

The Center for Cancer and Blood Disorders

DeEtte R. Vasques, DO

Gynecologic Oncologist

Phone: 817-759-7065 or 817-759-7019

Post Laparotomy or Laparoscopy Instructions:

Diet:

- You may resume your normal diet. Try to avoid foods that tend to give you gas.

Pain:

- It is common to have abdominal bloating and gas pains for several weeks after surgery. This will go away in time. Take Simethicone (Gas-X) after meals as needed for gas pain.
- Bruising and tenderness around incisions and abdominal tenderness are common.
- Alternate Tylenol and Ibuprofen every 3 hours as needed. You may take up to 600 mg of Ibuprofen every 6 hours as needed, and up to 650 mg of Tylenol every 6 hours as needed.
- Use prescription pain medication for breakthrough pain as prescribed.

Bleeding:

- Vaginal spotting/bleeding is normal up to 12 weeks after surgery.
- Call the office if you feel a sudden gush of blood or you are filling up more than one pad per hour.

Constipation:

- It is important to avoid straining with bowel movements after surgery.
- Take stool softener twice a day as needed and drink plenty of water.
- You may also add prune juice, apple juice or Miralax to daily regimen.
- Feel free to use whatever OTC stool softener works best for you.

Driving:

- No driving for the first 1-2 weeks after surgery.
- You need to avoid driving until you are no longer taking prescription pain pills. Do not drive if abdominal pain inhibits your reaction time.

Activity:

- Avoid strenuous exercise until cleared by your physician.
- Get up and walk at least every 1-2 hours in the days following surgery. This is important to prevent blood clots from forming in the legs.
- You may gradually increase daily activity, including walking, as you start to feel better.
- No lifting over 15-20 lbs for 6 weeks.
- Avoid core exercises x 6 weeks.

- Pelvic rest (no sexual intercourse, no tampons or anything in the vagina) for 12 weeks.

Bathing:

- You may shower the day after your surgery.
- Avoid tub baths, swimming, and hot tubs for approximately 2 weeks or until you have been cleared by your physician at your post-operative visit.

Dressing and Incision Care:

- If you have a negative pressure dressing (purple foam with battery pack) – it will start beeping and lose suction when it is finished, usually 5-7 days after your surgery. At that time, you may peel it off and discard of it and the battery pack.
- All other dressings may be removed on day 7 after your surgery.
- Robotic incisions with surgical glue – keep glue on until 2 weeks post-op.
- Incision care for all:
 - Wash with warm soapy water
 - Keep clean and dry

Follow Up:

- *Follow up in the office as scheduled. Your 2 week and 6 week follow up appointments were scheduled in the office on the same day your surgery was scheduled. If you are unsure of your appointment date or time, please check the blue folder that was given to you after your consult.*
- Call the office if you cannot make it to your appointment and we can reschedule for you at 817-759-7019

When to call the office?

- You have a fever greater or equal to 101°F
- You have chest pain or shortness of breath.
- You have intractable nausea and vomiting.
- You have increased pain, swelling, redness, or discharge from your incision(s).
- You are bleeding through more than 1 pad per hour.
- The discharge from your vagina has a foul odor.
- You are unable to empty your bladder, or you feel a burning pain when you urinate.
- You have increasing swelling of one leg
- Or as needed.