



SOUTHEASTERN SURGICAL ASSOCIATES

DISCHARGE INSTRUCTIONS

COLORECTAL SURGERY

Recovering from Colorectal Surgery

DIET: You may return to normal food after you go home from your surgery. Constipation can be a problem, in part from the stress of surgery and in part due to the pain medication. This can be avoided with the use of mild laxatives such as Milk of Magnesia or mineral oil, as well as increasing your liquid intake.

WOUND CARE: You may shower after you return home. Occasionally, the surgery site may drain small amounts of blood and this may be covered with a band-aid or small gauze dressing. The incision may often feel as if it is bulging; this will gradually return to normal. It is normal to have some bruising around the incision.

ACTIVITY: We encourage walking. You should plan an exercise program that includes two walks daily. You will be surprised by the steady increase in your exercise ability with these daily walks. Do not walk past the point of fatigue and/or shortness of breath, but try to walk a little bit further every day. While you may find yourself initially short-winded, with the exercise plan this will improve over approximately six weeks. You should not drive while still taking the pain medications, and should not drive until your reaction time and strength have returned to normal. This usually occurs in 10 to 14 days. It takes about 3 months for complete healing your incision muscles.

MEDICATIONS: Continue the medication that you were taking before surgery (for blood pressure, heart, etc.). Pain control is important; this is a painful operation and you will need pain medications... Please take your medications as prescribed; we will prescribe more should you run out and need more. You may find that warm showers on the incision actually help decrease the pain more than the medication; this will subside with time.

GENERAL CONSIDERATIONS: It is not unusual to lose between five and ten pounds after a major surgery and it may take up to 6-8 weeks to regain your preoperative weight. This weight loss is for the most part lost muscle mass (from the stress of surgery and the increased work of breathing), and until your weight is regained, you will find that you are easily fatigued. There is very little that will speed your weight gain except to maintain a good activity level and good dietary intake

CALL US IF: You develop enough drainage from the incisions to saturate a piece of gauze. Generally you will feel stronger and less sore with every day that passes. If after a few days you begin to feel worse, rather than better, you should call us. Call the office when you get home to schedule a check-up visit 10-14 days after your surgery. Finally, if you have any questions or concerns regarding your surgery or recuperation, do not hesitate to call our office—we are here to help in any way we can.

Recovering from Colon Resection

DIET: You will be discharged home on a light diet, low residue (low fiber). The most important thing is to eat four or five small meals a day. Do not overeat at any one sitting. Also, drink plenty of water, juice or Gatorade for a few days.

WOUND CARE: You may change the gauze dressing at any time after surgery. You may shower at home, but do not scrub over the steri-strips. Remove the dressing before showering and leave it off if there is no drainage. Avoid bathing or swimming if there are any signs of infection such as pain, redness or persistent drainage.

ACTIVITY: You should walk at least three times a day around your house. Stairs are not harmful. Avoid lifting anything heavier than a gallon of milk. Refrain from strenuous activity, exercise, or sexual intercourse until after your follow-up visit. Do not drive or operate heavy machinery for at least 7 days after surgery or until you are completely pain free, off narcotics and are not hindered in any way.

MEDICATION: You will get a prescription for a mild narcotic painkiller such as Vicodin or Darvocet. Start with one every four hours and increase to two if that doesn't help. Take the pills with food. If they make you nauseated, try extra strength Tylenol or Advil. If it persists, call the office for a new prescription. Beware of taking maximum doses of pain medication - along with plain Tylenol, as many of these have acetaminophen in them.

WATCH FOR THE FOLLOWING SIGNS OR SYMPTOMS: Call the doctor on call if you have a fever greater than 101 degrees, severe pain, and vomiting or persistent diarrhea. If you have any problems or questions, do not hesitate to call the office number. After hours, it will give you the on-call doctor.

FOLLOW-UP: Call the office to make a follow-up appointment' in our office for 7 to 10 days after surgery.

EMERGENCY: If you are having an extreme emergency, please go directly to the closest emergency room or call 911.

Recovering from Anal Surgery

DIET: You may resume your usual diet as soon as you are hungry. To avoid constipation or stool impaction, we recommend starting a high fiber diet the morning after surgery (bran cereal, wheat or rye bread, fresh fruits and vegetables) and also one tbs of Metamucil with a 0% of water each morning or evening. If you go more than 48 hours without a bowel movement (BM), take two tablespoons of Milk of Magnesia or Mineral Oil three times a day until the first BM, then stop. Call our office if you go more than three days without a BM. Drink plenty of water and juice.

WOUND CARE: You may change the anal dressing at any time after surgery. It should be removed the next morning and you should begin sitz baths. This entails sitting in a warm tub of water for 10-15 minutes. You should also soap and wash the anus gently. Afterwards, dry and replace a clean dressing. This should be repeated three times a day for the first week and twice a day thereafter. NOTE: If you have had pilonidal cyst or abscess surgery, you should remove the iodoform gauze packing while in the first bath. Afterwards, gently re-pack the wound with clean gauze dampened with the saline solution prescribed. This should be changed two times a day.

ACTIVITY: You may resume normal activity the day after surgery. Avoid straining or exercise until your follow-up visit. Do not drive or operate heavy machinery for 3-5 days after surgery or until you are completely pain free, off narcotics and are not hindered in any way.

MEDICATION: You will get a prescription for a mild narcotic painkiller such as Vicodin or Darvocet. Start with one every four hours and increase to two if that doesn't help. Take the pills with food. If they make you nauseated, try extra strength Tylenol or Advil. If it persists, call the office for a new prescription. Beware Of taking maximum doses of pain medication along with plain Tylenol as many of these have acetaminophen in them.

FOLLOW-UP: Call the office to make a follow-up appointment for 7 to 10 days after surgery.

EMERGENCY: If you have any problems or questions, do not hesitate to call the office number. After hours, it will give you the on-call doctor. Call it you have active bleeding, severe pain, persistent vomiting, fever over 101.0 degrees, or diarrhea more than 6 times in 24 hours. If it is an extreme emergency, please go directly to the closest emergency room.