

## **In-Patient Hysterectomy Post-Operative Instructions**

### General

- If you are having a Laparoscopic Hysterectomy or Vaginal Hysterectomy you can expect to spend one night in the hospital. Your doctor will routinely see the morning after surgery. You will usually be discharged around noon if you are doing well.
- If you are having an Abdominal Hysterectomy you can expect to spend 2 nights in the hospital.
- Both of these projected hospital stays are dependent on your ability to urinate, have some bowel function (pass gas) and obtain pain relief with oral pain medicine.
- They day of surgery you will have an I.V. line for fluid replacement and pain medicine and a catheter in your bladder. The next day the I.V. and catheter will be removed and you will be getting out of bed, ambulating and possibly showering.

### Driving

We suggest you do not plan to drive for 2 weeks following surgery and especially while taking narcotic pain relievers.

### Activity

At home we encourage you to “listen to your body”. You may go up and down stairs (a rough guideline is to limit your “round trips” to two a day for the first week), take a shower, and do what’s necessary to take care of yourself (though nobody else) for the first week or so. Gradually increase your activity daily, especially walking. Our guideline is to wait 4-6 weeks following surgery before strenuous activity, meaning straining that will cause your face to flush for an extended time.

### Pain

You will be prescribed oral pain medicine, usually a narcotic/acetaminophen combination. Additionally, you may take Ibuprofen over the counter 3 tablets every 6 hours. This can reduce the amount of narcotic pain medicine you need to take. Each prescription tablet will contain 325 or 500 mg of acetaminophen and that number will be on the prescription label. You can also take acetaminophen alone. If you have pain unrelieved by these measures, call the office.

### Nausea

Occasionally people require medicine for nausea relief when they go home. If so, we will prescribe something.

### Incisions

Most of the time you will have absorbable sutures under the skin which do not need to be removed. You may also have Dermabond, similar to “super glue”, applied which will gradually come off. Occasionally we use skin staples for wound closure and these will need removal in approximately one week.

### Bowels

Usually passing gas is from below is a condition for discharge. After surgery it is extremely important that you do not get constipated. The single major thing that makes people feel unwell after surgery is resumption of bowel function. We encourage you to have adequate to extra fluid and fiber intake. Products such as Metamucil, Citrucel, Benefiber, etc. taken on a routine basis (2-3 times per day) until bowel movements become regular and normal can help you recover more quickly. It is also safe to take Colace, Senna and Miralax. Surgery and narcotics both contribute to constipation. It is important, however, to take adequate pain relief since pain can also inhibit your ability to relax and have bowel movements more easily. Early discharge from the hospital also facilitates return to normal function since most people are easily relaxed in the familiarity of their own home.

### Bladder

You should be emptying your bladder normally when discharged. In rare instances when you are discharged with a catheter we will instruct you on how and when to remove it. If unable to void, call the office.

### Bleeding

You will probably have some slight bloody discharge that will gradually become white/yellow discharge. Any bleeding should always be less than a "normal" menstrual period. You may have a "gush" of bloody discharge 2-3 weeks after surgery. If persistent or if you have questions, please call the office. Many times at the post-op visit a small amount of raw slowly healing tissue at the top of the vagina, called granulation tissue, is seen and is usually dispensed with by an application of silver nitrate. This is quite common, can be source of discharge, but can always be eliminated.

### Questions

Please call our nurse at 314-432-3669 with any questions or concerns. That is also the number to call to reach the doctor on-call for after hour emergencies.

### Post-op appointment

You will be seen in 2 weeks. You will be made aware of this appointment date a time prior to your surgery, but we will also mail it to you. If for some reason you have not received this by one week following surgery, call the office at 314-432-3669 to clarify.