

**\*\*\*PLEASE READ PRIOR TO CALLING NURSE OR PHYSICIAN\*\*\***

### **ABDOMINAL SURGERY POST-OP INSTRUCTIONS:**

1. No lifting over 15 pounds for 4-6 weeks following your surgery.
2. You may shower per your normal routine. **No baths or submersion of your wounds beneath water for the first 2 weeks.**
3. Take your pain medication as ordered.
4. **Call for an appointment when you get home.** We will need to see you in 10-14 days if you have staples that need to be removed. If you do not have staples; we will see you in 2-3 weeks.
5. Call your primary care physician for an appointment if needed for medication adjustment and/or follow-up.
6. **If you experience severe pain, persistent nausea & vomiting, severe bleeding, a fever greater than 101.0, or pus from your wound, call the office right away.**
7. Dressing changes as directed if needed. You may use a dry gauze pad for drainage as needed.
8. Start a soft diet at home, advance to a regular diet as tolerated. Slowly increase your fiber intake over 2– 3 weeks to 20 – 25 grams per day. **Take Colace (Docusate Sodium, over-the-counter) twice a day** until stools are soft while you are taking pain medication. If you are having loose stools, discontinue the stool softener. You may discontinue once you stop narcotic pain medication.
9. If you have not had a bowel movement, start Miralax (polyethylene glycol), one tablespoon. Take one to three doses a day until your bowels move. You may add milk of magnesia if you are still unable to move your bowels. Call the office for further instructions if you are still unable to move your bowels.
10. Take any other medications prescribed as ordered; Call your PCP with questions regarding your home medications.
11. If you have been prescribed Lovenox at home, take as directed.
12. You may resume sexual activity within 4 weeks or at your comfort level. Take in to consideration your no heavy lifting instructions.

Pick up your prescription for pain medicine. If you are taking Norco, Vicodin, Lortab, or Percocet, do not take more than 8 tablets a day. Don't supplement these medications with Tylenol. Advil, Motrin or Aleve may be used in addition to these medications meds if not allergic and if you have no ulcers.

Prescriptions for narcotic pain medication can no longer called in over the phone; a written prescription must be picked up in the office with a photo ID. Please make plans accordingly when you run low on medicine. Our office is open Monday – Friday from 8a.m. to 4p.m.

If you have any questions, concerns or to schedule your follow-up appointment please contact the office at (865)305-5335.

## **INPATIENT- ABDOMINAL SURGERY POST-OP INSTRUCTIONS - DETAILED**

### **Expectations after Colon and Rectal Surgery**

- General weakness and decreased stamina
- Bowel irregularity
- Decreased appetite and weight loss (could last up to 6 weeks)
- Full recovery period is approximately 2 to 6 months and may include pronounced fatigue.

Do not lift more than 15 lbs. for the next 4-6 weeks. No vacuuming, mopping, lawn mowing, or carrying groceries. Remember not to put stress on your abdomen and incision. If it hurts, stop.

Do not drive for at least 2 weeks after returning home from the hospital. No driving while taking narcotic pain medications. Sudden stops can put pressure on your incision.

Ask your physician when you may return to work. It is usually extremely variable, depending on the type of work you do and the type of surgery you had.

When you go home, eat a low residue or low fiber diet for the first few weeks. Examples of foods to avoid include corn, celery, apples, nuts, popcorn, grapes, and other foods with hulls, peels, and seeds. After 2-3 weeks you may begin to reintroduce these foods into your diet. Begin with small amounts so you can see how your intestine adjusts to digesting them.

You may take a shower 48 hours after surgery and when you go home. Do not bathe or submerge your wound(s) beneath water. Have someone able to assist you as you will feel weak. **If you still have staples, you can get the incision wet.** If the staples were removed and steri-strips placed, keep the wound dry for 24 hours, then you can shower. **No baths or submersion of your wounds beneath water for the first 2-3 weeks.**

If your staples have been removed, you may have steri-strip tapes. These will get loose as you shower and may be removed when the ends curl up. You may use soap on the incision. Wash gently, rinse well, and pat dry. **Do not use lotion or oils on the incision for the first 6 weeks.**

Walk every day to help circulate your blood and speed healing. Start slowly in your house including a few stairs. Slowly increase to walking outside on level ground. "Listen" to your body. Discomfort is normal as you gradually return to normal activity, but pain is a signal to stop what you are doing and proceed more slowly. After you recover, a regular exercise program is paramount to your recovery and may enhance your quality of life and possibly your survival.

