

## POST - OPERATIVE INSTRUCTIONS

### Pain Management

- 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 may take:
  - Panadol/Panadeine/Panadeine Forte, 2 tablets every 6 hours regularly for the first 48-72 hours.
  - Anti-inflammatory e.g. Nurofen can be used in addition if required.
- If your pain is not controlled with the above measure contact WPRS for advice.

### Wound Care

- If you have a dressing in place then please keep dry and intact, unless you are informed otherwise. Certain dressings (mefix and tegaderm) can be wet and patted dry. If your dressing falls off, do not be concerned as it will not harm the operative site. You should contact WPRS during office hours for advice regarding the dressing.
- If any bleeding occurs upon discharge, please apply pressure to the site for 10 minutes. If bleeding continues, repeat the above. If bleeding persists contact WPRS or SWHC A&E. (contact details below)
- Small amounts of ooze from your wound is normal. Please consult WPRS if you are concerned by the amount or type of discharge.
- Bruising and minimal swelling can be expected around the wound, but this should remain stable and improve in following days.

### Activity

- Gentle home activity is recommended for the first 2-4 weeks.
- Avoid heavy lifting, strenuous exercise or activity for 6 weeks.
- Driving a car after 10-14 days. Use your own discretion as to be a safe driver and depending on your own discomfort.
- Exercise your ankles & calves whilst in your recovery to minimise your risk for DVT ie. Pedalling them back and forth, gentle walks.

### Diet

- You are to start with clear fluids after surgery or the next day, once your gut is ready (ie. Rumbling). Progressing to full fluid and light diet in the following day or 2.
- Gut activity differs from person to person. For this reason, we cannot give strict guidelines.
- After most abdominal surgeries, the gut experiences some form of paralysis (laziness) ie. bloating, nausea and/or vomiting. Often not helped by pain medication therefore it is important to use as prescribed and advised.
- On the day of discharge, we are usually satisfied with your gut functions, but this doesn't mean you can eat what you want once home. As your gut starts to work and you have bowel actions, you can gradually pace yourself back to your normal diet, do not rush this.

### Follow-up

- Day 7-10 post procedure you will have a post-operative appointment at WPRS.
- WPRS staff will have attached an appointment card to this handout advising you of this. If you haven't received a card or appointment, please contact the WPRS rooms on (03) 5562 5330.

If you have any concerns please contact WPRS on (03) 5562 5330.

- Within clinic hours your call will be transferred to clinical nurse and managed appropriately.
- After hours you may leave a message or your call will be diverted to the on-call Surgeon.

In the unlikely event you are unable to contact staff at WPRS please call St John of God Hospital, Warrnambool on (03) 5564 0600.