

PATIENT EDUCATION SERIES



# POST SURGERY CARE

BOOKLET PREPARED BY  
ADVANCED  
GYNAECOLOGY

Surgery and the recovery period can be a difficult time. It is normal to have many questions and concerns.

The following guidelines are presented with the goal of helping you recover well and giving you long-lasting outcomes from your operation.

A successful, long-lasting surgery is a joint effort by both, the Surgeon, and the Patient. After the surgery is complete, the work of the Patient begins.

We are committed to helping you have a good recovery and experience good results of your surgery.



ADVANCED  
GYNAECOLOGY  
NEWCASTLE + HUNTER

[www.advancedgynaecology.com.au](http://www.advancedgynaecology.com.au)

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## Please read all carefully and note that it is important to follow the instructions below.

It is lot to read, but this is an important document containing detailed instructions about your post- operative care- whether you had a minor gynaecological surgery or a major gynaecological surgery.

This document relates to Gynaecological surgeries only. For patients undergoing joint surgeries with another speciality, follow these instructions jointly with those given by other Specialist.

After the operation, the patient plays an important role in the long-term success of her surgical treatment.

## What is the difference between a minor and major gynaecological surgery?

This is a general classification made just for the sake of instructions below. All surgeries whether minor or major come with risks, which would have been explained to you by your doctor. **The word 'minor surgery' is not intended to mean 'it is less risky' or 'post-op care to be taken lightly'.**

Generally speaking, a day procedure requiring less than a day stay at hospital is classified as minor surgery, referred as 'day procedure' in this document.

Any surgery requiring an overnight or more than one day stay at hospital is classified as major surgery. All laparoscopic, robotic, open surgeries come under this category.

Ask your doctor to clarify type of surgery you are going to have.

## Which instructions I should follow- for minor surgery or major surgery?

If you have undergone a minor surgery, follow the minor surgery post-op instructions.

If you have undergone a major surgery, follow the major surgery post-op instructions.

However, every patient has different circumstances in recover process and different response to post-op recovery. So depending upon your recovery and own judgement, follow the post-op care instructions on the **CONSERVATIVE / SAFER** side.

# Post-op Instructions for Minor Gynaecological Surgery

(Procedure generally requiring a day stay in the hospital)

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## 1) What can I expect in the first 24 hours after my day procedure?

1. You may feel drowsy for 24 hours following an anaesthetic.
2. During this time you should not:
  - a. Drive any vehicle
  - b. Drink alcohol
  - c. Make important decisions (e.g. signing legal documents)
  - d. Travel alone on public transport.
  - e. Use hazardous machinery.
  - f. Undertake heavy work or strenuous sports.
  - g. Lift any weights more than 2-3 kilos for upto 2 weeks
  - h. Put undue pressure while using toilet
3. Ensure that you have someone pick you up from the hospital and drive you home after your surgery.
4. It is important that you have someone stay with you overnight following your procedure.
5. You should rest for the remainder of the day after your procedure.

## 2) What ongoing care is required after a day procedure?

1. Healing time approximately is 4 to 6 weeks.
2. Expect vaginal bleeding for a few days. This should not be heavier than a normal heavy period. It may be bright blood loss initially, but will subside, becoming a small to scant brownish loss for a few weeks.
3. Cramps can be relieved with over-the-counter pain relief, plus using a wheat pack or hot water bottle.

4. Use sanitary napkins only. Do not use tampons for a few weeks until healed.
5. No intercourse until 2 weeks or till review with your doctor.
6. Shower only but with care for the wound; do not bathe or swim until healed post-op.
7. Please refer to your Nursing Discharge Summary for information regarding your wound care and follow up.

### **Pain Management:**

8. When you are discharged from the hospital after a day procedure, generally you should be able to manage your pain at home. If there is doubt about this you may be kept in the ward overnight to be discharged home the next morning. Feel free to let your nurse know if you feel that you will not be able to cope at home.
9. Take your pain medication regularly and do not try and “tough it out”.
10. You will have a prescription in your file if the surgeon feels that you may need something stronger than over-the-counter medications to deal with pain.

