

Ventral Hernia Surgery Post-Operative Instructions

Robert A. Catania, MD, FACS
The Surgical Care Group
87 McGregor St, Suite 3100
(603) 627-1887

You have just had a hernia repair. The instructions in this letter will help you with your recovery, and give you an idea of what to expect in the next few days. If you have any problems or questions not covered in these instructions, call the office.

*For the management of post-operative pain you have been given a narcotic analgesic, usually either Vicodin or Percocet. With either of these drugs you can take 1 or 2 pills every 4 to 6 hours. You should not take other medications containing Acetaminophen (Tylenol) while you are taking these medications. Do not wait for severe pain to set in before you take your next dose of this medication, as you begin to experience discomfort, take your next dose. This will minimize your discomfort, and you will actually end up taking less medication in the long run. The maximum daily dose for Percocet is 12 pills and for Vicodin it is 8 pills.

*Unless you have had an ulcer, you should also take Ibuprofen (Advil, Motrin) 400 to 800 mg. three times daily with meals. This will provide a baseline level of pain reliever in your system, and minimize the need to take the narcotic pain pills.

*Your activity should be restricted somewhat for the next 4 weeks. You should not participate in strenuous activity or lift anything heavier than a gallon of milk. You should however, continue to be active, and I encourage you to take at least one long walk per day. A safe rule of thumb is "if it hurts, don't do it."

*You may shower beginning the day after the procedure. Do not take a bath, hot tub, or swim in a pool until you are seen in follow-up.

*If you experience constipation or have to strain to have a bowel movement (a common side effect of the narcotic pain pills), you should take Milk of Magnesia. Take 1 tablespoon every evening at bedtime. You should take a stool softener (Docusate Sodium 100 mg pill) two times a day. For severe constipation, call the office.

*If there is a dressing, you may remove it two days after the procedure. If you notice thin strips of paper tape on your skin, leave them in place until your next appointment, they are aiding in keeping the incision closed. You may also notice a thin, shiny film over the incision. This too is helping to keep the incision closed. It is OK if it starts to crack, chip, or peel.

*A small amount of bleeding and/or bruising is normal after an operation. However, you should not see ongoing bleeding from the incisions greater than a few drops at a time. If this is the case, call the office.

*It is very common to have a lot of pain, especially with movement, for the first week after this operation. You should begin to feel a little better every day starting on postoperative day 3. You will feel pain in the abdominal wall, where the incisions are located. If you feel pain in other locations, call the office.

*If you notice worsening redness, pain, or drainage from the wounds, or if you notice a foul smell or run a fever greater than 101 degrees Fahrenheit, call the office. If no one is available to answer the phone, report to the Emergency Department or leave a message with the answering service for the Surgeon On-Call.