

# Hernia Surgery

## WHAT TO EXPECT

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### PREOP INSTRUCTIONS

- You will be contacted for an in person or virtual visit with St. Luke's PAT (Pre-admission testing), where they will discuss your medical history, review anesthesia needed for your surgery, and determine what medications you should stop prior to surgery. **Be sure to have an accurate medication list at the time of this appointment.**
  - If you have a cardiologist: we will need specific clearance to proceed with surgery. We will send a note to your cardiologist, but you can reach out to them as well to discuss surgery in greater detail.
- Continue your regular physical activity leading up to surgery. Physical activity before surgery will be of benefit while you are recovering from surgery. Walking is always encouraged. Other activities, as long as you are not experiencing increased pain at the hernia site, are also encouraged. If pain develops at the site of the hernia, stop the activity that caused the pain.
- If you struggle with constipation, consider starting Miralax (or a generic equivalent) once daily. It is a tasteless powder that can be dissolved in your preferred beverage. It is ideal to avoid constipation before and after surgery. The goal is to have at least one soft bowel movement per day without straining. If needed, Miralax can be taken twice daily.
- Instructions regarding time of surgery and where to present on the day of surgery will be sent to you via MyChart. Please reach out to our office if you do not receive these instructions or if you have additional questions.
- You do not need to shave the surgery site. If needed, this will be done for you during surgery.
- Do not eat anything after midnight the night before surgery. If you normally take medications in the morning, be sure to discuss these at your PAT visit (please see above).
- The location of your surgery will be listed in the surgery instructions you will receive through your MyChart. Surgeries are performed at Baylor St. Luke's Medical Center, McNair Tower One or the O'Quinn Medical Tower.
- Overnight stays after surgery are possible. Our team would have discussed the risk/need of an overnight stay with you at your appointment. If you have additional questions regarding this, please contact the office.

### POSTOP INSTRUCTIONS

Constipation is a common problem after surgery, especially if you are taking pain medicine. To avoid constipation, it is strongly advisable that you take Miralax (or a generic equivalent) twice daily after surgery. Miralax is a tasteless powder that can be dissolved in your preferred beverage. Ideally stools will be soft, will not require any straining, and will occur at least once daily. If you are having diarrhea, inform our office to see if decreasing to once daily would be advisable.

You can return to a regular diet unless otherwise instructed. Please alert the office if you develop nausea or vomiting after eating.

- Pain medication will be sent to your chosen pharmacy prior to discharge from the hospital. Pain medication can be constipating, so it is important that you take Miralax, as mentioned above, and take the pain medication as needed. **Please be prepared to provide the name and address of a 24 hour pharmacy near your home to avoid any delays in receiving your postoperative pain medication.**
- Mild to moderate pain: consider alternating over the counter Tylenol 500mg and Ibuprofen 400mg every 3 hours. If pain is not controlled with this regimen, then try taking the prescription pain medication.
- Please be advised that Norco (Acetaminophen Hydrocodone) and Tylenol #3 **CANNOT BE TAKEN WITH TYLENOL**. Please avoid taking Tylenol at the time of taking either of these medications. Ibuprofen (Advil, Motrin) can be taken with both Tylenol #3 and Norco.
- If pain is not controlled with your regimen, please contact your surgeon.
- If you underwent **VENTRAL** hernia repair: you were likely discharged home with an abdominal binder. It is advisable that this binder be worn during most of the day to provide additional abdominal support. The abdominal binder can be worn underneath or above your shirt.
- If you underwent **INGUINAL** hernia repair: it is possible for you to develop some scrotal swelling after surgery. It is recommended that you wear some sort of supportive/compressive shorts, elevate your pelvis when possible (place pillows under your bottom so your groin/scrotum are above the level of your heart), and ice the area as tolerated. If swelling is not improving or worsening please alert your surgeon.

Removing the initial bandage: At your surgery site (or sites if you had a laparoscopic or robotic repair) you may find a plastic dressing with gauze underneath. This should be left in place for a full day after surgery. You can then remove both the plastic dressing and gauze. You will remove the plastic dressing and gauze. Underneath you will find either steristrips (white strips) or dermabond (skin glue). Both the strips and the glue will remain in place for a week or two, and will then fall/flake off on their own.

### Wound Care/Bathing

If your incision has white strips across it:

- These white strips are like Band-Aids and are known as steristrips. They will remain in place for a week or so and will fall off on their own. You can shower over these with normal soap and water. Avoid scrubbing this area, instead just let the soap and water run over the incision. Pat dry after showering.
- Do NOT submerge the incision under water: No baths, hot tubs, swimming pools, etc.
- All suture/stitches are under the skin, and will not need to be removed. They will dissolve on their own over time.
- Additional dressings are not necessary, but if your clothes are rubbing at the incision and causing irritation, you can place plain woven gauze over the incision and secure in place with tape or with your abdominal binder.

