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LAPAROSCOPY

Post-operative Care

Apart from the specific instructions given to you depending on the type of surgery you have undergone, the basic general instructions after a laparoscopy (key-hole surgery) are as follows.

What to expect after surgery

- You just had major surgery so give yourself time to recover. Recovery time varies between different persons. Time off work depends on the type of work you do and how you feel.
- You may experience shoulder pain for the first 24-48 hours from the gas that is used to expand your abdomen during keyhole surgery. This should resolve in a few days. Try different positions when you sit or lie down to find the one most comfortable for you. You may take pain relief for the pain.
- You may have a sore throat for the first day or so, because of the airway tube placed in your windpipe during the anaesthesia.
- You may have slight discharge or spotting from the vagina for the next few days.
- Some patients also experience mild discomfort with urination as a result of having a catheter placed in your bladder during the surgery. This should resolve within 1-2 days.
- The first several menstrual cycles after surgery may be more uncomfortable than usual. Surgical manipulation can disrupt the normal timing of menstruation. You may get your period earlier or later than expected; if you are worried about a late period and pregnancy – do a pregnancy test. You should take contraceptive precautions after surgery until I advise you when it is safe to try for pregnancy, if this is relevant to you.

Pain management

- Mild pelvic/abdominal discomfort is to be expected after surgery.
- During the procedure local anaesthetic is injected into the operative site which should numb the area for 6-12 hours after your procedure. Upon discharge you may begin to feel some discomfort for which you should take:
 - o Regular paracetamol, 2 tablets every 6 hours regularly for the first 48-72 hours.
 - o Regular anti-inflammatory medication such as Nurofen, always with food (unless you have a condition that precludes use of anti-inflammatory medication. We will discuss this).
- Following the first 48-72 hours, take pain medication only when needed.
- Remember pain medication are more successful if you take the medication regularly rather than waiting until the pain is severe.
- If your pain is not controlled with the above measures, contact the practice or I will prescribe something stronger for you before you go home on the day of your surgery.

Wound Care

- Your sutures are dissolvable, so they do not need to be removed
- Your dressings are waterproof, you can shower with them
- It is not uncommon for a small amount of blood to be visible under the dressing, this is not of concern and the dressing should be left clean and intact.
- Keep your dressings on for 5-7 days after surgery, after which time you peel them off; you may wish to peel them off in the shower

- The incisions may be covered with narrow white tape called Steri-Strip, beneath a larger band-aid. Leave the Steri-Strips on for 7-10 days; if they start peeling, you may take them off in the shower under running water.
- If your dressing falls off, do not be concerned as it will not harm the operative site. You should contact the practice during office hours for advice regarding the dressing.
- If any bleeding occurs upon discharge, please apply pressure to the site for 10 minutes and contact the practice for advice.
- Once the dressings are removed, keep the wounds clean and dry. You may wish to keep a new Band-Aid over the wounds to avoid clothes rubbing on them.
- Small amounts of ooze from your wound is normal. Please consult the practice if you are concerned by the amount or type of discharge.
- Bruising and some swelling can be expected around the wound, but this should remain stable and improve in following days.

Medicines

- I will tell you if and when you can restart your regular medications. This is particularly important for blood pressure, diabetes and blood thinner medications (such as aspirin).
- Please advise me if you take fish oil, St. John's wort or any other over-the-counter or herbal supplements.

Diet

- Gut activity differs from person to person. After most abdominal surgeries, the bowels may be slow and lazy so you may experience nausea, bloating and constipation. Avoid constipating pain medications, use stool softeners/laxatives as required/advised, drink plenty of water, eat foods that contain fiber such as fruits and vegetables and stay active.
- You may experience some nausea from the anaesthesia or pain medication which may decrease your appetite. Ensure you keep hydrated.
- You may eat whatever you can tolerate but it is best on your first day to have a light diet such as soups, crackers, and toast. Avoid large heavy fatty meals.
- Do not drink alcohol or drive for the first 48 hours after the surgery as the sedative/anaesthesia administered during the surgery may cause drowsiness for the first 1-2 days after surgery.

Activity

- Avoid heavy lifting > 1kg or strenuous exercise (eg. bicycle riding, running, weight lifting) for 6 weeks, to avoid developing a hernia. Avoid lifting anything that would make you strain such as lifting a child, heavy grocery bags, vacuum cleaning etc
- It is easier to prevent developing pain rather than managing it once it has already developed. Rest for a few days after the surgery is advisable but keep mobile.
- Exercise your ankles & calves whilst in your recovery to minimise your risk for a clot in the leg; clots in the leg can travel to the lungs, i.e. Pedalling your legs back and forth, gentle walks. You can continue to wear TED stockings outside of hospital until you are back to being fully active again.
- You should not drive for the first 48 hours from the procedure. Check with your car insurance regarding insurance cover after major surgery. Use your own discretion as to be a safe driver to have quick reflexes, turn your head for traffic, quickly move your foot from the gas pedal to the brake, be able to wear the seatbelt and potentially sit in traffic for a long time.
- If you have had a hysteroscopy and D&C at the same time as your key-hole surgery, avoid sex, swimming, baths, tampons and putting anything else in the vagina for 2 weeks after surgery (you can shower). This may be longer depending on the type of key-hole surgery you had; I will advise you. This is to prevent anything from entering the vagina and leading to infection. Do not douche; it is not medically advisable as it affects the normal healthy bacteria that maintains a healthy vagina.

Follow-up

I would like to see you between 2 to 4 weeks after the operation. Please ring the practice on 9789 5038 to schedule your post-operative appointment. At the follow up visit I will go with you through the operation findings and discuss further management. I may also show you pictures of your operation.

If you have any concerns or questions, please contact the practice. If you experience new or worrisome symptoms it is better to consult me early.

Please notify me immediately if you experience any of the following:

- ◇ Signs of infection at the wound site such foul smelling discharge, increased redness and swelling.
- ◇ Heavy bleeding from the vagina or wound sites
- ◇ Fever greater than 38.0 degrees C
- ◇ vomiting
- ◇ calf pain, back of the knee, thigh or groin, or shortness of breath
- ◇ redness or swelling in your leg or groin
- ◇ Chest pain
- ◇ heavy vaginal bleeding
- ◇ Severe tummy pains
- ◇ Unable to pass urine, pain/burning with urination or the need to pass urine frequently
- ◇ Unable to pass wind or open your bowels

If you get any of the following symptoms, please [contact me or go to see your family doctor or go to The Canterbury hospital Emergency Department](#) and ask the ED doctor to contact me.

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