### **General Instructions**

11. Get enough rest and return to your normal diet as soon as you feel like it.
12. Your operative findings will be discussed at your follow up visit (booked while booking for the surgery). So do not be concerned if you have not seen the surgeon after your surgery.
13. If there is any concern, your doctor will most likely come and see you before your discharge. However, if the details of your surgery are discussed at this stage, sometimes you may not be able to recall the information due to the anesthetic medications. You can call your doctor’s clinic for clarification if needed, or ask the nurses attending.
14. Please let the nurse know if you have any immediate concerns or if you are in need of a “medical certificate”.

## **3) What if I have concerns after my discharge from the day procedure?**

If you have any health concerns after your discharge from the hospital, please let your doctor know.

Please do not email to the clinic or the hospital as emails may not be always monitored.

### Office hours

Please give us a call at the clinic at **4936 6789** and let our staff know regarding your post-op concerns.

### After hours

If you are unable to contact your doctor's practice, please contact the hospital where you have been operated and ask to speak to the "Hospital in Charge" and inform them about your concerns. They may ask you to present at that hospital.

Maitland Private Hospital on 4933 8400

Lingard Private Hospital on 4969 6799

Lake Macquarie Private Hospital on 4943 3122

### Inability to contact hospital

If you have difficulty getting through and cannot find someone to talk to, please present to the nearest emergency department.

### In case of an emergency

**If you think your concerns are an emergency, please call 000 or call an ambulance**

A successful, long-lasting surgery is a joint effort by both the Gynaecologist and the Patient. We are committed to helping you have a good recovery and experience good results of your surgery.



# Post-op Instructions for Major Gynaecological Surgery

(Procedure generally requiring an overnight or more than one day stay in the hospital, includes all laparoscopic, robotic and open surgeries)

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## 1) What can I expect generally after my major procedure?

1. Detailed instructions are mentioned further below.
2. You may feel drowsy for 24 hours following an anaesthetic. During this time you should not make important decisions (eg signing legal documents)
3. Upon discharge, ensure that you have someone pick you up from the hospital and drive you home after your surgery.
4. Do not travel alone on public transport.
5. Take good care while buckling the seat belt as it may aggravate the wounds.
6. When you first come home not every day will be a good day. It is not uncommon after surgery to feel like you are taking two steps forward and one step back. Fatigue and low energy level may persist for many weeks after surgery. Some people experience depression or post-surgery blues. Usually this goes away by itself but if it does not, please call your doctor.

## 2) What ongoing care is required after a major procedure?

1. Healing may require 6 weeks or more time.
2. After going home, for atleast 6 weeks or until review with doctor, do not:
  - i. Use hazardous machinery.
  - ii. Undertake heavy work or strenuous sports.
  - iii. Lift any weights more than 2-3 kilos
  - iv. Put undue pressure while using toilet
3. Do not use tampons for a few weeks until healed. Only use sanitary napkins only.
4. No intercourse for 6 weeks or till review with your doctor
5. Shower only, do not bathe or swim until 6 weeks post-op

6. Cramps can be relieved with over-the-counter pain relief, plus using a wheat pack or hot water bottle.
7. Fluid is placed into your abdomen during surgery, this may take a few days to be reabsorbed, you may have tenderness and noticeable swelling or bruising this is normal.
8. If any dye studies are performed, you may have bluish vaginal discharge, from the dye used.
9. If surgery is laparoscopic, you will have 3-4 stab wounds on your abdomen. These will usually be glued together with a dissolving substance or dissolving sutures. Please refer to wound care instructions below.

