



POST-OPERATIVE INSTRUCTIONS

Colon Resection/Removal

The following is a list of instructions to help you do well with getting better from your operation. Please read over this material carefully. Instructions may vary from patient to patient, but this material should provide you with a general idea of things to do to help you get well after your operation.

ACTIVITY

You will likely feel tired for several weeks after your operation. Take your pain medication as needed in order to stay active, but rest as needed for recovery. Take short walks 2-3 times a day. This will help reduce the risk of blood clots and pneumonia following surgery. You may use the stairs as needed as long as you are not dizzy or weak. Make sure someone is around the first few times you use the stairs or exercise.

DRIVING

Do not drive until you are not taking narcotic pain medication, and you feel that you are able to swerve the car to avoid an accident. You must not be taking pain medications stronger than regular tylenol (acetaminophen) or NSAIDS (motrin, aleve etc) at the time you are driving. You should not have a great deal of pain, as this will impair your ability to react quickly. It is not unusual to be unable to drive for 1-2 weeks.

COUGHING

Practice 10 deep breaths every hour and 2 coughs every hour (at least 12 hours a day) while awake for the first week after surgery to reduce the risk of lung problems or pneumonia. When coughing, be sure to place a pillow over the incision and gently press inward to reduce the pressure on your incision(s).

LIFTING/EXERCISE

Do not lift heavy objects more than 15 lbs for the first 8 weeks. Avoid pushing, pulling or abdominal pressure for these 4 weeks. You may climb stairs, but not a ladder. No strenuous activity for 8 weeks. You may walk as far and as fast as you feel able, however, you should not run or jog. You may ride a stationary bicycle. You may do non-impact gentle physical activities. If you may require specific work restrictions, please provide details/information.

MEDICATIONS

If you were prescribed pain medication, take it as directed. Pain medications may cause nausea if taken on an empty stomach, so it is recommended to take them with food. You may switch to plain tylenol or NSAIDS (motrin/aleve etc). Do not take narcotic pain medication if you do not need it. Narcotic pain medication causes constipation. Ensure plenty of water intake. If you haven't had a bowel movement on the 1st day following your operation, you should start taking an over-the-counter laxative such as Milk of Magnesia. You should also use ice packs to assist with pain management.

INCISIONS

Your incisions have been closed with dissolvable suture on the inside and covered with steri strips and gauze. You may remove the outer dressing (clear dressing and gauze) 48 hours from surgery. Leave the steri strips in place as they will fall off on their own in 1-2 weeks. You may shower 24 hours after surgery. The clear dressings are waterproof. If the dressings do become saturated, remove them and leave steri strips open to air. You may allow clean, soapy water to run over your steri strips, but do not scrub them for first 4 weeks. Although you may shower, you should not bathe/swim for at least 4 weeks from surgery (or if incision is open, draining or scabbed). Do not put any ointment or creams over the incisions for the first 6 weeks after surgery.

or if the incision are open, draining or scabbed. If you have an open wound (one that has been packed open) you will be given specific wound care instructions post operatively.

DIET

You may return to normal food after you go home from your operation. You may want to avoid fatty or heavy foods for the first few days, since these foods can cause diarrhea or nausea temporarily following surgery. Your bowels may be very irregular following surgery. This may last several months, and is normal.

FOLLOW UP

You should call to schedule a follow up appointment in about 2 weeks, unless a follow up appointment has already been scheduled for you. Please call Dr. Ducharme's office at (520) 526-2325 to schedule your follow up visit.

PRECAUTIONS - When should I call the Surgeon?

Diarrhea: Occasional loose bowel movements are not uncommon. However, constant watery diarrhea, especially with fever, can indicate an infection of the bowels.

Fever with or without a cough: This could be a sign of lung, wound or other infection

Sudden shortness of breath and/or chest pain: This could be related to a heart problem, such as a heart attack, or could be related to a blood clot in the lung (pulmonary embolus) or a lung infection (pneumonia).

Leg swelling and pain: Blood clot formation in the leg, particularly if it is on one side, could cause swelling and pain in your calf.

Passing out: This could be a sign of low blood pressure, which could be caused by blood loss, low blood sugar or other causes.

Sudden new stomach pain: This could be a sign of an infection in your abdomen.

Wound drainage: Gold colored drainage is normal, however, call if you have drainage that is green, brown or has a foul odor. Call if your incisions become red and irritated.

Other symptoms: Call with other concerns as needed. Please note that narcotic pain medications are unlikely to be refilled. Please do not call after hours for medication requests.

For urgent matters, you may call office (520) 526-2325, and asked to have surgeon on call paged. Please remove call blocking from your phone and refrain from using your phone so that the physician may return your call. If call blocking is in place, it is likely that you will not be able to receive a return call.