Southern OBGYN

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Gynecologic Surgery — **Laparoscopy**

Laparoscopic gynecological surgery is a minimally invasive approach that allows the surgeon to operate without making large incisions. A thin, lighted telescope, known as a laparoscope, is inserted into the abdomen through a small incision. The camera sends images of the inside of the body to a TV monitor in the operating room, allowing the surgeon to see and operate on the pelvic organs.

Other small incisions may be made in the abdomen to insert very fine, specialized surgical instruments.

Benefits of laparoscopic gynecologic surgery can include less pain compared to open abdominal surgery, fewer complications, less scarring, shorter hospital stays, and faster recovery. Many patients go home the same day or the next morning.

Pre- operative instructions for Laparoscopic Procedures

- Eat a light meal the night before surgery, nothing too heavy or too late
- Do not eat or drink anything after midnight on the day of surgery
- Shave the pubic hair completely down to labia the night before the surgery.
- Use Hibiclenz soap to clean your body in the shower the night before and the morning of surgery. Scrub the abdomen and pelvis well.

Day of the procedure

- Do not shave or mark your skin anywhere near your surgical site.
- Do not wear makeup.
- All jewelry, including body piercings, must be removed prior to surgery. Leave all jewelry at home.
- Wear loose and comfortable clothing.
- Please arrive on time. Every effort is made to ensure your surgery begins at the scheduled time; however, your surgery may be delayed as a result of a hospital emergency or because of commonly encountered variations in the length of certain procedures due to unanticipated findings.
- All patients are required to have an escort home after surgery.

• You should have an adult stay with you for 12-24 hours following your surgery.

Post operative instructions for most gynecologic surgeries

The recommendations that follow are intended as a general guide to your first weeks at home. However, the most important thing is to use good common sense in planning your activities. If it hurts, don't do it; and don't do anything to the point of exhaustion.

- After minimally invasive procedures, laparoscopy, hysteroscopy, vaginal surgeries, and robotic procedures, you should be up and moving about freely soon after the surgery. Gradually increase your activities.
- You are allowed to climb stairs, but try not to become too tired.
- Avoid heavy lifting. Avoid strenuous exercise or sports for 2 weeks.
- Do not drive until you can do so without discomfort and without using pain medicine. This can take from 3 to 7 days.
- You may shower and wash your hair. Tub bath after 1 week.
- You may remove the steri strips on incision sites after 3-4 days. Keep open to air and dry.
- No intercourse, douching, or tampons until you are cleared to do so.
- It can be normal to have a slight vaginal discharge, which may be bloody. Use sanitary pads not tampons.
- If you experience bleeding heavier than a period, call the office.
- You may eat and drink as tolerated. Go easy at first, with clear liquids, soup or broth, and crackers, before progressing to solids.
- Increase fiber and fluids if you get constipated. If needed, a stool softener (Surfak, Colace, or a generic equivalent) maybe purchased and taken by mouth as directed. It is common for narcotic pain medicines to cause constipation. If no bowel movement has occurred for 2-3 days, you may use Miralax, Milk of Magnesia, or Senokot. Do not use Correctol or Ex-Lax.

Precautions

• Contact the office if you experience fever of 100.4 or higher, chills, vomiting, pain unrelieved by using pain pills, vaginal bleeding heavier than a period, or foul-smelling discharge.

- Contact the office if you experience any urinary frequency, urgency, or burning that doesn't respond to increasing fluids, cranberry juice, and nonprescription bladder medicine such as AZO.
- Contact the office if you have any chest pain, shortness of breath, pain in the calves or legs, or redness, drainage, or separation of the incisions.