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### **POST OPERATIVE INSTRUCTIONS: HYSTERECTOMY**

The following information will help answer the frequently asked questions and will help you understand some of the common experiences that may occur after your surgery. Please note that most patients have very few complications after surgery. However, to ensure that you have as much information as possible, the list below should help with any concerns you have after your surgery.

All patients should:

1. Have 2 post-operative appointments scheduled; 2 and 8 weeks after your surgery.
2. Contact the office for any problems before going to the Emergency Room (ER).
3. If an ER visit is necessary postoperatively, always return to the hospital where your surgery was performed.
4. Prescriptions for pain medication and an antibiotic will be sent to your pharmacy before your discharge home from the hospital.
5. Pick up an over-the-counter stool softener or laxative to use for the first three days after surgery to prevent constipation, such as docusate sodium or Milk of Magnesia.

Post-Operative Instructions:

1. **DO NOT** insert anything into your vagina for **8 weeks** until you are cleared by the provider at your **8-week** post-operative appointment. This includes tampons, menstrual cups, sexual intercourse, inserting any personal massagers, and even water.
2. **DO NOT** submerge in any body of water. This includes baths, pools, hot tubs, and the ocean.
3. You may shower starting the day after surgery. **DO NOT** take a bath for 8 weeks after surgery.
4. Lifting is limited to 10lbs until cleared at your 8-week post-operative visit.
5. Activity is as-tolerated. If you experience pain, stop the activity.
6. **DO NOT** drive while taking narcotics. If you are not taking any narcotics, you are able to drive when you feel strong and safe enough to stop your vehicle effectively in the event of an emergency. If you are not confident, have someone drive you.

What should I expect?

1. Activity – You may feel some fatigue for the first two weeks after surgery. Gradually increase your activity. You should NOT be bedridden after these procedures. It is important to keep moving. This includes using the stairs if you were previously able to do so prior to your surgery. If you are uncertain about being able to use stairs, make sure you get some assistance. Light exercise can also help the pain. (See Exercise below for further details)
2. Vaginal Bleeding – It is normal to experience vaginal spotting or pink/red/brown discharge for the first 6 weeks after your procedure. If you experience any moderate or heavy vaginal bleeding, please contact our office.
3. Surgical grade glue, or Dermabond, was used to protect your abdominal skin incisions and it should stay in place even with showering for up to 2 weeks or longer.
4. Bruising – Bruising around the incisions can occur and is normal. Pain or warmth may develop from the blood under the skin. Using the medications below can help with any pain from bruising.



5. Pain – You may experience some mild discomfort after surgery. It is normal to experience some pain around the incision site and pressure and pain with urination or bowel movements. These symptoms will get better over time. You may also experience some sharp chest or shoulder pain. The pain can occur during deep breaths. This is from the carbon dioxide gas used in the abdomen to allow the surgeon to see. This should resolve over the first 2 days.
6. Prescriptions - You should pick up your prescription for 800mg of Motrin which should be effective at managing your pain. If you are unable to take Motrin or are having some pain in between doses, you can also take extra strength Tylenol (acetaminophen). The maximum dose in 24hours for Tylenol is 4000mg and for Motrin is 2400mg.

*You should also pick up a prescription for a short-term narcotic to be used sparingly because it will cause constipation. DO NOT take additional Tylenol if you are taking your narcotic because it has the same ingredient in it. Most patients use mainly Motrin or Tylenol during the day and a narcotic as needed at night to help with sleep.*

7. Effects from Anesthesia and Surgery – Common side effects after receiving anesthesia for your procedure are nausea and constipation. Anti-nausea medications may be given before and after the procedure to prevent nausea. Typically, nausea will resolve in 12-24 hours. Constipation can occur from the medications typically used directly after surgery, such as IV morphine or other narcotics, for example. Our recommendation is to use over-the-counter laxatives, such as *Milk of magnesia*, twice a day for three days immediately after surgery to prevent any constipation that may result from your procedure. Constipation typically causes more pain and narcotics used to help with pain can cause more constipation leading to a vicious cycle. Constipation can also lead to nausea, so please use the narcotics sparingly.
8. Swelling and bloating – It is common to have some mild abdominal distention for a few days after surgery. It is expected to resolve over time. It is also possible to notice some swelling in your legs or arms due to the increased fluid given during your procedure. This should also improve.

#### When to contact the office:

1. If you are bleeding from the vagina heavy enough that you are soaking a pad (not a pantyliner)
2. If any of your incisions appear red, are separated, or are draining.
3. If you start to notice a foul odor with increasing pain at the incision site.
4. If you run a fever higher than 100.4 degrees.
5. If you experience burning with urination, increased frequency of urination, or painful urination.
6. If you are unable to urinate.
7. If you experience shortness of breath

#### Extra Information for Reference:

1. Average Recovery Times. Most patients leave the hospital the same day for laparoscopic or robotic hysterectomy. Most patients go home from the hospital the day after abdominal or open hysterectomy. The average time to achieve approximately 80% of normal activities is 2 weeks; the average time back to work is 7 to 10 days. You should be able to walk, eat, and drink the day after the surgery with mild to moderate discomfort. Please note that every patient is different, and the times stated above can vary from patient to patient



2. Exercise. Walking is highly encouraged after surgery, since it allows for faster return to normal function, and also helps with pain (exercise causes release of natural morphine type compounds in your body). Use common sense when starting an exercise routine after surgery.
  - a. Abdominal exercises - Please avoid until your 8-week post operative visit
  - b. Cardio exercises-Start out slowly and gradually increase time, distance and speed. If you are starting a new routine, consult your internal medicine doctor if you have medical illnesses such as heart, lung, or other conditions.
  - c. No lifting more than 10 lbs for 8 weeks after surgery.