

## Discharge Instructions – Colon Surgery

### Activity

Being tired after surgery is normal and will improve over the next few weeks. Slowly increase your activities at your own pace.

- Avoid heavy lifting, pushing or pulling objects that weight more than 10 pounds and no strenuous exercises or activities for 2 weeks.
- You can and should use your normal arm range of motion. If you hold your arm next to your side during the recovery period, the tendons in your arm will tighten, and you will not be able to raise your arm normally. Raising your arm without doing anything strenuous will not cause the incision to open.
- Perform stretching exercises for your arm by standing a few inches from a wall and placing your hand on the wall and slowly crawling your hand/arm up the wall.
- Walk at least 4 times a day to promote adequate circulation and avoid blood clot formation.
- You may experience some abdominal muscle soreness at first. This can be relieved by placing an ice pack on and off for 20 minutes.
- You may shower 24 hours after surgery. No soaking baths, hot tubs, swimming or any activity that will submerge your incision under water for 2 weeks.
- Some of the medications you are taking may make you drowsy/sleepy. No driving or operating machinery while taking these medications. DO NOT drive until you have been off your narcotic pain medications for 48 hours (2 days).

### Diet

You may notice decreased appetite. It may take up to 6 weeks to normalize. Eating small, frequent meals may help.

- You may resume your regular diet.
- Drink 8 glasses of water daily.
- If you have an ostomy (colostomy, ileostomy), you will be given specific instructions on care and diet.
- Your bowels may be irregular after colon surgery. If you are having loose stools, make sure to drink plenty of fluids. It is ok to take Imodium and fiber supplements.

### Pain Medications

Use your pain medications as prescribed if needed. Switch to plain acetaminophen (i.e. Tylenol) or ibuprophen (i.e. Advil) when pain decreases.

- Pain medications can cause nausea if taken on an empty stomach.
- Narcotic pain medications may cause constipation.
  - Take an over-the-counter stool softener (example: Colace) while taking narcotics.
  - Eat high fiber foods and drink 8 glasses of water daily.
  - Walking will help the return of normal bowel function.
  - If you do not have a bowel movement in 3-4 days, call your surgeon.

### Medications

You may resume your previous medication(s) unless instructed otherwise.

- Unless you have been told otherwise by your physician, it is okay to resume aspirin, blood thinners, and any other anticoagulants at discharge.
- Please consult with your surgeon prior to taking any herbal medications (some herbal medications can increase the risk of bleeding).
- You may take antacids for indigestion and gas symptoms.

### Incision Care

In order to prevent post-operative infection, it is important to properly care for your surgical incision

- You may shower after 24 hrs.
- You may wash the incision area with a gentle soap and water. Do not vigorously rub the incision area. Pat it dry with a clean towel.
- Avoid allowing the water spray right on to your incision. It may damage the healing skin and increase the risk of infection.
- Do not apply any lotion, powder or cream on your incision until it has completely healed (approximately 2 weeks).

- It is NORMAL to have pain and a “bump” at your incision sites after surgery. It will soften to normal over a few months.
- If there is a dry gauze dressing, you may remove it in 48 hrs (or earlier if it becomes wet or bloody). There is no need to apply a new dressing.
- If small tape strips (steri-strips) are used on your incision; leave these in place as they will fall off by themselves over time (do not remove them). If the ends begin to curl up, you may trim the loose ends with scissors. If the majority of the steri-strip has peeled off, you may remove that single steri-strip.

### **Drain Care**

- Empty the bulb
  - Wash your hands and put on disposable gloves.
  - Turn the bulb away from you and remove the stopper.
  - Squeeze the fluid into a measuring cup. Make sure the bulb is empty.
  - Record the amount of fluid in the cup, then discard the fluid.
- Clean and reconnect the bulb.
  - Clean the top of the bulb with gauze or a paper towel.
  - Squeeze the bulb tightly to squeeze out all the air. While holding the bulb compressed, place the stopper back on the top.

### **Preventing Surgical Site Infections**

- Avoid touching the surgical incision. If touching the surgical incision is necessary, WASH YOUR HANDS with soap and water for 15 seconds first.
- If the surgical incision is located within a body crease or under an abdominal fold, keep the incision CLEAN and DRY. Place a dry gauze dressing or a soft clean material, such as a small clean pillow case, between the fold to absorb moisture. Change the dressing daily and as needed when moist or dirty.

### **When To Notify The Surgeon**

- You develop a fever over 100.5 degrees F or over 38 degrees C.
- If you notice warmth, redness, drainage, bleeding, swelling, soreness, hardness or a foul odor from your incision site.
- Opening of your incision line.
- Pain that you cannot control with the medicines you have been given.
- Persistent nausea and vomiting that you cannot control with the medicines you were given or vomiting more than 2 times in 24 hours.
- Inability to have a bowel movement five (5) to seven (7) days after your surgery.
- Ileostomy patients: Call if the daily output is > 32 ounces (4 cups) daily or ostomy appliance needs to be emptied more than 6 times per day.

***In case of an emergency, call 911 for medical help right away.***

### **Follow-Up Appointment**

Make a follow-up appointment for 1-2 weeks after surgery.

Please do not hesitate to call the office [\(310\) 373-6864](tel:3103736864) with any questions or concerns.