

## **POSTOPERATIVE INSTRUCTIONS**

**AFTER HOURS CALL: MEDICAL EXCHANGE 512-458-1121  
DURING OFFICE HOURS (8:00 – 5:00PM): 512-301-6767**

**CALL DR. JUKES' OFFICE AS SOON AS POSSIBLE TO SCHEDULE AN APPOINTMENT FOR INITIAL VISIT AT 2 WEEKS POSTOPERATIVE (NO OTHER VISIT NEEDED IF A MINOR SURGERY) AND USUALLY 6 WEEKS POSTOPERATIVELY FOR A MAJOR SURGERY, SUCH AS A HYSTERECTOMY.**

### **OPERATIVE SITE/DRESSING**

\*Wash hands well before and after any dressing/pad changes or wound care.

\_\_\_\_\_ You will have some discharge and/or bleeding after the surgery. Excessive bleeding (changing one pad an hour) must be reported to the office/Dr. Jukes. For hysterectomy patients, expect intermittent spotting throughout your 6 week recovery period, especially, with increased activity.

\_\_\_\_\_ Put nothing in the vagina (no tampons, douching or sexual activity) until permitted by Dr. Jukes. Usually 4 weeks after minor laparoscopic and hysteroscopic procedures, LEEP or cold knife cervical conizations and usually 6 weeks after hysterectomies/major surgeries.

\_\_\_\_\_ Some abdominal pain and/or cramping are to be expected after surgery. Notify the office/Dr. Jukes of severe abdominal pain not responding to prescribed pain medications.

\_\_\_\_\_ You may experience shoulder, neck pain and bloating due to carbon dioxide used during laparoscopic procedures to inflate the abdomen. This will pass as the carbon dioxide is absorbed. Using a heating pad, laying flat and/or taking prescribed pain medication should help.

\_\_\_\_\_ If steristrips were used in your incision, do not remove them as they will fall off by themselves in 7-10 days. Staples need to be removed in the office by a nurse/medical assistant 5-7 days after surgery. If skin glue was used, it should be left alone to fall off by itself or you can remove it in the shower if it has been more than 10 days since your surgery. You may also have stitches – these will dissolve on their own and do not need to be removed.

\_\_\_\_\_ Any pathology specimens obtained in surgery are sent to a pathologist and the report is usually ready in 5-7 days. Our office will call you with the result. Please call our office if it has been more than 7 days and we have not called you with the result.

### **ACTIVITIES**

\_\_\_\_\_ You may shower the day you go home or the next day depending on how you feel. Avoid tub baths until permitted by Dr. Jukes – same recommendations as 4 weeks for minor surgery and 6 weeks for major surgery.

\_\_\_\_\_ Non-strenuous activity for 1 week following hysteroscopies, minor laparoscopic surgery, cervical conizations, 2 weeks following laparoscopic removal of ovary/tube/fibroids, 6 weeks following major surgery, including laparoscopic hysterectomies and even bladder/prolapsed surgeries. Avoid heavy lifting (>15 lbs.) during this time period. Walking frequently, preferably on flat surfaces, is highly

encouraged to aide healing, bowel return and lessens chances of blood clots in extremities and respiratory problems.

\_\_\_\_\_ You may return to work/school when cleared by Dr. Jukes.

\_\_\_\_\_ You may resume driving once you are no longer using narcotic pain medications and once you are able to focus on driving without distraction from pain, etc.

### DIET

\*Resume your normal diet gradually. Begin with clear liquids and crackers and add foods as tolerated.

\*If you become nauseated, remain on a clear liquid diet until nausea passes. Call the office/medical exchange, if nausea does not respond to prescribed medications or persists > than the first 2-3 days post surgery.

\*Drink plenty of fluids after surgery unless you are on fluid restrictions (water is the best!).

### MEDICATIONS

\_\_\_\_\_ Usually a pain reliever has been prescribed for you. If anaprox or Motrin given, please take with food and use as directed for the first 2-3 days at home as this will reduce pain and inflammation associated with surgery. Please let the clinical staff know if you are prone to gastritis/GI upset with NSAIDs (non-steroidal anti-inflammatory drugs). Narcotic pain medications can be used as directed but can contribute to constipation – do not operate machinery, etc., while using narcotics. You may use anti-nausea medication with the narcotics if they induce nausea.

\_\_\_\_\_ Over the counter medications that can be used, include milk of magnesia for constipation, surfak/colace to soften stools, senekot or other fiber laxative, Maalox/Tums for heartburn, Benadryl to help you sleep.

### EMERGENCY INSTRUCTIONS

**\*\*\*\* Do not hesitate to dial 911 if any emergency develops.**

**\*\*\*\* Call the clinical staff or medical exchange, if after hours, for fever >101, chest pain/shortness of breath, unexplained swelling of a lower extremity (especially if asymmetrical or accompanied by calf pain/redness/pain), productive cough, heavy bleeding or severe pain refractory to pain medication, excessive drainage/redness/pus-like drainage/tenderness of incision, inability to urinate in 6-8 hours or if having other problems with urination, persistent nausea/vomiting, possible reaction to medications prescribed.**

Please sign here to show that you have received these instructions and all questions/concerns have been adequately answered.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician and/or Staff Signature

\_\_\_\_\_  
Date