### 3) How do I take care of my wounds after a major procedure?

1. Your surgeon will usually inform you of the type of suture she will be using to close your laparoscopic incisions. Generally these are self-dissolving.
2. Sutures under the skin or inside the vagina do not need to be removed.
3. If there is a bandage dressing on the incision, you can take it off 24 to 48 hours after surgery.
4. Tape strips may be removed gently at home (if they have not fallen off) approximately one week after surgery. Soaking the strips with a warm, wet cloth or taking a shower may make the strips easier to remove.
5. Women who have an abdominal incision may be sent home with staples, stitches (sutures), or tape strips (Steri-strips). These should not be removed at home.
6. Keep stab wounds clean and dry until healed. After they are dry and healed, abdominal incisions should be kept clean. Do not put soap on the incision; plain tap water is adequate. Do not scrub the wound area.
7. If they become inflamed, or discharge, contact your doctor.
8. The way your scar looks will change over time and may not reach its final appearance for up to a year. The area may feel either numb or sensitive to touch, which is normal.
9. Unless directed by the surgeon, do not apply creams, ointments, or other substances to the incision. If the incision appears red, drains more than a drop or two of blood or fluid, drains pus, or begins to open, you should call your surgeon.
10. Vaginal surgery — Women who have vaginal surgery often have stitches inside the vagina. These do not need to be removed because the sutures will dissolve, usually within six weeks. It is normal to have

some light vaginal bleeding or pink to brown coloured vaginal discharge as the sutures dissolve. As the sutures dissolve, you may see pieces of suture thread on your underwear or toilet tissue.

11. Please also refer to your Nursing Discharge Summary for information regarding your wound care and follow up.

#### 4) How to manage pain after my major surgery?

##### **Will I have pain?**

Many gynaecological procedures are followed by some pain or discomfort. Pain or discomfort should improve over time and can be managed with pain medications, if needed. The location and severity of pain depends on the type of procedure. For example, women who have procedures that involve a skin incision (e.g., abdominal hysterectomy, laparoscopy) will have pain in the area of the incision, while other procedures that are performed inside the uterus (e.g., hysteroscopy, endometrial ablation) may be followed by a crampy sensation (similar to menstrual cramps).

##### **Gas pain**

It is common to develop occasional crampy pain and bloating in the abdomen after surgery. This is caused by gas building up in the intestines. The discomfort is usually temporary and will resolve after passing gas or having a bowel movement. If the pain and bloating are severe or do not resolve, you should call your surgeon for guidance.

##### **Shoulder pain**

Women who have laparoscopic surgery may have shoulder pain as a result of the gas used to expand the abdomen during surgery. The shoulder pain can last up to one week and can be eased with heat packs- carefully applied to avoid burns.

##### **What should I do about pain?**

Some women find it helpful to avoid uncomfortable positions or activities, support their abdomen with a folded blanket or pillow, or to hold a warm water bottle over the painful area (close the bottle tightly and cover with a towel to avoid burns).

You can take pain medications as needed, or, if you have pain that is constant and moderate to severe (in the first few days after a major surgery), it is helpful take the medication on a schedule, as prescribed (usually every four to six hours). This will help to prevent severe pain from coming back between doses.

It is not necessary to take pain medication if there is little or no pain.

If you do need pain medication, take it as directed. Taking pain medications at higher doses or more often than prescribed can be dangerous.

## Types of pain medication

If you are taking other medications, ask your doctor whether it is safe to take these and pain medications at the same time.

Pain medication is available over-the-counter or by prescription. Your surgeon will give you a prescription for pain medicine if she thinks you will need it. Usually you may only need over-the-counter pain medications like paracetamol (e.g. Panadol) or ibuprofen (e.g., Neurofen).

Sometimes stronger medications are prescribed including narcotics (e.g., oxycodone, hydrocodone), or combinations of paracetamol and codeine (e.g., Panadeine Forte). \*Do not drink alcoholic beverages, drive, or perform other activities that require concentration while taking narcotic pain medications.

If pain becomes severe and is not relieved by the recommended dose of pain medications, call your doctor to inform.

## 5) What about vaginal bleeding after gynaecological surgery?

Some light vaginal spotting or bleeding is expected and may continue for several weeks after any gynaecological surgery. It may be bright blood loss initially, but will subside, becoming a small to scant brownish loss for a few weeks.

Occasionally (especially in the first week after surgery), you may have an episode of heavy bleeding when you stand up or after urinating. Bleeding in any case should not be heavier than a normal heavy period.

Call your doctor if bleeding is heavy (more than a menstrual period OR completely soaks a large pad in one hour).

A pad may be used, but tampons should not be used until your doctor tells you it is safe.

