General Surgery Home Care Instruction

Anesthesia can alter your thought process. Please do not make important decisions, sign legal documents, drive, or drink alcohol for 24-48 hours after anesthesia.

Questions | Concerns
▪ Call UTHA ASC at 512-232-7347 during office hours (Mon-Fri 7:00am -3:30pm)
▪ Call UTHA Clinic at 833-882-2737 during after-hours

Nutrition
▪ Your diet is: Regular Diet
▪ Start Clear Liquid Diet, and advance to your regular diet as tolerated
▪ Regular diet, but high-fiber food or a fiber supplement which will make your stool softer and less painful.
▪ It is important to consume a balanced diet and take in good nutrition to help with healing. Supplementing your diet with protein shakes (ex: Ensure, Boost, etc) may be helpful.
▪ Drink enough fluids to keep your urine clear or pale yellow. This is usually about 8-10 glasses per day.

Activity
▪ Do not drive while taking prescription pain medicines.
▪ You should walk several times per day. You may climb stairs.
▪ You may ride in a car. No distant traveling until seen in the office. No driving until no longer taking pain medications and having no abdominal discomfort.
▪ No lifting over 15 pounds for 2 weeks, and no vigorous abdominal activity for 6 weeks.
▪ You may resume sexual intercourse when comfortable.
▪ Expect to be weak and to tire easily when you first get home; This is normal and will take weeks to resolve.

Return to Work | School
▪ You can return to work when you feel well enough. You must not be taking narcotic pain medication when you return to work. Please contact your surgeon if you need clarification on when you are able to return to work or school.
▪ If your surgeon believes extended time off of work or school is needed, a note can be provided to you.

Wound/Incision Care
▪ An incision is when a surgeon cuts into your body tissues. After surgery, the incision needs to be cared for properly to prevent infection.
▪ If a dressing has been left on your wound, it can be removed after 2 days.
▪ If there are steri-strips (short pieces of white tape) in your incision, then let them fall off on their own. You may also have skin glue on your incision, this will flake off on its own.
▪ Either sutures (stitches) or staples were used to close your incision.
▪ If you have sutures, they are dissolvable and are under your skin. You do not need these removed.
▪ If you have staples, these will be removed in clinic in 10-14 days after they were placed.
▪ Do not soak in bathtub, pool, or any body of water for a week, but it is OK to shower.
▪ If you have had ano-rectal surgery, then sitting in a few inches of water for 15 –20 minutes 3 times a day and after bowel movements will promote healing.
▪ If you have had ano-rectal surgery, a dissolvable dressing will pass on its own.
▪ The wound may itch when it is healing. Do not pick or scratch at the wound.
▪ Keep wounds clean and dry. Do not apply creams or lotions.

Pain
▪ You may have been provided with a prescription pain medication by your surgeon. Please take these only as directed.
Unless you are unable to take ibuprofen (ex: chronic kidney disease, a history of gastrointestinal ulcers) or acetaminophen (chronic liver disease) these medications are okay to use after your surgery to help with pain control. Take them as directed. They can be taken together, and also can be taken with your narcotic pain medications unless they contain acetaminophen.

**Nausea and Vomiting**
- Not everyone experiences nausea and/or vomiting after a procedure or anesthetic, although it is not uncommon.
- Nausea and/or vomiting after a surgical procedure can be distressing and unpleasant, but it also can make the pain of the surgery worse or necessitate admission to the emergency room or hospital.
- Rarely, vomiting can result in other more serious problems, such as damage to your surgical site.

**Measures to avoid or reduce nausea and vomiting:**
- Avoid sitting up or getting out of bed too quickly.
- Stay hydrated, begin with small sips of water and slowly increase amount.
- Proper pain relief is important. Although some pain-relieving medicines can contribute to nausea, severe pain can add to nausea. Do not take pain medications on an empty stomach.
- Taking slow, deep breaths can help to reduce nausea.
- Avoid foods that are spicy, fried or high in fat for 24 hours after surgery.
- It is much easier to relieve the feeling of nausea if it is dealt with before it becomes severe.
- Be sure to call your surgeon if you experience unrelenting nausea (nausea which keeps you from eating or drinking) or persistent vomiting.

**Bowel Movements**
- High fiber diets help with constipation.
- Narcotic pain medication may cause constipation. You may take over the counter stool softeners (Ex: Docusate), or laxatives as needed.

**Home Medication**
- You may resume all the medications you were taking prior to your surgery unless specified by your physician.

**When to contact your Surgeon**
- Pain that is not improving or getting worse.
- You have increased bleeding (more than a small spot) from the surgical site.
- You have redness, swelling, or pus coming from the wound.
- You notice a bad smell coming from the wound or dressing.
- Your wound edges separate after the sutures, staples, or skin adhesive strips have been removed.
- You have a fever (>101F).
- You feel lightheaded or faint.
- You have trouble breathing. (Call 911)
- You develop persistent nausea, vomiting or uncontrolled diarrhea.

**Follow up**
- Clinic Location: 1601 Trinity St, Austin TX 78712 Health Transformation Building Tel# (833)882-2737
- Your follow up clinic appointment will be ______day / week after surgery
- The clinic staff will contact you to schedule the appointment
- Please call the clinic to schedule the appointment
- Your appointment is scheduled on (date & time): ______________________
- You do not need to follow up unless questions/concerns arise

**Additional Instructions:**
__________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________

Patient Signature: ____________________________ Date ____________ Time ____________

Pre-Operative Nurse Signature: ____________________________ Date ____________ Time ____________

Post-Operative Nurse Signature: ____________________________ Date ____________ Time ____________