

Post-Operative Instructions For Ambulatory Anal/Rectal Surgery

You have just had a same day surgical procedure for one of the following problems:

- a. Hemorrhoidectomy
- b. Anal Fissure
- c. Anal Fistula
- d. Other _____

These are instructions for post-operative care:

WOUND CARE

- Take all the dressings/bandages off tomorrow morning and take the first hot sitz bath
- The bath water should be as hot as tolerable, without causing burns
- It is NOT necessary to add anything to the water (such as Epsom salts, etc.)
- These hot baths (15-20 minutes each) should be used AT LEAST 2-3 times each day and especially after bowel movements
- Expect some oozing or slight bleeding
- No bandages are necessary, but may be used as desired to absorb any drainage

PAIN

- The anesthetic that was injected should last about 2-4 hours
- It is normal for the anal area to be very painful for several days, and especially after the initial bowel movement
- Hot baths provide excellent pain relief and comfort and should be used liberally
- The prescription you have been given is for a strong narcotic pain medication
- Use the pain medicine as necessary, but be aware that it will cause some degree of constipation
- If the pain is less severe, Motrin (up to 600mg every 4-6 hours) or Tylenol (up to 1000mg every 6 hours) may be substituted

DIET

- Eat as much fiber as possible: fruits, vegetables, salads, whole grain breads, bran cereals, bran muffins, prunes and prune juice are excellent sources of fiber
- Drink lots of fluids - especially water - 6-8 glasses per day
- Avoid spicy or acidic foods, at least until the wounds are healed

BOWEL MOVEMENTS

- It is common not to move your bowels for the first 2 or 3 days after surgery
- It is important to try to avoid becoming constipated longer than this
- A high fiber diet is essential
- Metamucil or a fiber supplement should be used
- An over the counter stool softener such as Colace 100 mg twice a day can be added if directed by your surgeon
- If a laxative is required to produce a bowel movement, start with Milk of Magnesia 30cc (2 tablespoons), if directed by your surgeon
- If this is not effective, take 6 oz of Magnesium Citrate if directed by your physician
- Be aware that the first bowel movement may be uncomfortable

ACTIVITY

- You may resume normal activities, including exercise, as soon as you feel up to it
- You may return to work when you feel able
- Do NOT drive or drink alcohol while taking the narcotic pain medicines
- It is unlikely that usual activities would affect the success of the surgery

THINGS TO WATCH FOR

- A small amount of bleeding or oozing is normal, especially with bowel movements
- If the bleeding is heavy or does not stop after bowel movements, call the office
- It is not unusual to have difficulty urinating after surgery
- Often times a hot sitz bath is helpful
- If you have not urinated at all by the first evening after the surgery, call the office
- If you have a temperature greater than 101, call the office

ADDITIONAL INFORMATION

- Call the office to arrange a follow-up visit in 3-4 weeks
- Your surgeon can be reached anytime during the day by calling the office if you have questions or concerns. A call to the office may require a return call by the doctor as they are often performing surgery in the operating room.