

Minor Surgery

You will most likely be able to go home accompanied by a responsible adult. If you had general anesthesia, you may feel drowsy or nauseated for a temporary period of time that may last 12 to 24 hours.

Incision Care:

If you notice any major swelling or severe discomfort in the first few hours at home, you need to call our office. (Some pain, a small amount of blood, as well as bruising is expected and anticipated. This should resolve in a few days).

Leave your dressing on for the first 48 hours (2 days). You may take a sponge bath, but avoid a shower or getting your wound wet for the first 2 days after surgery. After 48 hours when you remove the dressing, you may shower. Avoid baths or hot tubs for the first few days. You will likely have small pieces of tape (steri-strips) over your incision. These will naturally fall off over time, do not manually remove them. If you notice any thick yellow discharge, major swelling or severe discomfort in the first few hours at home, you need to call our office.

Diet:

You may resume a regular diet when you return home, however it is recommended that you eat light, easily digestible food for the first day or so after surgery. When tolerated continue to eat fruits, vegetables, and/or bran flakes and drink plenty of fluids, including some prune juice, to avoid constipation, particularly if you are taking narcotics for post-operative pain control. You may have a gentle laxative, such as 1-3 Tablespoons of Milk of Magnesia if you have not had a bowel movement for three days.

Medication:

Please be sure to take all medications that you usually take on a regular basis. However, it would be a good idea to avoid aspirin, Motrin, Advil, Aleve, or Ibuprophen for five days after your operation.

Pain medication will be prescribed for you; you may take it as needed. You should avoid driving, operating heavy equipment, or potentially hazardous garden equipment while taking narcotics. Side effects of narcotics may include nausea, vomiting, lightheadedness, rash, irritability, or fatigue. Once pain begins to subside, you may try switching to some plain Tylenol after the first day or two since you may no longer need the narcotic. This will help avoid constipation as well.

You should also take a stool softener if prescribed by your surgeon. You may have a gentle laxative, such as 1 – 3 Tablespoons of Milk of Magnesia if you have not had a bowel movement for three days.

Activity:

You are to avoid heavy lifting - nothing greater than 10 pounds, for the first week after an operation.

Activities such as deep breathing, walking, going up the stairs will encourage the resolution of some of the stiffness and discomfort. Many people have problems sleeping after an operation. This is usually the result of too many naps during the daytime. Adequate activity should resolve this problem.

Resumption of driving is dependent on the type of procedure you have had and your level of pain and mobility – generally a few days to up to two weeks after surgery. As always, wait to drive until common sense says it is safe to do so. You must no longer be taking narcotics and must be able to respond physically and cognitively to any situation on the road you may encounter.

Call the Office at (815) 744-0330

- When you return home from surgery to schedule a follow-up appointment to take place 7 -10 days after surgery.
- If you have bleeding from the surgical site that requires more than two dressing changes.
- You are still unable to have a bowel movement after trying Milk of Magnesia on the third day following surgery.
- You develop a fever of 101° F or 38.5° C or higher the following day of surgery.
- If you have any other problems or concerns.

Go to the Emergency Room:

- If you have been unable to urinate six to eight hours after being discharged from your surgery and have a feeling of fullness. Try to let the tap water run to instigate urination. If you are still unable to urinate, go the emergency room.
- If you have serious problems and are unable to reach your surgeon or office staff.

See Other Post-Surgical Instructions