Two to three weeks after your colorectal resection start to slowly increase the fiber in your diet, like fruits and vegetables, and increasing the amount of protein you eat. Protein helps tissue heal. After you regain your strength, your diet should be a diet low in refined sugars and carbohydrates, and high fiber with an addition of a fiber supplement like sugar-free psyllium (Metamucil, Konsyl) taken with plenty of water (6 to 8 glasses per day).

### **Call your doctor if:**

- 1) You develop fever greater than 101°
- 2) Your incision begins to drain pus or becomes hot, red, or more painful.
- 3) Your abdomen feels extremely bloated or painful (some bloating and tenderness is normal after surgery), especially if associated with your bowels not moving and nausea and/or vomiting.
- 4) You develop excessive blood in your stool or from your stoma.
- 5) You develop persistent nausea/vomiting.

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**\*\*Be sure to keep your follow-up appointment with Dr.Casillas/Dr. Russ. If an appointment was not made for you, please call the office the next business day and make an appointment to be seen in 2 to 3 weeks.**

If you go home with staples on your abdominal incision, please come to the office 10-14 days after surgery or discharge from the hospital and my nurse will remove the staples and steri-strip your incision.

### **Medications:**

Take your medication as prescribed. **Remember that narcotic pain medications like Percocet (oxycodone) /Lortab / Norco (hydrocodone) are constipating, so do not take them if you don't need them.** Pain medication is used to take the edge off the major incisional pain during the first few post-op days, not to totally remove all discomfort. Supplement your narcotic pain medication with Ibuprofen or NSAID medication unless you have kidney problems. Only take this during the first couple of weeks while you are recovering from surgery. Percocet and Vicodin/Norco/Lortab have Tylenol added to them. Do not take additional Tylenol when taking those medications. Feel free to substitute those medications with Tylenol alone, but **do not take more than 3 grams of Tylenol per day.**

Refills on prescriptions will be handled ONLY through the office on weekdays between 8:00 a.m. and 4:00 p.m. when the patient's chart is available. **REFILLS CAN NO LONGER BE PHONED IN AT ANY TIME. THE PRESCRIPTIONS MUST BE PICKED UP IN THE OFFICE DURING REGULAR BUSINESS HOURS.**

### **Bowel Movements**

After a bowel resection your bowel movements will be irregular. **Do not take laxatives or enemas during the first two weeks after surgery.** Multiple, loose bowel movements are common after removing a section of your intestines. Please keep a moisture barrier ointment like Desitin around your perianal and intra-anal skin to avoid painful rashes.

### **Apply on Peri-anal and Intra-anal skin**

- 1) Gently clean the skin with a mild skin cleanser and/or water
- 2) Rinse with clean water, or blow dryer
- 3) Pat the area dry with a clean towel or gauze
- 4) Apply a small amount of Desitin to cover the area completely
- 5) Repeat after each bowel movement or when skin becomes wet with urine or drainage.

**\*\*PLEASE RE-READ THE "PREOPERATIVE INSTRUCTIONS FOR COLON AND RECTAL SURGERY" SECTION OF COMMONLY ASKED QUESTIONS GIVEN TO YOU IN OUR OFFICE PREOPERATIVELY.**

If you have any further questions or problems, please call our office and ask to speak to our nurse (865)305-5335. If you leave a message for the nurse before 4:00 p.m., she will return your call that day. Calls made after 4:00 p.m. that are not emergencies or urgent will be returned on the next business day.

Emergencies or urgent calls after 4:30 p.m. and on weekends will be answered by Dr. Casillas/Dr. Russ or the doctor on call.