

Hysterectomy Instructions

1. Preprocedure – You should be abstinent or use highly effect birth control for 14 days prior to procedure in order to avoid accidental interruption of an early pregnancy.
2. Dressing – Starting the first post operative day, you may remove the bandage. In the first days after the surgery it is normal to have some blood tinged or clear drainage from the incision. This should stop by day 5-7. You may bathe and get the tape wet, but avoid soaking in water. The steri-strips can be dried using a hairdryer at a low setting(no heat).
3. Sutures – Dissolve in about four to six weeks. Sometimes the sutures may work there way to the surface. This is normal and they will disappear over time. If you are concerned you may return to the office and have them trimmed. If skin staples are used, they will be removed in 2-5 days.
 - If you had a vaginal hysterectomy you may notice suture like material at times, especially with wiping after going to the bathroom. This is a normal part of healing.
4. Spotting – You may notice some vaginal spotting for the next two to three weeks after the surgery. During this time a sanitary pad may be used but avoid using tampons or douching as this may introduce bacteria and cause an infection.
5. Wound Care – Incisions may be cleaned through the steri-strips by dabbing the area with diluted peroxide after showering. In 1-2 weeks the steri-strips will begin to fall off. You may remove them when this occurs.
6. Pain Medication – Most patients use a combination of over the counter Ibuprofen and a prescription narcotic for pain control after the procedure. Take two 200mg tablets of Ibuprofen the night before your surgery. After the surgery is over take three 200mg tablets every eight hours for the next three days. The prescription narcotic should be taken as directed and as needed.
7. Constipation – This is common especially while taking narcotic pain medication. This can be reduced by drinking plenty of water and avoiding caffeine containing drinks. Additionally increasing fiber by either diet or over-the-counter fiber supplements
8. Activity – Increase your activity as tolerated with no lifting more than 15 pounds for two weeks after the surgery. Be sure to move extremities – i.e. rotate ankles and flex knees during this period of decreased activity as this promotes good venous return and prevents blood clots. Avoid driving for the first week after the surgery or longer if you continue to require pain medication.
9. Sexual Activity – You should wait six weeks after the surgery is over. Your doctor will let you know when it will safe to begin activity again. More importantly you should wait until you feel emotionally ready to begin this intimate activity which may take longer.
10. Reasons to Notify Our Clinic –
 - Worsening pain, swelling and/or hardness of incision.
 - Drainage of green/yellow fluid from incision.
 - Foul smelling discharge from incision
 - Increasing redness around incision.
 - Opening of incision with or with out bleeding.
 - Fever greater than 100.4 degrees farenheight.
 - Vaginal bleeding that soaks a pad an hour. If you are at all concerned please contact our office immediately.
 - Uncontrolled pain.
 - Nausea/vomiting that prevents you from receiving good pain control.
11. Numbness – You may experience numbness around the incision. It is common to feel tingling or sharp sensations. These should eventually go away but may take months to resolve. New onset of numbness in the legs is not normal and could indicate a serious condition. If that occurs contact our office.

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