

Post-Operative Instructions

Vaginal Surgery

- Avoid heavy lifting, strenuous activity, and driving for 7-10 days and until no longer using narcotic pain medication
- You may bathe and shower
- Avoid intercourse, douching or tampons until after your postoperative visit with your surgeon
- Use stool softeners and/or milk of magnesia for constipation
- Call the office if you experience fever greater than 100.5 degrees, heavy vaginal bleeding, or sudden sharp pain in your calf or thigh

Abdominal Surgery

- You may get out of bed and resume activity without exertion
- Avoid heavy lifting (20 pounds or more)
- Avoid driving for 7-14 days and until no longer using narcotic pain medication. You may be a passenger in the car prior to the time when you are ready to drive.
- Use stool softeners and/or milk of magnesia for constipation
- You may bathe and shower. Pat dry over the incision.
- If you have staples left in place, please call the office for removal on post-op day 5-7. If you have skin glue, it will begin to flake off within 7-10 days (you may peel it off at this point)
- Avoid intercourse, douching, and tampons until otherwise advised by your physician
- Depending on what your physician has advised, call the office to schedule a routine post-op appointment within 2-4 weeks
- Call the office immediately if you experience: fever greater than 100.5 degrees; heavy vaginal bleeding; heavy drainage from the incision; redness around the entire incision; or severe and sudden pain in the calf or thigh

Laparoscopic Hysterectomy Procedures

- Avoid heavy lifting (20 pounds or more), strenuous activity, and driving for 7-10 days
- Avoid intercourse, douching, and tampons until your postoperative visit with your surgeon
- Use stool softeners and/or milk of magnesia for constipation
- You may bathe and shower
- Expect the skin glue on your incisions to flake off within 2 weeks, at which point you can peel off the rest. The sutures underneath will dissolve on their own.
- Call the office immediately if you experience: fever greater than 100.5 degrees; heavy vaginal bleeding; heavy drainage from the incision; or sudden sharp pain in a calf or thigh
- Call the office to make a post-operative appointment 2-4 weeks after surgery

continued

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D&E or D&C

- You may experience bleeding for 7-10 days. Pads are fine.
- Use pain medication as prescribed by your physician
- Avoid intercourse, douching, and tampons for 2 weeks
- Call the office immediately if you experience: fever greater than 100.5 degrees or heavy vaginal bleeding
- Call the office to make a post-operative appointment 2-3 weeks after the procedure

Endometrial Ablation Procedures

- Expect to go home on the day of your surgery with pain medication and instructions to rest for the remainder of the day
- Non-steroidal pain medication (e.g. ibuprofen) often works better than narcotic pain medication
- You can drive, work, or exercise the following day as long as you are no longer taking narcotic pain medication
- You can expect to have a vaginal discharge for up to 14 days. Initially, it may be red or pink and gradually turn lighter and more watery. You may use pads or tampons but remember to change both frequently throughout the day.
- Avoid intercourse until the discharge lessens and becomes normal for you
- Call the office to schedule a postoperative visit 2-3 months after the procedure so we can better evaluate your menstrual cycles post-ablation. Keep a calendar of your bleeding pattern.
- Call the office immediately if you experience: fever greater than 100.5 degrees and/or abdominal pain; heavier than expected vaginal bleeding; or drainage.

Bowel Preparation

- Depending on the type of surgery you will undergo, we may ask you to perform a bowel prep. The purpose of the prep is to evacuate as much stool from the lower GI tract as possible to make your surgery easier for the surgeon. The prep also minimizes the risk of infection in the event of a bowel perforation - an uncommon but well-known risk of abdominal surgeries.
- Follow the instructions below:
 - The day prior to surgery, limit your intake to clear liquids and broth
 - At noon on the day prior to surgery, use one bottle of magnesium citrate, which can be purchased at the pharmacy. Follow the direction on the label.
 - Be prepared to stay at home immediately following the ingestion of the magnesium citrate as it works quickly. Drink plenty of clear fluids.
 - During the later part of the evening, use 1-2 Fleets enemas to be certain that the lower part of the GI tract is completely clear.
- For some vaginal surgeries your surgeon may also ask that you simply use 1-2 fleets enemas prior to presenting to the hospital rather than do the entire bowel prep outlined above.