

NIH Clinical Center Patient Education Materials

Post-Op instructions: Taking care of yourself after surgery

The following information describes basic after-care recommendations that apply to many types of surgery. Following these precautions will help prevent complications from your surgery. These basic suggestions to improve your recovery may be supplemented by other directions from your doctor and nurse.

Managing pain

Pain medication will be ordered for you as needed. You are encouraged to take the prescribed pain medication in order for you to be comfortable during your recovery. Pain may prevent you from doing the activities that help with your recovery. If you have any concerns about your pain management, please do not hesitate to ask your doctor or nurse. Please report any new, increasing, or unrelieved pain to your doctor.

Surgical site care

Follow your doctor's instructions about caring for your surgical site or incision area. Watch for any separation, bleeding, or signs of infection which include:

- Redness
- Pain
- Swelling
- Drainage of fluid or pus
- Heat at incision site
- Fever (which is usually a temperature of 101 °F or higher)

If you notice any of these problems, call your nurse or doctor right away.

Care of your incision

Wash your hands before and after touching your incision(s). Hand washing is the best way to prevent infection. It is normal to have some numbness around the incision for some time after surgery. This may subside as the incision heals. If you have been sent home with staples in your incision, then see your regular doctor to have your staples removed. You may shower with staples in place, unless your doctor has told you not to.

If you have been sent home with sterile tape over your incision, you may shower, but be gentle around the tape. Use regular soap and water. Wash your incision gently, and then pat the incision dry. Do not pull, tug, or rub the tape. If the tape has not fallen off 2 weeks after surgery, then you may peel the tape off gently. Check with your doctor about applying creams or lotions to your incisions. Apply these only after the tape has fallen off or has been removed.

Avoid exposing your incision to the sun. This can cause the incision to become red. Scars turn white over time without exposure to the sun.

You will receive information from your doctor about any dressing changes or suture removal.

Constipation

A possible complication of surgery is constipation (no bowel movement or stool over the course of several days). Possible causes of constipation include: anesthesia and pain medications (which can slow the movement of the intestine); not drinking enough fluids; and abdominal surgery. Drinking fluids and eating fiber can help prevent constipation. Please notify your nurse or doctor if you are not passing any gas, have abdominal pain, and/or feel bloated.

Pneumonia prevention

When admitted to the hospital, you may be given an airway clearance device before surgery such as an Incentive Spirometer. Use of this device exercises your lungs and helps clear them of anesthesia gases after the procedure. We recommend using it ten times every hour while you are awake. Generally, outpatients do not receive the airway clearance device. While you are awake in bed, you can improve your recovery by turning, coughing, and deep breathing each hour.

If you have an abdominal incision, splint the incision when exercising your lungs. Splinting an incision is a way to support the incision and surrounding tissues using a stiff pad or a small firm pillow placed over or against the incision on your abdomen. It is a way to immobilize or cushion those movements so that you can fully expand your lungs or cough with a little less discomfort and reduce pain during coughing. Coughing will not affect the incision.

Activity

After the procedure, and when the anesthesia has worn off, get up and be active as soon as possible. This will help your muscles stay strong and will lead to a faster recovery. We encourage you to be active as soon as it is safe, which is usually in the evening after your procedure. We recommend that you walk, sit up in a chair, or at least turn frequently in bed.

As you continue with your recovery, follow the specific activity instructions given by your doctor. Different surgeries require different limitations on activity. Generally, you should not lift objects heavier than 10 pounds for 6 to 8 weeks. Lifting heavy objects too soon may weaken your incision. Your doctor will tell you specific activity instructions for your type of surgery.

Plan your daily activity so that you can rest often. Do not expect your energy level to be the same as it was before surgery. Your body needs more energy to heal, and this may cause you to feel weak or need to take naps.

Preventing blood clots

Blood clots are more likely to occur when a patient is not moving for a long time, such as after an operation or during recovery in bed. A type of blood clot that can form during your surgical recovery is called a Deep Vein Thrombosis (DVT) and can lead to Pulmonary Embolism (PE), a clot that travels to your lungs. One of the best ways to prevent blood clots from forming is to start being active as soon as possible. You may also be given a medication that helps prevent these clots. The medication is injected just under the skin. Bruising at the injection sites is common with this medication.

Diet

Resume your regular diet when you return home, unless your doctor has put you on a special diet. You may not feel like eating regular portions right away. It is normal to have less of an appetite after surgery. This could return to normal when your activity level increases. In the beginning, try eating small meals several times a day.

Choose high-protein foods to help your body heal. These may include such foods as chicken, beef, cheese, tofu, milkshakes, and ice cream.

Drink lots of fluids and include fiber in your diet, such as fresh fruits, vegetables, and whole grain cereals or breads. Eating these foods and drinking lots of fluids will help prevent constipation. They also promote normal bowel function, especially if you are taking narcotic pain medication.

Take nausea medication as needed if it has been ordered by your doctor. Let your doctor know if you have nausea or vomiting that lasts longer than 24 hours. If you have had neurosurgery, follow your doctor's specific instructions about reporting nausea.

Driving

Check with your doctor about when you will be able to drive. Usually, you will not be able to drive for 6 to 8 weeks after surgery. However, this can vary depending on the type of surgery that you have had. Never drive while taking narcotic pain medications.

Physician follow-up

Your doctor will provide you with information about when to schedule a follow-up visit.

These basic suggestions to improve your recovery may be supplemented by other directions from your doctor and nurse.

This information is prepared specifically for persons taking part in clinical research at the National Institutes of Health Clinical Center and may not apply to patients elsewhere. If you have questions about the information presented here, talk to a member of your health care team.

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