



POSTOPERATIVE INSTRUCTIONS

Before leaving the hospital:

If you are sent home with a Foley, or a wound drain, make sure your nurse reviews how to empty and care for it before you leave the hospital. If you have a colostomy or urostomy make sure you have the enterostomal nurses contact information for the particular hospital you were admitted to.

When you get home:

Please **DON'T** stay in bed. Walking and light activity are important to:

- Prevent blood clots.
- Expand the lungs and prevent pneumonia.
- Increase digestive tract motility which prevents nausea, vomiting and constipation.
- Increase blood flow to the surgical site to promote healthy wound healing.

Pain Medications:

All may be safely taken together.

- Take 50-75mg diclofenac every 12 hours and 1000mg Tylenol every 8 hours for the first 3-4 days minimum.
- The first day, take tramadol 50 mg every 4-6 hours then decrease as able.
- If the above medications do not control your pain you may take a stronger narcotic: oxycodone or dilaudid as needed. *Oxycodone and dilaudid may cause dizziness, nausea and constipation which is why they are best used only when needed.* Some patients may not need any narcotics medications to control their pain. Everyone is different.

Bowel Medications:

Please take these medications. Patients (who do not take stool softeners) find constipation and their first bowel movement to be the most painful part of recovery.

- Until your first bowel movement: Take your Miralax in water and Colace every day
- Prunes or prune juice are often helpful.
- If you are still feeling constipated: you may add milk of magnesia and a Dulcolax suppository. Though suppositories may sound uncomfortable, they usually provide great relief.

Activity:

- You may shower, but please do not swim or sit in a bath.
- You may climb stairs and walk longer distances if you are feeling up to it. Just start slow.
- Do not drive until you have been off narcotic pain medications for one week and feel strong enough to slam on the brakes if needed.
- Please avoid strenuous exercise (running, cross-fit), intense stretching, sexual intercourse and heavy lifting (> 15 lbs) until six weeks after surgery.

Diet:

Eat your usual diet. It will take a while for your intestines to completely recover, therefore we recommend that you eat multiple small meals and avoid anything you feel may upset your stomach. It is very important that you stay adequately hydrated after the surgery therefore, we recommend you drink at least 3 quarts of non caffeinated and non alcoholic liquid a day.

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What to expect:

Every day you are home you should feel a little better than the day before. You may have some light vaginal bleeding or discharge for up to 6 weeks after the operation. **Please call the office (408-827-4274) if:**

- If you are feeling worse and you are unsure why.
- You have a fever (temperature of 101 degrees or more).
- You have nausea that doesn't improve or vomiting.
- You see increasing drainage from the wound or increasing redness.
- You have constipation not improving with medications or persistent diarrhea.

Follow up:

Post-operative appointments are scheduled one to two weeks after your surgery. Call the office if you do not have one. If you were sent home with a Foley catheter, call the office on the next business day to schedule removal.