## 6) What to expect in Urinary system after a gynaecological surgery?

### Is it normal if it hurts when I urinate?

If you have had vaginal surgery, you may feel a pulling sensation during urination or you may feel sore if the urine falls on vaginal stitches. It can be normal to urinate frequently after surgery. Call your surgeon if you have any of the following:

- Burning with urination
- Needing to urinate frequently or urgently and then urinating only a few drops
- Body temperature greater than 38°C (measure with a thermometer)

- Pain on one side of your upper back that continues for more than one hour or keeps coming back
- Blood in your urine (you can check to see if this is just vaginal blood falling into the toilet by holding toilet tissue over your vagina)

### What should I do if it is difficult to urinate?

Most women urinate at least every four to six hours, and sometimes more frequently. If you have not urinated for six or more hours (while you are awake and hydrated) or if you feel the need to urinate and it will not come out, you should call your doctor.

Under any circumstances, do not strain while urinating or passing stools, as it may put undue pressure on the wounds.

### Catheter

If you go home with a catheter, you will be asked to come back to the hospital approximately one week after surgery to take the catheter out and have a voiding trial. A minority of women continue having difficulty emptying their bladder. The options then are to replace the catheter and have you come back in one week, or teach you or a family member how to do intermittent self-catheterization.

When you have the catheter in place, the tube can be attached to a leg bag so that you can move around with ease. Make sure you empty the bag every time it fills up and before you go to bed at night.

### 7) What are restrictions on activities after a major surgery?

It may take up to 12 months to achieve 90% wound strength. Full wound strength may not be achieved until 2 years after surgery! Based on this, we recommend that you limit your activities for a full 6 to 12 weeks after surgery.

What exactly does this mean?

Anything that increases the pressure inside of your abdominal cavity will place stress and strain on the stitches and repair work performed in your pelvis and vagina. If enough stress is placed, the stitches and repair can break or be torn down. We recommend that you avoid any activity which will unduly increase your intra-abdominal pressure. Specific guidelines are given below.

### Should I limit my activity?

If you have a major surgery, you may feel tired for longer. Taking a few short naps during the day or resting when you are tired may help.

While rest is important, it is also important to have gentle, short walks around few times per day. You can start to walk, under guidance, on the day of surgery, depending upon how you are feeling. This helps to prevent complications, such as blood clots, pneumonia, and gas pains.

\*Though sometimes you 'feel' like you can resume your normal daily activities, **do not** perform following activities for 6 weeks or until your review with the doctor.

- Most forms of housework are discouraged during your recovery period. Pushing vacuum cleaners, scrubbing sinks, washing floors, bending to get clothes in and out of the washer/dryer, lifting pots, pans and casserole dishes are to be avoided as all are capable of increasing intra-abdominal pressure significantly.
- Fast Walking and vigorous stair climbing not allowed. Gentle walking on flat ground without exertion is recommended.
- Running, swimming, horse-riding like sports and all other exercise activities are not allowed.
- Bending at the waist will increase your intra-abdominal pressures. It is important that you try to avoid bending directly over to pick something up off the floor.

Wait until your 6 weekly appointment with the surgeon and then depending upon how your wound is healed, some activities can be resumed gradually, as you are able and depending upon the type of surgery.

Even after 6 weeks, do not get into full activity or start all activities at once.

### **Can I take a shower or bath?**

Showers are permitted for first 6 weeks with proper care to keep the wound (whether abdominal or vaginal) dry. Tub baths must be avoided until your doctor says it is safe to do so.

### **Are there limits on what I can lift?**

Lifting heavy objects can increase stress on the healing tissues. Avoid lifting any kind of heavy objects more than 2-3 kilos from the floor. This is a significant limitation since it includes such things as groceries, small children, full laundry baskets, and heavy pots, pans, and casserole dishes. If the object cannot be lifted with one hand, you should ask for help.

Restrictions on lifting are to be observed for at least six weeks after a major surgery.

### **When can I drive or travel?**

Normal car driving (on flat roads) is usually permissible 2 weeks after surgery provided you can move easily and no longer require narcotic pain medications. It is important to remember that pain from your surgical incisions may cause you to lose your concentration on the road or to have a slower-than-normal response rate when faced with a situation in which you must react quickly. In addition, stepping on the brake quickly may cause your intra-abdominal pressure to rise.

