

Boston Urogynecology Associates
617-354-5452

Care after surgery

ACTIVITY

- You can take showers and wash your hair after surgery. If you have a skin incision, gently wash the incision with plain soap and water. Do not use skin creams on your incision.
- No swimming or hot tubs until you are seen at the 2 week post-op visit.
- Do not put anything in the vagina (sex, tampon, douche) until you are seen at the 2 week post-op visit. With some types of surgery, you should not have sex until 6 weeks after surgery.
- You can go up and down stairs. You can walk outside or on a treadmill, use an elliptical or step machine.
- Do not lift more than 5 pounds until you are seen at the 2 week post-op visit. This includes children, pets, weights, groceries, luggage, and laundry.
 - With some types of surgery, you should not lift more than 5 pounds for 6 weeks after surgery. Ask your doctor or nurse how long you should avoid lifting.
- You can begin to drive 2 to 3 days after surgery if you are not taking narcotic pain medicines (Percocet, Vicodin, Darvocet, hydrocodone, oxycodone).

PAIN

- Most women have mild to moderate pain for the first few days after surgery. The pain is usually manageable with pain medicine. You might also notice pinching, tugging, or pressure on one or both sides of your body when you move (especially while changing positions or getting out of bed).
- Take ibuprofen or acetaminophen (Tylenol) for mild to moderate pain. For more severe pain, you should take Percocet (oxycodone/acetaminophen) along with ibuprofen. Do not take acetaminophen (Tylenol) with Percocet.
- Ice packs are useful for pain, either on the belly or the bottom. You can use a bag of frozen vegetables or crushed ice. Apply for 15-20 minutes a few times per day.
- Take your pain medicines according to the instructions. Do not take more pain medicine than recommended. If your pain is not controlled, please call the office.

BLADDER ISSUES

- If you go home with a catheter, call the office to schedule a voiding trial (usually 2 to 3 days after surgery, in our office).
- If you go home with a catheter, you can take a shower (not a bath) with the catheter in place. You do not need to scrub or wash around the catheter. Pat your skin dry with a towel. The catheter should be secured to your leg at all times to prevent pulling on your bladder.
- It is normal to have changes in how you urinate after incontinence surgery. You might find that it takes longer to empty and that your urine stream is not as strong as before surgery. You might need to lean to the side, back, or forward to empty completely.

BLEEDING AND VAGINAL DISCHARGE

- It is normal to have some vaginal bleeding or spotting for several weeks after surgery.
- You might have vaginal discharge (pink, yellow, or brown) for up to 6 weeks after surgery as the stitches in the vagina dissolve.

CONSTIPATION

- Constipation is common after surgery. Anesthesia, pain medicines, and other changes increase the chance of becoming constipated.
- Prevent constipation by taking Colace (or generic docusate sodium) 100mg twice daily every day for 2 weeks after your surgery; you can take up to 2 pills twice a day if needed. You can also take Miralax, a powdered fiber supplement (Citrucel), flaxseed oil, or prunes/prune juice instead of Colace.
- Treat constipation: If you do not have a bowel movement within 2 to 3 days after surgery, if you become constipated, or if your stools are hard to move, stop taking Colace and begin Pericolace (or generic docusate/senna). Take 2 Pericolace the first day, then 1 to 2 pills per day thereafter. If you prefer, you can also try Milk of Magnesia, Senekot, or Dulcolax instead of Pericolace.

WHEN TO CALL THE OFFICE

Please call the office (617-354-5452) if you have any of the following:

- If you think you have a fever, take your temperature with a thermometer. Please call if your temperature is 101°F or higher.
- Your pain is not controlled even though you are taking pain medicines.
- You are throwing up and cannot keep food or liquid down.
- The skin around your incision is red, and the redness is expanding.
- There is fluid or pus draining from your incision.
- You have heavy vaginal bleeding (soaking through a pad in one hour) or foul-smelling vaginal discharge.
- You cannot empty your bladder.
- You cannot move your bowels and you have tried the tips listed above.
- If you need a prescription refill, please call during the day (9 AM to 4 PM) and have your pharmacy number available. Do not wait until you have run out of medicine.