



Post-Operative Instructions

The following guidelines are intended to address the most common questions and topics we hear from patients following OB and GYN surgeries. However, every body is different, and it's important that you call with any questions.

Post-Operative Visit

Most patients will need to be seen at the office after your surgery. If you do not already have an appointment, call our office soon after discharge to make this appointment. Additional information regarding activity, sexual intercourse, and when to return to work will be given at this appointment.

Activity

- Rest is essential during the first few weeks after surgery. Gradually increase your activity over the next few weeks, but rest when you tire or feel discomfort.
- Preparing a light meal for yourself is acceptable.
- You may go up and down stairs.
- Walking is an excellent way to gain strength and help bowel function.
- Avoid driving for at least 2 weeks and until you are off all pain medication.
- Do not resume any heavy activity (lifting more than 10-15 pounds, abdominal exercises, etc.) for at least 6 weeks.
- Sexual intercourse can usually be resumed about 6 weeks after surgery, depending on findings at your post-operative appointment.

At times you may become frustrated or impatient because you are not feeling as well or doing as much as you would like, but this is a normal reaction to surgery and will pass with time. Fatigue may take the longest to disappear and often takes several weeks to return to normal. Remember, everyone recovers at their own rate. Some days will be better than others. Be patient and kind to yourself. Give yourself time to regain your strength and energy. Accept help when it is offered!

Diet

- Resume a normal, well-balanced diet at home.
- An abundance of protein foods (fish, meat, eggs) should be particularly included.
- Drink 8-10 glasses of water each day and eat a high fiber diet (bran, fruit, prune juice) to promote normal bowel function.
- Pain medications may contribute to constipation. The following products may be used if you are constipated: Milk of Magnesia, Colace, Fibercon or Dulcolax.

Vaginal Discharge

If you had a hysterectomy or vaginal repair, you may have a bloody or yellow-brown discharge for several weeks. You may even pass pieces of suture that are dissolving. Bleeding may be somewhat increased for approximately 2-6 weeks after surgery, which is related to the stitches dissolving. All of this is normal. However, if bleeding becomes free-flowing, our office should be notified. In any case, do not use tampons until after your post-operative appointment.

Bathing

Showers are permitted but avoid baths for at least 2 weeks if you have a skin incision. If you had vaginal repair surgery, soaking in a shallow tub of clean, warm water three to four times daily will help relieve discomfort. A sitz bath at bedtime can be soothing and promote rest.

Incision Care

- Keep your incision clean and dry.
- If staples have been used to close your incision, they will usually be removed before discharge from the hospital and steri-strips will be applied.
- Remove the steri-strips as they loosen or in one week.
- If you notice redness or drainage around your incision, please call our office.
- Report any fever above 100.4 F.
- If you have had vaginal surgery involving your rectum, we will discuss specific care for this when you are discharged from the hospital.

Catheter or Cysto-Cath

Patients with bladder repair may require a catheter at home until the swelling recedes. Some patients require days to weeks before adequate bladder emptying will resume. If you go home with a catheter, you will be given specific follow-up instructions.

In general, if you have been instructed to keep the catheter clamped, unclamp the catheter after each time you urinate. Measure the amount of "residual urine" in the bag. When, after urinating, this amount is consistently below 100cc, call the office to make an appointment to have the catheter removed.

Work

There are no fixed rules about returning to work. Each individual's work situation is evaluated separately. Generally, 4 to 6 weeks away from work is a good idea.

Pain Management

- We do not fill pain medication after office hours or on weekends, so please make sure you plan ahead and call our office and speak to a Triage Nurse.
- You may use Ibuprofen (if not allergic) alternately with your prescription pain medication. You should be able to gradually reduce the number and frequency of the pain medication.

When to Call Your Doctor

If at any time advice or assistance is needed, call our office number day or night.

Call our office immediately if you experience:

- Persistent heavy bleeding
- A temperature above 100.4 F
- Any unusual or persistent pain in the abdomen, back or legs
- Drainage from your incision

**Thank you for allowing us to participate in caring
for you before and after your delivery.**

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