As always, wear a seat belt when riding in or driving a car, by taking care around the wound area. If in doubt call your car insurance company and determine if there are any restrictions on your insurance coverage. You should be well enough to be able to react effectively in an emergency situation if needed.

Avoid long trips by car, train, or airplane during the first two weeks after major gynecologic surgery. No 4-wheel or any other heavy vehicle driving is permitted for upto six weeks or until completely healed. Speak to your doctor if you have questions.

### **When can I have sex? Can I use tampons?**

After any gynecological surgery, you should not put anything in your vagina until the tissues are completely healed. Otherwise, you may develop an infection or interfere with healing.

This includes tampons, douches, fingers, and all types of sexual activity that involve the vagina.

These activities should be avoided for atleast six weeks after surgery. Ask your doctor when you can resume these activities.

### **When can I return to work?**

You may return to work when pain is minimal and you are able to perform your job. After major procedures, you may require four to six weeks to recover.

Time out of work also depends upon your daily activities at work; a person who sits at work may be able to return to work sooner than someone whose job requires them to stand, walk, or lift. Also read this with restrictions with activities mentioned above.

## **8) What to expect in digestive system after a major surgery?**

### **What can I eat?**

You may eat and drink normally after gynaecological surgery once you have been reviewed by the nurses on the ward. You may have a decreased appetite for the first few days after surgery; eating small, frequent meals or bland, soft foods may help.

However, if you are not able to eat or drink anything or if vomiting develops, call your doctor.

Also be sure to drink enough water to stay well hydrated and to prevent constipation.

### **How do I treat constipation?**

Constipation for a day or two is common after surgery and usually resolves

with time and/or treatment. Constipation means that you do not have a bowel movement regularly or that stools are hard or difficult to pass. Constipation can be made worse by narcotic pain medications e.g. Panadeine.

### Toilet Habits

It is important to avoid straining and pushing, whether urinating or having a bowel movement! Therefore, it is very important to keep optimal hydration and also avoid constipation. If a high-fiber diet alone is not enough to accomplish this, you will need to use a stool softener or fibre supplements. Talk to your doctor if you are experiencing problems in any elimination.

If you are having vomiting in addition to constipation, or if your surgery involved another speciality or the stomach, intestines or bowels, call your doctor before using medications to treat constipation.

### What if I have diarrhea?

Some women have a few days of soft stools after surgery, especially after taking medication for constipation. If you have watery stools more than twice a day or have blood in your stool, you should call your doctor.

## 9) Is follow-up visit important after a gynaecological surgery?

A two week and six week follow up appointments after surgery are recommended.

At these visits, your doctor will usually examine your abdomen, pelvic, operated area to be sure that the tissues are healing properly. You will hear about results if you had a biopsy or tissue removed, and you can ask questions about the procedure or your healing process.

This appointment is a good opportunity to ask questions about the procedure you had.

## 10) When do I call my surgeon?

You should call your surgeon if you experience any of the following:

1. Abdominal pain or bloating that is severe, lasts for 3 hours or more, and is not relieved after taking the recommended dose of pain medication
2. Shortness of breath or chest pain
3. Vaginal bleeding that is heavy, changing pads every half hour and passing large strawberry size clots continues for more than one hour
4. Nausea or vomiting that continues for more than one day or that make it impossible to eat or drink
5. Fever greater than 38°C (measure your temperature with a thermometer)
6. Skin incision changes — redness, drainage of fluid or pus, or opening of the incision



7. Any skin discolouration around incision area
8. Swelling in an extremity (leg or arm) that is much greater on one side than the other
9. Foul-smelling, green, or dark yellow vaginal discharge
10. Inability to empty the bladder or burning with urination
11. Inability to move the bowels for three days
12. Loose or watery stools two or more times a day or bloody stools.

Please do not email to the clinic or the hospital as emails may not be always monitored.

### Office hours

Please give us a call at the clinic at **4936 6789** and let our staff know regarding your post-op concerns.

### After hours

If you are unable to contact your doctor's practice, please contact the hospital where you have been operated and ask to speak to the "Hospital in Charge" and inform them about your concerns. They may ask you to present at that hospital.

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