

What is a Colon and Rectal Surgeon?

Colon and Rectal Surgeons are experts in the treatment of colon and rectal problems. They have completed advanced training in the treatment of colon and rectal disease in addition to full training in general surgery. Colon and rectal surgeons are board certified in colon and rectal surgery. Colon and rectal surgeons treat benign and malignant conditions and perform screening examinations.

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INSTRUCTIONS FOLLOWING EXCISION OF A THROMBOSED EXTERNAL HEMORRHOID



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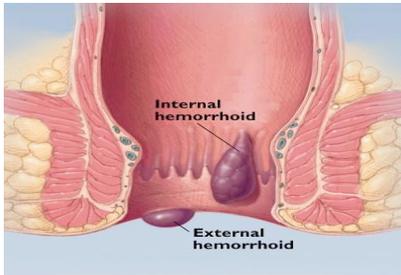
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Thrombosed External Hemorrhoids

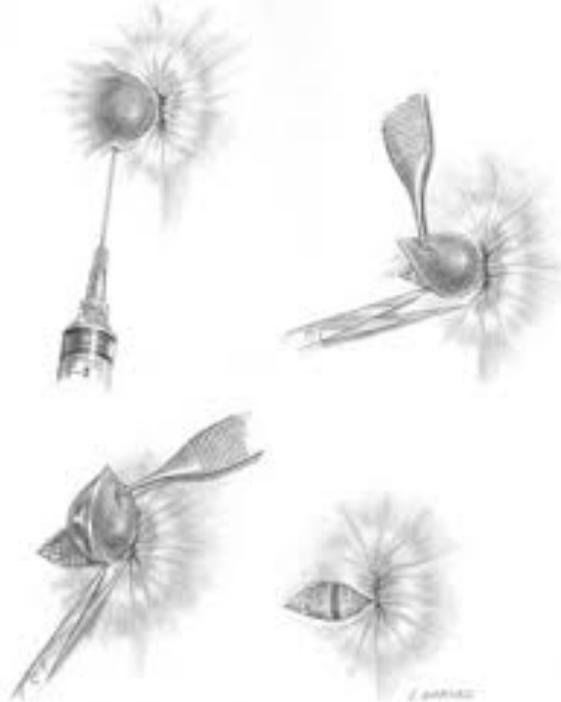
Often described as “varicose veins of the anus and rectum” hemorrhoids are enlarged bulging blood vessels in and about the anus and rectum.

There are two types of hemorrhoids: Internal and external, depending on the location.



- External Hemorrhoids lie outside of the rectum underneath very sensitive skin. If one of these vessels' ruptures, blood accumulates underneath the skin. This causes a painful swelling. The external hemorrhoid feels like a hard and painful lump. It bleeds only if it ruptures.
- Internal hemorrhoids lie inside the rectum and are covered by the lining of the rectum which contains no pain sensation. Painless bleeding and protrusion during bowel movements are the most common symptoms. However, an internal hemorrhoid may cause severe pain if it is completely “prolapsed” – pushed from the inside and cannot be pushed back inside.

Excision of External Hemorrhoids



Steps in excision of external thrombosed hemorrhoid.

Procedure & Wound Care

- Today the skin overlying the thrombosed hemorrhoid has been excised along with the clot itself.
- A small wound is left. A special dressing has been placed over the wound.
- The dressing should be left in place until a bowel movement or until tomorrow morning when it can be soaked off in the tub.
- No strenuous activity for 8 hours.
- There will be pain when the local anesthetic wears off. Tylenol or the pain medication prescribed by your physician will usually control the pain. If you have questions call our office for instructions.
- It will take 10 to 14 days for the skin wound to heal. Do not be alarmed if itching, discharge or bleeding occurs during this period of time as it is normal.
- Keep your bowels moving daily. Use Metamucil or a stool softener as needed. If this fails, use two tablespoons of milk of magnesia.
- Anal hygiene is important. Wash or sit in the tub after a bowel movement.
- Return to the office as directed by your surgeon.