

Recovery/Post-operative Instructions

Umbilical Hernia Repair

Diet/Bowel Care

- You may resume your regular diet starting with bland (non-greasy, non-spicy) food, in small portions, that is easy to digest on the day of surgery
- Drink plenty of fluids to keep well hydrated as your body is recovering (juices, water, broth, sports drinks).
- Having surgery and narcotic pain medications can cause your bowels to slow down, and can cause constipation.

You should start taking a stool softener (Colace or generic Docusate Sodium) 100mg twice daily (available over the counter), starting the day before your surgery. Stop after your first bowel movement.

- If you go more than 2-3 days without a bowel movement you may use a Fleet Enema

Medications

• **Pain medications**

- o You will be given a prescription for pain medication (narcotics) and an anti-nausea medication. It is important to take these, as instructed, to keep your pain and nausea controlled.
- o The most commonly prescribed narcotics include: Percocet, Oxycodone, Ultram, Vicodin, Tylenol with Codeine, or generic versions of these.
- o The narcotic pain medication can make you sleepy and dizzy – you should not drive a vehicle while taking narcotics, and you should not drink alcohol while taking them. Narcotics can also cause nausea in some people so it is best to take them with food. Some people may have itching with narcotics; unless you have a rash, this is not an allergic reaction, just a side effect. You can take Benadryl to help with the itching.

• **Regular Prescription Medications**

- o You may resume your regular medications immediately after surgery (either in the evening after surgery or the following morning), unless told otherwise by the surgeon.
- o If you were given antibiotics, take them as instructed to completion.

General Wound Care

- Keep the dressings clean and dry for first 48 hrs (no showering). After 48 hrs, you may remove the gauze over your incisions (especially your belly button) and you may shower; wash and dry wounds gently with soap and water; no dressing is needed after the first 48hrs.
- No soaking in tub or pool for 2 weeks following surgery.
- If you have staples on your incision, they will be removed at your follow-up appointment.
- If you have steri-strips (white paper tapes), leave these on until they fall off on their own.
- **MOST PEOPLE** will have “skin glue”/glue tape over the incisions, this will wear off in about one week; **do not** try to scrub it off.
- If you have surgical drains in place after surgery, you will be instructed on how to take care of this (sometimes you will have more than one drain).
- You may use ice over the incisions for the first 48 hrs, 10 min on/ 10 min off while awake, to help with pain relief.

ADVANCED SURGICAL PHYSICIANS

for Your Peace-of-Mind

- Some bruising and soreness is expected around the incisions. Remember we had to cut through the muscles. One to two weeks after surgery, you may notice a firm ridge under the incision. This is normal healing, called the "Healing Ridge," and it is the scar tissue forming in the several different tissue layers. This will resolve over a few months.

Binder

- Remove at 48 hours before your shower. Replace after shower and wear at least 22 hours a day for 2 weeks. It can be a little looser. You may put a shirt underneath to help with irritation.

**If you are a smoker, you should quit smoking to help with your overall health and recovery and with your wound healing.

Activity

- You should be up walking around your house several times per day after surgery. This improves circulation and helps prevent complications after surgery. Walking outside and doing stairs are acceptable, and you can increase your activity as you can tolerate.
- Use a small pillow, hug it against your abdomen, to help brace your incisions if you need to cough or sneeze, and to do deep breathing exercises.
- Roll to one side and use your arms to push yourself up when getting in/out of bed or a chair, in order to not use your abdominal muscles.
- No lifting, pushing or pulling more than 10 pounds (or lesser weight that forces you to use your abdominal muscles) and no aerobic exercise (other than regular walking), and no sexual activity until your follow-up office visit. Further restrictions will be discussed at that time.
- You may return to work or school as you feel you are ready, with restrictions
- **NO DRIVING FOR 72 HRS AFTER SURGERY AND WHILE TAKING NARCOTICS.** You may drive when you feel that you can safely operate the vehicle (think about turning or stopping suddenly, maybe take a test drive in a safe area first).

****Call the surgeon's office: 561.333.1335 if you experience any of the following:**

(If you call after hours or on the weekend you will get the answering service and you will speak to the doctor on-call)

- Temperature higher than 101.5
- Any chest pain or difficulty breathing.
- Redness (more than a ¼ inch around the wound)/drainage/bleeding/pus from wound(s) or IV sites.
- Increased pain at incisions. Some pain is expected but should get progressively better over about a week.
- Worsened abdominal pain or vomiting or increasing abdominal distension (bloating).
- Any other concerns or questions regarding your surgery or recovery.
- **If you have difficulty urinating. You may need to go to the Emergency Room

Follow-up Visit

Your surgeon would like to see you in the office 14-21 days after your procedure. Call our office at 561.333.1335 2-3 days after surgery, to make an appointment.

Please call with any concerns regarding your surgery or recovery.