

Surgical Instructions for Major Procedures

We recognize that nearly all patients are worried and nervous before their surgery. Knowing what to expect and having your questions answered before the surgery can often alleviate much of the anxiety. The following material is presented to answer some of the most common questions that you may have before your surgery.

PREOPERATIVE TESTING VISIT

Blood work, x-ray studies, electrocardiograms, and other necessary testing are performed at this visit. An anesthesiologist will interview you to determine if you will require any additional testing or special anesthesia for your procedure. Unless you have specific questions, you do not need to see your physician on this visit.

DAY PRIOR TO SURGERY

On the day prior to your procedure, you will be asked to follow a specific diet and possibly a bowel preparation. While uncomfortable, this preparation is very important. Please complete the preparation. This ensures that your colon will be empty prior to surgery.

After midnight, do not eat or drink anything, including coffee, liquids, gum, candy, etc., until after your procedure. Your stomach must be empty prior to the start of anesthesia to reduce your risk of aspiration, the swallowing of regurgitated stomach contents into the lungs.

If you are taking any medications on a regular basis, please consult with your physician about whether or not you should take these medications on the day of your surgery.

DAY OF SURGERY

On the day of surgery you will check in approximately 2½ hours prior to your scheduled surgery. You will need to report to Admissions, which is located on the first floor in the University Hospital North Pavilion. You will then be taken to the preoperative (preop) area. In preop, you will meet the anesthesia team that will be in charge of your case. An intravenous (IV) line will be placed and additional lab work or preoperative (preop) antibiotics may be given at this time. Consent forms for surgery and information regarding living wills will also be reviewed while in preop. Your physician will speak with you and answer any last minute questions at this time. A member of your family may be with you for most of your time in this area.

You will then be transported to the Operating Room. Your family cannot accompany you to this area. They will be directed to the Family Waiting Room located adjacent to the operating rooms on the 7th floor of the hospital. Your family will be able to follow the course of your procedure using large monitors in the waiting room. Following your procedure, you will be taken to the Recovery Room or Post Anesthesia Care Unit (PACU). Your physician will speak with your family following your surgery. You will remain in the Recovery Room for about 2 hours. After leaving the Recovery Room, you will be transferred to your hospital room where you will reside for the remainder of your hospital stay.

Postoperative Instructions for Major Surgery

PRESCRIPTIONS

- **PAIN** - Your physician will prescribe a pain medication for you. Pain is an expected occurrence following surgery. It should improve as your postoperative period progresses. Use the prescribed medicine as needed. A heating pad is also useful. If you require significantly more pain medication than you were prescribed, please call the office.
- **ROUTINE MEDICATIONS** - You may resume all previous medications after discharge. Your physician will instruct you to discontinue medicines as necessary.

- **IRON** - Your physician may prescribe iron to help replace the blood cells lost at surgery. Be aware that this may constipate you and can turn your stool dark.
- **ANTIBIOTICS** - Some patients are prescribed an antibiotic to take after discharge. Please take the entire prescription regardless of whether you feel better or not. If you continue to have symptoms after finishing the antibiotics, please call the office.

APPOINTMENTS

You should be given an appointment for your postoperative check when you leave the hospital. This appointment will usually be 4-6 weeks after discharge. If you have a conflict, please call and reschedule at your earliest convenience. If you were not given an appointment for follow-up, please call our office when you get home to schedule this visit.

HYGIENE

Showers are preferable. If you prefer a tub bath, please consult with your physician or nurse.

ACTIVITY

- Driving after major surgery should be avoided until approved by your physician. In general, most patients can resume driving once they do not require narcotic pain medicine. It may take several weeks for your reflexes to return to normal. You should also check your auto insurance policy for any restrictions regarding driving after pregnancy.
- Fatigue is common for up to 6-8 weeks following major surgery. Fatigue is most noticeable during the first two weeks after surgery.
- If your surgery involved an abdominal, laparoscopic, or vaginal hysterectomy or a vaginal repair, you should avoid sexual intercourse, douching, and tampon usage until you return for your postoperative check.
- Light vaginal bleeding and discharge is common for 2-4 weeks following a hysterectomy or vaginal procedure.

DIET

- Eat a normal, well-balanced diet.
- Drink 6-8 glasses of fluids each day. You should also eat a high fiber diet to aid in helping return your bowel function to normal.

EXERCISE

- No lifting of objects heavier than 10 pounds until your postoperative check.
- Stretching exercises are acceptable; however, do not put undue stress upon your incision.
- Walking is encouraged. Use your comfort and fatigue as a guide. We recommend walking one mile (cumulative) each day after surgery.
- Vigorous exercises should be avoided until your postoperative examination.

BOWEL FUNCTION

- Following major surgery, bowel function does not return to normal for several weeks.
- We encourage a high-fiber diet, 6-8 glasses of water daily, and a stool softener such as Colace for the first week postoperatively.
- Milk of Magnesia or a mild laxative is recommended for constipation of two days duration.

Contact your physician if you have constipation, nausea and vomiting, or diarrhea for greater than two days or that does not respond to over-the-counter medication.

INCISION

- An abdominal incision may be cleansed with soap and water. Any unusual drainage or redness around your incision or temperature greater than 101 degrees should be reported to your doctor or nurse. Mild bruising around the incision is normal.
- Laparoscopy incisions may drain a small amount of fluid for 1-2 days. The same precautions as listed above apply to these incisions.

STAPLES/STITCHES

- If your incision was closed with staples, they will have to be removed in the doctor's office. If your incision is vertical, you will be given a time to return in 7-10 days for removal. If your incision is horizontal, they will be removed in 3-5 days.
- If your incision was closed with stitches, they will dissolve and do not require removal.
- If steri-strips (butterfly sutures) were applied to your incision, leave them in place for 5-7 days after which time they can be removed.

RETURN TO WORK

As a general guideline, allow 4-6 weeks following major surgery before returning to work. If you desire to return sooner, discuss this with your doctor.

COMPLICATIONS

- If you should develop any of the following, please call your doctor or nurse:
- Chills or fever greater than 101 degrees.
- Unusual, heavy bleeding (equal to or heavier than a menstrual period).
- Uncontrollable nausea, vomiting, or diarrhea.
- Redness, tenderness, or swelling in the calves of your legs (early sign of phlebitis).
- Redness, swelling, or drainage from your incision.
- Call the office for increasing abdominal pain.

If you feel that you need to be seen immediately, please call your doctor. Unless it is a true emergency, please call your doctor before going to the Emergency Department. This will save you time and make the best use of your health care resources.

TEST RESULTS

If you have any test results pending at the time of your discharge, the office will contact you to discuss the results with you. If you have not heard from us by one week, please call the office.