

BLUE RIDGE WOMEN'S CENTER

Post-Operative Instructions

Major Surgery

BLEEDING

Expect some vaginal bleeding for the first month after surgery. You should expect to need to wear a minipad and change it several times a day. The discharge may be red, pink, or brown, may have a slight odor, and you may see pieces of thread-like material as the sutures inside the vagina dissolve. Please do not use tampons or douches. It is not normal to have heavy vaginal bleeding with clots or extremely foul odor.

INCISION

If you have an incision on your abdomen, it may be closed with sutures under the skin that dissolve or with visible sutures that will need to be removed. If you have visible sutures you will need an appointment to come to the office to have them removed. Over the incision you may have either Steri-Strips (small clear or white pieces of tape), or Dermabond (skin glue). Steri-Strips may be removed when they are loose (or after 2 weeks) by simply pulling them off. Dermabond will wear off on its own over 4-6 weeks. Expect pain around the incision, particularly at the corners of bikini-type incisions. The area under and around the incision may also be firm to the touch as healing progresses. It is normal to have some numb areas around an incision. The feeling may return in these areas, but it is possible to have areas that remain numb indefinitely. Your incision may have slight drainage and may be covered with a light pad if needed, but it is not necessary to keep a dressing on the incision after you leave the hospital. A red, swollen incision with foul smelling or pus drainage is not normal.

BOWEL FUNCTION

Expect some increased "gas" and pain with bowel movements during the first several weeks. You may take stool softeners such as Colace or Surfak and fiber products such as Citrucel, Benefiber or Metamucil on a daily basis. You may also take a laxative as needed. Milk of Magnesia or Miralax is a good choice, but others are acceptable as well. Drinking extra fluids during your recovery will help you avoid bowel and bladder problems.

BATHING

You may shower or take tub baths as desired and you may wash or wet your incision without fear. After bathing pat your incision dry with a clean towel. If your incision is under a skin fold, take particular care to keep this area clean and dry by blowing it with a (cool) hair-dryer. If you had vaginal repair such as anterior / posterior repair we recommend warm water tub soaks for 15 minutes several times a day as needed for comfort.

ACTIVITY

Expect to be fatigued easily by ordinary activities after surgery. We encourage you to progressively increase your activity each day to build your strength, but you must rest when you feel tired. Overexertion may cause pain or "heaviness" in your pelvic area. You may not do any heavy (more than 10 pounds) lifting, pulling, or pushing. It is not harmful to walk up or down stairs but you must use common sense about your ability to climb. Walking to toleration indoors or outdoors is the best type of exercise after surgery. Ask your doctor before resuming a vigorous exercise program.

DRIVING

You may *ride* in a car whenever you feel like it. Wear your seatbelt. You should wait about 2 weeks before driving, but use your own common sense about driving. If you are in pain, weak or dizzy do not take the chance of having an accident. Be very careful about driving while taking any narcotic pain medications.

WORK

You may not return to work until your doctor gives you permission (usually 6 weeks).

SEXUAL INTERCOURSE

You may not have sexual intercourse until your doctor gives you permission (usually 6 weeks).

Your Post-Operative appointment _____

Call our office for questions or problems 864-482-2360