



Frequently asked questions after surgery
David J. Harrell, M.D.

Introduction:

Patients often have similar questions after surgery. Sometimes these questions cause unnecessary worry. Therefore I have tried to answer the most common questions to relieve stress that I have often witnessed in patients after their surgery is over. Please call our office at **(865) 938-8121** to speak with me, the nurse on call, or the doctor on call with any other questions that arise.

Questions and Answers:

How do I address pain from my incisions after surgery?

I typically provide a prescription for Percocet or Hydrocodone (a bit milder) to each patient who is discharged home after surgery. Both of these are very effective at “taking the edge off” of post-operative pain, but it is very common to continue to have some pain. Both of these medications can be taken one or two tablets at a time as frequently as every 4-6 hours. I usually recommend taking at least one before going to bed the first night, even if there is no pain at the moment, since pain can often arise during the night and disturb sleep.

Both of these medicines also can have the side effects of nausea, vomiting, constipation, and itching. Having these side effects does not mean you are allergic to the medicine, but it does mean you might want to limit your use of them as soon as the decrease in pain permits. It’s ok to use Ibuprofen or Tylenol (Acetaminophen) instead of the pain medication if able.

What should I do if I have fever?

Most fever in the first 2-3 days after surgery is due to congestion of the lungs. If you experience low-grade fevers after discharge, the first step is to try to be out of bed, walk, cough, and breathe deeply as much as possible to open the lungs. If you experience a fever of greater than 101 degrees, please call to inform us.

What do I do if I see blood on my incision?

Patients often see a small amount of blood-staining on their incisions after discharge from the hospital or surgery center. While this may look alarming, it is very rarely a serious problem. It is acceptable and safe to apply pressure to the site of bleeding with a sterile 4x4 gauze that can be purchased at any drugstore. 5 minutes of firm pressure will stop most minor episodes of bleeding. If active bleeding continues, please call to inform us. Ok to change the bandages daily as needed until there is no further drainage.

When can I shower or bathe?

Most incisions are covered with a product similar to superglue called Dermabond ,or covered with an elastic bandage. These incisions can be washed in the shower on the day after surgery. Letting water run over the incision and washing gently with soap and water is very safe beginning at that time. Soaking in

a swimming pool or bathtub should be reserved for at least 7 days after surgery until more healing has occurred.

What about eating?

I typically recommend eating lightly on the night after surgery. Chicken soup and Ginger Ale (*except* after Hiatal Hernia repair and Gastropexy surgeries, as carbonation can increase gas and put pressure on your stomach), are my usual recommendations although any comparable light fare would be similar. Usually on the day after surgery all of the anesthesia medications have been processed out of your system, and a return to your usual diet can be accomplished without difficulty. If you still have some nausea, continue to proceed slowly with small meals. Also, choose lighter foods until the queasy feeling has completely resolved. These symptoms are almost always the result of the medications used to put you to sleep, and your body will rid itself of them eventually.

When can I drive?

I recommend driving when you have been off of prescription pain medicines for at least 24 hours, and when you think that your reaction time if faced with a sudden crisis in traffic would not be compromised by pain from your surgery. This is often achieved 5-7 days after surgery.

How do I know if my incision is infected?

Many patients notice some mild redness around their incisions, and worries about infection are frequent. For operations such as thyroid, parathyroid, or laparoscopic operations, wound infections are extremely uncommon. Most infections occur between 5 and 10 days after surgery. They are characterized by pain, intense redness, and often drainage of yellow fluid or pus. Fever of 101 or greater can also accompany these signs. If these occur, we prefer to see you in the office within the next 48 hours. Taking antibiotics by mouth is often sufficient treatment, but at times we open a portion of the incision in the office to allow the fluid to drain.

What kind of activity can I do after surgery?

By the time you are discharged home it is expected that you will be sore, but you should be able to walk on your own. You are encouraged to be up and about as much as you can tolerate. Expect your energy level to be decreased for at least a week after surgery, but do not hesitate to be as active as you can. We generally recommend no lifting greater than 10 pounds for 10 days for outpatient or day surgery. No lifting more than 10 pounds for 6 weeks after open abdominal surgery, Colon, Hiatal hernia, or Ventral hernia surgeries.

It is acceptable for all patients to leave home and go where you like, as long as you have a driver, beginning the day after discharge. Walking up stairs is also not going to harm you in any way.

How to prevent constipation postop?

Please take daily Metamucil, MiraLAX, or stool softeners postop to prevent constipation, which happens frequently with anesthesia and pain medication.

When do I need to see the doctor after surgery?

I prefer to see patients in the office between 7 and 14 days after most operations. There are exceptions, and I will communicate that to you as needed. The follow-up appointments are not automatic, so please call our office at **(865) 938-8121** for the appointment.

Thank you,

DR. David J. Harrell, M.D., FACS