

Women's Clinic of Johnson County

5525 West 119th Street, Suite 200
Overland Park, Kansas 66209
913-491-4020
Fax: 913-491-4725

Your post-operative instructions were created for you by the Women's Clinic of Johnson County to aid in your comfort and understanding of the recovery process. Our goal is to provide you with an excellent surgical experience. Thank you for choosing our health care team.

Post-Operative Instructions for Abdominal Hysterectomy

Pain Control

You will have some abdominal pain for a few days.

You will be prescribed a narcotic pain medication as well as an anti-inflammatory medication. Please use these as directed.

It is important to take a stool softener, such as Colace, while taking narcotic pain medication such as Percocet or Vicodin. Please purchase a stool softener before your surgery.

Note: If the pain is not relieved by pain medication, becomes worse or you have difficulty breathing, call our office.

Incision Care

Inspect your incision daily.

Your incision was closed with dissolvable staples or suture. There are no stitches that will need to be removed, they will disappear over 6 weeks.

A small amount of blood or clear drainage from the incisions is normal and not a cause for concern.

Bruising around your incision site is common and not a cause for concern.

Your incisions may be itchy for a few days. This is part of the normal healing process.

As your incision heals, it will change in color and may become numb for several weeks.

If you have steri-strips (small adhesive strips) in place, they will peel and fall off. If they do not fall off in 10 days, carefully peel them off.

Note: If you notice any redness of the skin surrounding the incision, heavy drainage or bleeding from your incision, call our office.

Nutrition

You may resume the diet you had prior to surgery.

Drink 6-8 glasses of water daily.

Bowel Function

For the first several days after surgery, the bowel is usually less active. You may not have a regular bowel movement right away depending on your pre-op bowel prep or pain medication use.

Narcotic pain medication (Percocet, Vicodin, hydrocodone or oxycodone) will increase constipation.

Regular bowel movements may be less frequent.

If constipation should occur:

- Drink more fluids
- Continue to take a stool softener, such as Colace, until constipation resolves.
- Take a mild laxative such as Milk of Magnesia

Swelling

Mild abdominal swelling can occur following surgery due to slowing of the bowels.

Swelling of the hands and lower extremities is common due to fluids given during surgery.

If you have swelling of the calves that is persistent or associated with redness, call our office.

Activity

It is normal to feel tired for a few days after surgery. Listen to your body and do not overdo it.

Walking is encouraged immediately after surgery, as tolerated. You should NOT be bedridden after surgery as continued movement will prevent prolonged recovery times due to "deconditioning".

If you could climb stairs un-aided prior to surgery you may resume climbing stairs on discharge home.

No strenuous activities such as heavy lifting (greater than 10 pounds or a gallon of milk), pushing or pulling for 6 weeks.

Abdominal exercise should be avoided until 6 weeks.

Do not drive while taking prescription pain medication or if your level of discomfort could inhibit your ability to operate a motor vehicle safely.

You may return to work after 4-6 weeks, provided that heavy lifting is not a job requirement. Recovery times vary from patient to patient. Your doctor will make recommendations based on your specific case.

You may shower the day after surgery. Pat incisions dry. Do not rub your incisions with washcloth or towel. Keep your incisions as dry as possible.

You may take a bath after six weeks. You must also wait six weeks to go into a

swimming pool, hot tub or the ocean.

Vaginal Bleeding

Light vaginal bleeding, spotting or brown discharge for up to six weeks is common.

Note: If you have heavy, bright red vaginal bleeding, call our office. Bleeding that fills a pad in one hour is considered heavy bleeding.

Sexual Intercourse

Avoid placing anything in the vagina for **8 weeks** (i.e. tampons, douching, and sexual intercourse).

Vaginal closure disruption can occur if sexual intercourse is resumed before healing is complete and will require additional surgery, which can lead to shortening of the vagina and painful intercourse.

Follow-up Appointment

You should schedule a follow-up post-operative appointment at 2 weeks and at 6 weeks.

Call The Office If You Are Experiencing:

- **A fever higher than 100.4 degrees F.**
- **Increasing pain not controlled by pain medication.**
- **Inability to eat or drink without vomiting.**
- **Shortness of breath.**
- **Inability to empty your bladder.**
- **Redness and tenderness at the incision site, or a large amount of drainage.**
- **Heavy, bright red vaginal bleeding, or foul smelling discharge. You can expect to have a small amount of reddish-brown colored discharge for up to 6 weeks. Do not be alarmed by this.**

If you feel you need to be seen emergently, please go to the Emergency Department where your surgery was performed so that our physicians may care for you

Any questions regarding your surgery or post-operative recovery should be directed to the staff at the Women's Clinic of Johnson County rather than your Primary Care Physician.