

## Post-Operative Instructions

Thank you for choosing The Center for Gynecologic Oncology for your surgical care. Please read the following post-operative information and contact us if you have any further questions after reviewing.

### General Postoperative Instructions

#### 1. At Home Care

- You may eat and drink upon returning home.
- Eat small, light, frequent meals and ensure you have adequate liquid intake.
- You should be up to the bathroom the same day of surgery.
- You should be up walking around your home every few hours the day following surgery.
- Shower the day after surgery.
- An abdominal binder (if provided) may be worn while sitting or during any activity. Not necessary to wear overnight.
- No swimming or soaking until cleared to do so by the surgeon.

#### 2. Pain management

- Pain is improved with early ambulation after surgery.
- ***You should expect some discomfort after the surgery that will persist even after taking pain medication which is only to alleviate any severe pain.***
- ***You should alternate between an NSAID ( such as Motrin/Advil/ Ibuprofen/Aleve) and Tylenol and use narcotics such as Tramadol or Percocet as a rescue medication if both NSAIDs and Tylenol do not significantly help. Once you take Tramadol or Percocet you should start again with the NSAID and Tylenol sequence.***
- NSAIDs (such as Motrin/Advil/ Ibuprofen/Aleve) and Tylenol are purchased at any pharmacy without a prescription.
- For postoperative pain:
  1. Take over the counter Ibuprofen (Motrin or Advil) 400mg (over-the-counter) every 4 hours, 600mg (over-the-counter) every 6 hours or 800mg (over-the-counter) every 8 hours (unless NSAIDs are contraindicated due to your medical history/known allergy).
  2. If pain persists one hour after ibuprofen, take 2 tablets of Extra Strength Tylenol (Acetaminophen) every 8 hours as needed.
  3. If pain persists after taking Ibuprofen and Tylenol: one hour after taking Tylenol you may take the prescribed Tramadol (1) tablet every 4 hours as needed.

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4. If significant pain persists you must call our office
  - Take pain medications with food to avoid stomach irritation or nausea.

### **3. Medications**

- Resume all home medications (including blood thinners) the day after surgery unless otherwise instructed by the surgeon or your primary care physician.
- Over the counter gas medication such as Gas-X may be used to alleviate gas pains.
- Constipation is common after surgery and can be relieved with over the counter stool softeners such as Colace.

### **Normal Postoperative Symptoms**

- Temporary numbness or tingling around the incision sites and inner/outer thighs
- Mild to moderate abdominal discomfort or shoulder pain that is relieved with medications
- Vaginal spotting
- Gas/bloating
- Mild discomfort when urinating
- Mild constipation (you should be passing flatus within one to two days after surgery)
- Mild nausea with the ability to tolerate liquid intake
- Moderate lower abdominal cramping

### **When to call the office**

- Fever over 100.4 F
- Inability to tolerate post operative liquid intake
- Inability to urinate
- Severe pelvic or abdominal pain that is not improved with pain medication as reviewed above
- Vaginal bleeding that is more than menses with the passage of blood clots or saturating a pad an hour
- Foul-smelling vaginal discharge
- Abnormal discharge from incision sites or incisional opening

### **Laparoscopic or Robotic Surgery**

4. You will likely be discharged from the hospital the same day of surgery. If you need to be admitted for any reason, the surgeon will explain the process to you and your family after your surgery is completed.
5. During the surgery, your abdomen is filled with gas to increase visibility. Although the gas is released at the conclusion of the surgery, some residual gas may be present which may cause mild upper abdominal discomfort and/or shoulder pain. This should improve in 24-48 hours with ambulation.

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## 6. Incisions

- Following the surgery, you will notice 3-5 small abdominal incisions sealed with a clear adhesive.
- A small amount of bruising surrounding the incision sites is normal.
- Do not remove the adhesive as it will fall off on its own.
- Call the office if you notice any abnormal discharge from the incision sites or if the incision sites open.
- Shower normally the day after surgery and allow the soapy water to run over the incision sites without scrubbing and pat dry. Do not apply any lotions, creams, or ointments to the incision sites.

