



Surgery Post-operative Instructions

1. Please schedule your post-operative visit for 10-14 days after your surgery unless otherwise instructed by your physician.
2. Expect to be very tired when you go home. You may progressively increase your activity, as tolerated. Use common sense. Do not lift objects greater than 20 pounds during the first six weeks. You should not drive for 2 weeks following surgery unless otherwise instructed by your physician. Check with your insurance company to determine if they have any further driving restrictions. Do not resume driving while taking pain medications or tranquilizers.
3. You may take showers when you are discharged. Do not worry about getting your incision wet. Dry the steri-strips with a hair dryer to avoid an odor. Remove the steri-strips (abdomen-tapes) at approximately 1 week post-operatively unless otherwise instructed. If you have surgical glue on your incision, please rub it off with a damp washcloth one week after surgery. Glue should be completely removed by the time you see your physician. There can be mild oozing at the incision site when the glue is removed – this is normal. If you were discharged home with staples or sutures that need to be removed, call the office to schedule an appointment.
4. You should have complete pelvic rest after a hysterectomy or pelvic reconstructive surgery. Do not douche, use tampons or have intercourse for 6 weeks, unless otherwise instructed.
5. Notify your doctor of excessive vaginal bleeding, urinary burning, unusual pain, or a temperature greater than 100.4 degrees. Bruising and swelling after surgery is common and can be quite extensive. This is only temporary. If your incision becomes tense, red, warm, painful or begins to drain, please contact the office. If you are having any problems or questions, please call our office.
6. After a hysterectomy, some bloody vaginal discharge may persist for 3-5 weeks. If you experience heavy bleeding (soaking 1 pad in 1 hour) notify your physician. The vaginal discharge often has an odor. Do not douche. If you underwent a urethral suspension and have been sent home with a bladder catheter, call the office to schedule its removal.
7. A decrease in your activity level and changes in your diet often result in constipation. Narcotics will also slow down normal colon function. A stool softener such as Benefiber, Citracel, Colace or Fibercon is recommended and available without a prescription. If you have no bowel movement and are concerned, you may use a laxative such as a Ducolax pill or suppository, or a Fleets enema. Miralax is a gentle laxative.
8. Using an anti-inflammatory medication such as Ibuprofen (Motrin, Advil) or Naprosyn (Aleve) will make narcotics such as Vicodin, Tylenol #3, and work better. You may take twice the amount listed on the over-the-counter bottle (i.e. 2400 mg/day for Ibuprofen). Do not use Ibuprofen or Naprosyn if you are on a prescription anti-inflammatory such as Celebrex. Side effects of the narcotics include drowsiness, constipation, and nausea.