

Steven Y. Kim, M.D., F.A.C.S. Crea L. Fusco, M.D. Peter H. Phan, M.D. Molly J. Hughes, PA-C

## POST-OPERATIVE INSTRUCTIONS

# Laparoscopic Appendectomy

#### FOLLOW-UP CARE

- Call Jessica to schedule a 2 week follow-up visit.
- Littleton Office: (303) 795-3375

#### **ACTIVITY**

- Walking is strongly recommended and climbing stairs is allowed immediately after returning home from surgery
- You may lift and perform any light (no lifting more than 30lbs) exercise you feel up to; but if it hurts, don't do it.
- You will feel fatigued for at least one week post discharge, this is normal.

#### **MEDICINE**

- A narcotic prescription (Percocet/ Vicodin/ Tylenol #3) will be provided after surgery.
- To decrease pain caused by inflammation, you may take 800mg of Advil 3 times a day with food for the first 5-6 days after surgery or after discharge from the hospital.
- It is very common to have extreme pain to your right (or both) shoulders after laparoscopic surgery. This is referred pain due to the gas we use to expand your abdomen during surgery. The best way to help with this pain is to walk around. It usually subsides within the first couple of days.
- Unless otherwise instructed, resume your normal medicines once you return home.

### **DIET/ BOWEL FUNCTION**

- Clear liquids, bananas, rice, applesauce and toast/ crackers are best if you feel nauseated.
- You may eat whatever you choose, but expect diminished appetite for several days after surgery. Make sure to
  take in lots of fluids. You may wish to avoid fatty or heavy foods for a few days because some people
  experience diarrhea or nausea. After surgery your body will adjust
- Constipation is very common after surgery, after anesthesia, after inactivity and while on narcotics. You may choose to take Colace stool softener (over the counter) twice a day while on narcotics. If you had not had a bowel movement 1-2 days after surgery, take a laxative before going to bed. Two Dulcolax laxative pills (not the stool softener), Miralax, or 30-60 milliliters of Milk of Magnesia usually works well.

#### **DRIVING**

- Avoid driving for 24 hours after anesthesia/surgery.
- You may drive when your pain does not require narcotic pain medicine.
- Before driving, test yourself: 1) sit in the driver's seat of your parked car. 2) Stretch to look over both shoulders. 3) Step on the brakes quickly. If any of these maneuvers cause pain, wait to drive.

#### WORK

- Plan to take 5-7 days off work after you return home from the hospital so you can sleep and rest.
- Office/desk jobs can usually be resumed one week after you return home from surgery. Remember to change positions frequently and take hourly breaks to walk and keep your blood moving in your legs.
- Physical/ strenuous jobs are best resumed when you feel able to do the required work without pain. A work
  release from your doctor will be provided depending on your individual needs.

#### SHOWERING/BATHING

- You may shower the day of surgery. Remove any outer gauze and simply let the water and soap run across the incision area. Lightly pat the area dry.
- You may bathe or soak in a hot tub one full week after surgery.

#### WOUND CARE

- Surgical glue forms a dry membrane over the wound. This usually peels or falls off like a scab 7-10 days after surgery. It's okay to peel it off after 2 weeks.
- Sometimes the incision will bleed or ooze yellow fluid. If this occurs, cover the incision with a band-aid or gauze to collect the drainage. The wound will form a dry scab within 1-2 days. The band-aid or gauze is then no longer needed.
- Bruising can be frightening but is rarely cause for concern. Moving and using the instruments during surgery can cause bruising, especially at the belly button. (Your belly button incision will likely be the most sore.) Most bruising appears after the first 24 hours following surgery. If bruising painfully spreads beyond its original boundaries, call your doctor at the office.
- Mild redness is common near the wound. If redness spreads larger than nickel-size, or if creamy discharge (pus) leaks from the incision, notify your doctor.
- Ice can relieve much of the early post-operative pain but is not required.

#### WHEN TO NOTIFY YOUR SURGEON

- Fever greater than 101 degrees, spreading redness, or pus coming from the incision.
- Vomiting or inability to keep food or liquids down.
- Eyes or skin show a yellow or jaundiced appearance or urine turns very dark.
- Generally, you will feel stronger and less sore with every day. If after a few days, you begin to feel worse, please call us.

If you have any questions, either before or after surgery, please give us a call. We are always available to help.