

## **POST-OPERATIVE HERNIA INSTRUCTIONS**

- 1. Take your usual medications (blood pressure, diabetes, blood thinners, etc.) the evening of your surgery day unless otherwise directed.
- 2. You should follow a light diet such as soup and crackers for the first 12-24 hours after surgery. You can resume a normal diet but one high in fiber the day after surgery. Be sure to include a lot of fluids daily.
- 3. Applying ice to your hernia location and incisions for 20 minutes on and 20 minutes off is strongly recommended for at least 48 hours. Ziploc bags with crushed ice or frozen peas are commonly used along with a towel between the bag and your skin. Icing more frequently and for a longer duration is fine.
- 4. Having ice bags in a small cooler next to your bed while sleeping can allow you to change ice packs when waking during the first 1-2 nights.
- 5. The patients who ice the most have the least amount of pain and swelling after their surgery. Many patients who have elevated pain levels or uncomfortable swelling and bruising did not use ice regularly after surgery.
- 6. Many patients will experience a significant amount of swelling and bruising after surgery (especially groin hernia surgery, both open and laparoscopic). Sometimes this can take several days before appearing. The amount of swelling (often in the scrotum/testicle area) can be the size of a softball or larger. The bruising can be the color of dark purple or black. Again, this is completely normal and expected. Icing, scrotal support and reclining will help. The swelling and bruising frequently resolves as quickly as it appears but can also last several weeks. This is expected.
- 7. Many patients will feel a firm lump and hardness around the surgery site. This may make it feel as if your hernia is still there. This is normal.
- 8. Medical glue (Dermabond) will be applied over your incisions. You may shower in 24 hours. However, do not submerge your incision (bath tub, pool, jacuzzi, ocean) for 2 weeks. Do not scrub the skin glue; it will flake off over 2-3 weeks.
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  9. Approximately 7% of patients will not be able to urinate by the evening after their surgery. This can happen even if you are able to urinate immediately after surgery. If you are unable to urinate after about 6 hours, or when you feel increasingly uncomfortable, you should go to your nearest Emergency Room to have your bladder catheterized. Emergency Rooms are used to this and will easily take care of you.
- 10. Most patients will have this bladder catheter in place for 48 hours and then remove it at home. Often, if requested, the Emergency Room will give you a small syringe and show you how to remove the catheter yourself at home. It is extremely easy and can be done by most patients without any difficulty.
- 11. Please follow the recovery chart that was provided to you for instructions on post-surgery activities. However, as a quick reminder:
  - a. Walking and climbing stairs immediately after your surgery to get into your home or to your second-floor bedroom is fine.



- b. You may resume light daily activities beginning the day after surgery gradually increasing as tolerated.
- c. Refrain from heavy lifting (> 20#'s) until 3 weeks after surgery.
- d. You may drive if you are not taking prescription pain medications, you can comfortably wear a seatbelt, and you can safely maneuver your car and apply brakes.
- e. If your job does not require strenuous activity, you may return to work as soon as you feel comfortable, usually 3-4 days.
- f. You may resume sexual activity when it is comfortable.
- 12. It is common to experience constipation while taking opioid pain medications after surgery. Increased fluid intake and taking a stool softener (such as Senokot S) will usually help or prevent this from occurring. A mild laxative (Milk of Magnesia or MiraLAX) should be taken according to package directions if there are no bowel movements after 48 hours.
- 13. You will have received intravenous opioid pain medications during your surgery. This alone can cause patients to experience constipation.
- 14. Some patients complain that constipation was their worst post-surgery issue. Please take preventing it seriously.
- 15. We would like a follow up with you approximately 3 weeks after your surgery. This can either be in our office or over the phone, whichever is more convenient for you. Patients who are doing well often find that a phone follow up is all that is needed. If you prefer to see us in person, please be sure that you call us soon after your surgery to ensure a convenient appointment time.
- 16. If you have disability or family leave forms, you must bring them to the office for processing before or after your surgery. Please do not give them to your doctor.

## WHEN TO CALL YOUR DOCTOR:

- 1. Continued bleeding from an incision
- 2. Persistent nausea and vomiting (after the first 24 hours)
- 3. Fever over 101.5 (F) (after the first 48 hours)
- 4. Increased pain, redness, or drainage from an incision (after 3-4 days)

Our staff is available to answer your questions during regular business hours. Please don't hesitate to call to speak to one of our medical assistants or nurses for clinical concerns. If you have a medical emergency go to the nearest emergency room or call 911. A surgeon from our office is always on call.