inspection.  
• Do not use any lotions or powders. These may cause skin irritation.  
• A halo should not hurt. |
| Clothing | • An undergarment may be placed by the doctor under the vest at the time of the halo-vest application.  
• Shirts can be modified or tailored to fit around the halo and vest.  
• Shirts with snaps, buttons, or zippers may be helpful during this time.  
• If handy, you may alter clothing with Velcro. See website for ideas |
| Shoes | • Do not wear high-heeled shoes. Shoes with low heels and traction are best for your safety.  
• Keep in mind, there may be a change in balance which will increase the risk of falls. |
| Travel | • Riding in cars is acceptable, however, long rides are discouraged due to fatigue and distance away from the medical center.  
• For children who require child passenger safety devices, your child will need one tall and wide enough to support the height and width of the Halo. Older children and adults can sit on the vehicle seat with the vehicle seat belt.  
• Do not leave the country, go on cruises, ride motorcycles, bicycles, |
or ride on toys. Do not drive or ride as a passenger on off road, rough conditions.

| Support | A strong support team is essential. It is important to respond in a positive and calm manner to the patient during this time.  
Depression may occur. It may be mild but if overwhelming symptoms occur, your doctor should be notified immediately. |
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| Sleeping | Sleeping will take a while to get use to. Lying on the back is suggested in the beginning, but eventually one may move to a side-lying or stomach lying position.  
Assistance rolling and getting out of bed will be required. For safety, you should have a monitor in the room or have another person sleeping in the same room.  
When getting out of bed, it is important not to sit upright and bend at the waist. This puts a lot of pressure on the vest and halo. Try to roll onto your side and drop legs over the edge of the bed. Use your elbow and hand to push sideways. |
| Halo Removal | Removal should be a wonderful day and is usually done in the clinic setting.  
A collar will be placed before removing the brace in order to provide some support while your neck regains strength.  
The nuts are loosened on the halo and a screwdriver is used to loosen the pins.  
There will be small open areas from where the pins were removed. These should scab over within 24-48 hours.  
Scars will remain but should fade over time. |
| Resources | Leann Sprankle Ortho Case Manager |

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