## 7. Activity

- Hysterectomy
  - i. You should be up walking to the bathroom the same day of surgery.
  - ii. Shower the day after surgery.
  - iii. Walk around your house (and/or outside) every few hours beginning the day after surgery.
  - iv. Pelvic rest (nothing in the vagina including intercourse, tampons, or douche) for 8 weeks.
  - v. No heavy lifting, pulling or pushing over 8 lbs. for 8 weeks.
  - vi. No driving for 5 days following surgery (do not drive while taking Tramadol or any other narcotic medication).
  - vii. Light exercise including light weights and walking may be resumed at 2 weeks post-operatively.
  - viii. Do not return to full exercise until 8 weeks following surgery.
- General Laparoscopic Procedures
  - i. You should be up walking to the bathroom the same day of surgery.
  - ii. Shower the day after surgery.
  - iii. Walk around your house (and/or outside) every few hours beginning the day after surgery.
  - iv. Pelvic rest (nothing in the vagina including intercourse, tampons, or douche) for 2 weeks.
  - v. No heavy lifting, pulling or pushing over 8 lbs. for 4 weeks.
  - vi. Light exercise including light weights and walking may be resumed at 1 week postoperatively.

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- vii. Driving may be resumed in 5 days following surgery (do not drive while taking Tramadol or any other narcotic medication).
- vii. Do not return to full exercise until 4 weeks following surgery.

### **Laparotomy or Open Abdominal Surgery**

- You will be hospitalized for a minimum of one night following surgery
- Conditions for discharge:
  - Tolerating post-operative intake without vomiting
  - Pain well controlled on post-operative pain medication
  - Passing flatus
  - Ambulating
  - Urinating effectively (unless you are being discharged home with a foley catheter)
- **Incision**
  - Following the surgery, you will notice either a vertical or transverse incision in your abdomen sealed with a clear adhesive.
  - Do not remove the adhesive as it will fall off on its own.
  - Call the office if you notice any abnormal discharge from the incision sites or if the incision site opens.
  - Shower normally the day after surgery and allow the soapy water to run over the incision sites without scrubbing and pat dry. Do not apply any lotions, creams, or ointments to the incision sites.
- **Activity**
  - You should be up walking to the bathroom the same day of surgery.
  - Pelvic rest (nothing in the vagina including intercourse, tampons, or douche) for 8 weeks.
  - No heavy lifting, pulling, or pushing over 8 lbs. for 8 weeks.
  - No driving for 2 weeks following surgery (do not drive while taking Tramadol or any other narcotic medication).
  - Light exercise including light weights and walking may be resumed at 2 weeks postoperatively.
  - Do not return to full exercise until 8 weeks following surgery.

### **Hysteroscopy or Dilation and Curettage**

- You will be discharged home on the same day of surgery
- You may have some lower abdominal cramping following surgery that can be relieved with over the counter **NSAID (such as Motrin/Advil/ Ibuprofen/Aleve)**
- Vaginal spotting may occur for a few weeks following the procedure

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- **Activity**

- Pelvic rest (nothing in the vagina including intercourse, tampons, or douche) for 2 weeks
- You may return to normal daily activity the day after your procedure
- You may return to full exercise in 2-3 days after the procedure

### **Vaginal Surgery**

- You will likely be discharged home on the same day of surgery
- You may have some lower abdominal cramping and vaginal discomfort following surgery
- Vaginal spotting may occur for a few weeks following the procedure
- If you are discharged with a foley catheter, you will need to follow up in the office in 3-5 days for a voiding trial and possible foley catheter removal

- **Activity**

- You should be up walking to the bathroom the same day of surgery
- Pelvic rest (nothing in the vagina including intercourse, tampons, or douche) for 6 weeks
- No heavy lifting, pulling, or pushing over 8lbs for 6 weeks
- No driving for 5 days following surgery (do not drive while taking Tramadol or any other narcotic medication).
- Light exercise including light weights and walking may be resumed at 2 weeks postoperatively
- Do not return to full exercise until 6 weeks following surgery
- Sitz bath:
  - As needed for comfort
  - Two cups of Epsom salt in six inches of warm tub water for 20 minutes each day for two weeks or a commode sitz bath may also be used - two tablespoons of Epsom salt to warm water in a commode sitz bath.

### **Billing, insurance, co-payment, and deductibles:**

- The surgical team consists of other staff and providers i.e., Hospital staff, Anesthesiology and Pathology which will bill you separately.
- For any questions involving our primary surgeon fees, you may contact us at (954) 602-9724 or [surgery@salomtangir.org](mailto:surgery@salomtangir.org)
- For any questions involving hospital fees, or other provider fees, please contact them directly.

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**FMLA or Disability Forms**

- Please fax or email any FMLA or Disability forms to fax: (954) 602-9724 or email:
  - [surgery@salomtangir.org](mailto:surgery@salomtangir.org) for Merlyn Rodriguez
  - [surgery1@salomtangir.org](mailto:surgery1@salomtangir.org) for Yinesa Suarez
- There is a \$25.00 fee for all FMLA or Disability forms
- Please allow 7-10 days for completion of forms

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**Patient Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Witness**

\_\_\_\_\_  
**Date**

