



**Andrew J. Shapiro, MD**  
**Kyle S. Eldredge, DO**  
**1447 Medical Park Blvd. Suite 407**  
**Wellington, FL 33414**  
**Phone: 561-333-1335 Fax: 561-333-4252**

## **Discharge Instructions After Anorectal Procedures**

### **DIET:**

1. You may eat a regular diet the evening after your procedure. Include bran, fresh fruits, and vegetables.
2. Drink 2 liters of water or clear liquids each day.

### **ACTIVITY:**

1. For the first few days following surgery, you may wish to limit your activity due to pain/discomfort. Be guided by your level of comfort.
2. Avoid strenuous exercise and heavy lifting until healing is almost complete. Climbing stairs, car riding, and driving may be done in moderation. Avoid driving while taking pain medication such as Oxycodone, Percocet or Tramadol.
3. You may return to work when you feel comfortable enough. This may be a few days or a few weeks depending upon the complexity of your procedure. Ask your surgeon for specific limitations.

### **WOUND CARE:**

1. The morning after your procedure, remove the dressing - including the small piece of gauze that may have been left in your anal canal.
2. Take a warm tub bath (Sitz bath) lasting no more than 15 minutes. Do NOT add anything to the water except a non-allergenic mild soap, such as Neutrogena or Dial, if desired. Rinse off in the shower and pat dry.
3. \_\_\_\_\_ If checked here, your wound will need to be cleansed directly. Use a cotton applicator stick (Q-tip) and dip it in hydrogen peroxide solution. Clean the wound firmly. Clean all surfaces and deep along the skin edge. Pat dry with gauze.
4. Open up a 4x4 or 2x2 inch piece of gauze and pack the wound gently, but completely. Place a second piece of gauze over this as necessary. Keep the gauze in place by placing tape over it or wearing shorts or panties.
5. After each bowel movement, take care to gently cleanse using moistened tissue or unscented baby wipes or TUCKS pads. Pat dry. Avoid excessive and vigorous wiping; especially with rough, dry toilet tissue. Change the gauze as necessary after bowel movements to keep clean as necessary.
6. Repeat these wound care instructions 2-3 times a day; especially after bowel movements. The Sitz baths are very helpful in relieving and reducing pain and spasms after the procedure. As you improve, the number of baths may be reduced.

### **MEDICATIONS:**

1. Take one tablespoon or one pre-measured package of a fiber supplement each morning mixed with a glass of water or juice. Examples include: Konsyl, Metamucil, and Citrucel powders or FiberCon tablets. Many stores have their own brand which is less expensive than the name brand.
2. You may take a stool softener each morning and evening. The most commonly used agents are Colace (100 mg) and Surfak, which contain Docusate Sodium/Calcium - which adds water to the stool and helps it pass more easily.
3. Take your prescribed pain medication for discomfort every 4 hours as necessary. Do NOT overuse the narcotic pain medication as this will cause constipation. Alternate Tylenol 1000 mg every 8 hrs and Ibuprofen 800 mg every 8 hrs, so that you alternate these medications and take one of them every 4 hours for the next few days. Then use the narcotic for breakthrough pain. **DO NOT** take more than **4000 mg** of Tylenol or acetaminophen in 24 hrs.
4. Continue taking any medications you took prior to your operation. Do NOT give yourself an enema unless instructed by your surgeon.
5. Take regular dose of Miralax daily for next 7 days
6. You may be prescribed topical ointments to be used in the anal area as well. Topical Lidocaine 5% cream to the anus every 4 hrs as needed is used to numb the area. Nitroglycerin 0.4% or Diltiazem 2% cream is used every 4 hrs for anal sphincter spasm. Use gloves for these medications and use a "pea" size amount.

**BOWEL HABITS:**

Bowel movements following anorectal surgery may be associated with some discomfort, so it is essential to keep bowel movements soft. This pain will improve as healing progresses. You should have a bowel movement (BM) at least every day. If one day passes without a BM, take a laxative, such as Miralax (take as directed on bottle) or a tablespoon (30 cc) of Milk of Magnesia and repeat this in 6-8 hours if you have not evacuated. If you still have not had a BM after a day, take 4 Dulcolax tablets by mouth at one time. If this does not work within 8-12 hours, call your doctor.

**PROBLEMS:**

1. **Bleeding:** Some bleeding and oozing are expected after such procedures; especially after bowel movements. If prolonged, severe bleeding occurs or if clots are passed, call your physician immediately.
2. **Urination:** It may be difficult to urinate initially. This is most common after a hemorrhoidectomy and in men. Soon after surgery, when you feel the urge, you should make an effort to urinate. Straining to urinate is OK; you will not disrupt the surgery. If you are unable to urinate, first try doing so by sitting in a tub of warm water. If you are unsuccessful after 6-8 hours, come to the Emergency Department. It may be necessary to place a catheter in your bladder to empty it. **DO NOT WAIT MORE THAN 8 HOURS.**
3. **Questions:** If you have concerns or questions, please call our office. If you cannot wait, come to the Emergency Department.
4. **Pain:** If you have abdominal pain that is worsening and not controlled with the medications provided, then you need to come to the ER for evaluation. **Please note, we will NOT refill prescription pain medications over the phone after 5 pm or on weekends.**
5. **Follow up Visit:** Post-operative visits are essential in ensuring that you are healing properly. If you were not given an appointment, please call our office soon after your surgery to schedule an appointment for your post-operative visit for 3-4 weeks, 561-333-1335.