If your incision has staples:

- You can shower over the staples with normal soap and water. Do not scrub at the incision. Pat dry after shower.
- Do NOT submerge the incision under water: No baths, hot tubs, swimming pools, etc.
- Additional dressings are not necessary, but if your clothes are rubbing at the incision and causing irritation, you can place plain woven gauze over the incision and secure in place with tape or with your abdominal binder.
- Your staples will need to be removed in clinic. This process is usually described as mildly uncomfortable, some patients relate the experience to ant bites. They will be removed between one and two weeks after surgery.

If your incision is left open (no steri strips, no staples) and you have a wound vac in place:

- A home health nurse will come to your home to change the wound vac three times per week.

### Bathing

- You can shower with your wound open: You can remove the dressing prior to the time your home health care nurse will present to change your dressing. You can shower with the wound uncovered, do not scrub

the incision. Shower normally with normal soap and water—it is okay for soap and water to run over the wound. After showering, pat the wound dry with clean gauze. The home health care nurse can then apply a new dressing to your wound.

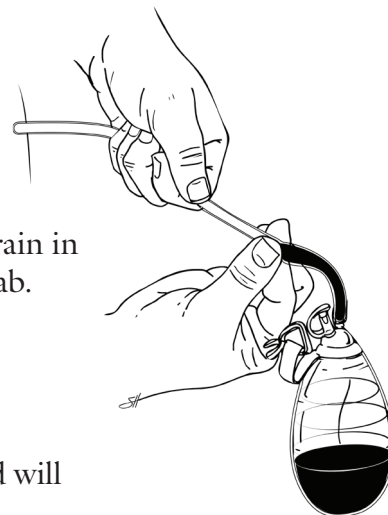
- It is possible to shower over the wound vac dressing. Please discuss this with your home health care nurse.

### Drain Care

Before you are sent home with a drain the nurses will instruct you on how to care for it. You will need to empty the drain at least once daily, possibly more often if having more output.

- To empty the drain: Open the seal at the top of the drain. Measure the amount of output in the drain (the drain bulbs have measurement markings on them), and take note of the color and consistency of output as well. After recording the output, dump out the fluid from the drain. Squeeze the drain bulb to express the air, and close the top.
- Ensure that the drain is not pulling on your skin. Keep some of the drain tubing taped to your skin to avoid it being pulled on. You can keep the drain in your pocket or fix to your clothing with a safety pin through the plastic tab.

You will need to keep track of the drain output daily, as well as the color and consistency. You can use the attached chart to help keep track of outputs.



### ACTIVITY AFTER SURGERY

We encourage activity after surgery. This will help stimulate your intestines and will help your overall recovery.

- Walking, even on the same day of surgery, is encouraged. Start with a short distance at a slow pace. You can slowly increase the distance and pace as you feel ready.
- Other exercises that do not require your abdominal muscles are likely ok to do. Please call the clinic or send a MyChart message if you have specific questions regarding activity.
- Avoid lifting, pulling, or pushing anything heavier than 10 pounds for six weeks after your surgery unless otherwise advised by your surgeon.
- You can leave the house to return to work or for other needs as soon as you feel comfortable doing so and according to details below.

### DRIVING AFTER SURGERY

- You cannot drive while taking prescription pain medication, as it causes drowsiness. When you are no longer taking prescription medications, and you feel comfortable, you can try a short drive around your neighborhood to see how you feel.
- If you have increased pain at the previous hernia site with driving, then we recommend you wait a few days before trying again.
- If you do not have increased pain with your short drive, then you can try a longer drive or drive on the highway per your comfort level.

### RETURN TO WORK

When you may return to work is dependent on your type of work as well as your specific recovery plan. You may need to stay home from work for 1-2 weeks after surgery to allow you to recover, regain energy, and ensure your pain is well controlled.

- If you have a desk job or other job that does not require any heavy lifting, pulling, or pushing (as above), then you may be able to return 1-2 weeks after surgery.
- If your job requires lifting, pulling, or pushing items heavier than 10 pounds, we can provide you with a work note detailing these restrictions. Alternative work assignments or time off allowance is up to your employer's discretion.

If you require FMLA forms or return to work forms completed, please send the forms to our office.

WHEN TO CALL THE CLINIC

Please contact the clinic if you develop any of the following:

- Fevers
- Significant increase in pain at the surgical site
- Redness at the surgical site
- Nausea or vomiting
- Drainage from the surgical site: be prepared to discuss amount, color, and consistency of the drainage with staff
- Too few or too frequent bowel movements
- If after hours (normal clinic hours are from 8am-5pm Monday to Friday) then you can call the clinic and select to speak with the physician on call.
- If it is a non-urgent matter (not one of the symptoms listed above): please call the clinic or send a MyChart message and someone from the Hernia Clinic team will contact you.

Date and Time	Output Amount	Color	Consistency
Example:			
1/3/2021, 4PM	30mL	Pink	Watery



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Houston  
Medicine

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