

OPEN INGUINAL HERNIA REPAIR

Pre-Operative Instructions

Help us keep you safe during your surgery by telling us if any of the following apply to you:

- I take a blood thinner. Some examples include aspirin, heparin, warfarin (Coumadin), clopidogrel (Plavix), enoxaparin (Lovenox), dabigatrn (Pradaxa), apixaban (Eliquis), and rivaroxaban (Xarelto).
- I take immunosuppressant medication.
- I take a weight loss medication.
- I have a pacemaker, automatic implantable cardioverter-defibrillator, or other heart device.
- I have sleep apnea.
- I have had a problem with anesthesia in the past.
- I am allergic to certain medications or materials, including latex.

When to stop medications, herbal remedies, vitamins and other dietary supplements:

- 7 days prior to surgery: Stop taking vitamins, herbal remedies, and other dietary supplements.
- 3 days prior to surgery: Stop taking NSAIDs such as ibuprofen (Advil, Motrin) and naproxen (Aleve).
- Anesthesia will discuss all other medications when they call the day before your surgery.

When to stop eating and drinking before surgery:

- Do not eat any food after **midnight** the night before your surgery.
- You can drink clear liquids until **4 hours** before your surgery. Examples of clear liquids include water, apple juice, black coffee (without cream, sugar or honey) and tea (without cream, sugar or sugar).

It is critical that these instructions are followed or your surgery will need to be canceled.

Pre-operative checklist:

- ✓ Arrange for a responsible adult to take you to and from surgery. You will need someone to stay with you the night of surgery if you are planning to go home the same day of surgery.
- ✓ Complete your pre-registration for your surgery center.
- ✓ Refer to your *Surgery Itinerary* for check-in time and location for the day of your surgery.
- ✓ Fill any post-op prescriptions that have been provided to you.
- ✓ Wear comfortable, loose fitting clothing the day of surgery.
- ✓ Please leave valuables at home or with your friends/family.
- ✓ *ACHQC Hernia Registry:* Follow the link that has been sent to your email to complete the baseline survey. Another survey will be sent to you 4 weeks after your surgery. Thank you for participation in ACHQC registry.

Post-Operative Instructions

Diet

For the first few days after your surgery, you should eat foods that you easily tolerate and be sure to drink plenty of clear liquids to stay well hydrated. You may then advance to your normal diet as tolerated.

Medications

Pain management is an important part of your post-surgery care. You should expect some discomfort after your surgery. You will be sent home with a prescription for pain medication. It is important to take the pain medication prior to your pain becoming intense in severity.

Mild swelling is normal following surgery. To help decrease inflammation and discomfort you should apply ice packs to the surgery area for the first 24-48 hours after your surgery and then as needed. Apply the ice pack for 20 minutes every 2 hours as you can throughout the day.

Take 2-3 tablets of 325 mg acetaminophen (Tylenol) every 6 hours as needed for discomfort. Do not exceed 4000 mg in a 24-hour period. You may also take 2-3 tablets of ibuprofen (Advil or Motrin) every 6 hours as needed for discomfort. Do not exceed 3200 mg in a 24-hour period. You may stagger acetaminophen and ibuprofen every 3 hours or take them together every 6 hours.

If you are still having pain that restricts you from sleeping or ambulating, take your prescription pain medication as directed. DO NOT take additional acetaminophen if you are taking hydrocodone/acetaminophen (Norco) or oxycodone/acetaminophen (Percocet), because these medications have acetaminophen already built into them.

Some side-effects from narcotic pain medication include nausea/vomiting and constipation. If you experience these, you should stop the medication and take ibuprofen or acetaminophen for pain management.

If you experience any nausea, try using Sea Bands (available in pharmacy departments or online). This is a drug-free method that works to treat nausea by using a pressure point on your inner arm. Please refer to *Acupressure for Nausea and Vomiting* in the *Resources* section on our website for more information.

While on narcotic pain medications, you should be taking docusate sodium (Colace) 100 mg twice a day with good fluid intake. If you do not have a bowel movement after 3 days, take MiraLAX morning and night until you have a bowel movement. If no results, please contact our office.

You may resume your previous medications, vitamins and herbal remedies unless instructed otherwise.

Incision/Dressing Care and Showering

You may shower 24 hours after your surgery as long as a clear plastic dressing was placed over your incision at the time of your surgery. No bathing or soaking for at least 2 weeks after your surgery.

Remove your dressings 4 days after your surgery. Remove the clear plastic outer dressing and gauze and leave the steri-strips (strips of tape) that cover your incision. Steri-strips should remain in place for 7-14 days. The strips will gradually loosen and come off. If they do not come off within two weeks, please remove them yourself.

It is normal to have some drainage on your dressing for the first couple of days after your surgery. It is normal to have some swelling around your incision. The skin above and below your incision will feel numb and it is normal to have a firm lump directly beneath your incision line, this will dissipate within a couple of months.

Activity Restrictions

Avoid heavy lifting (greater than 10 lbs.) for the first 6 weeks after surgery. Do not do any strenuous activity that uses your abdominal muscles. After 6 weeks, gradually progress activity as tolerated. It is ok to use stairs after your surgery.

You may return to work once you are no longer taking narcotic pain medication and are not required to do any strenuous activity or heavy lifting. Patients generally return to work an average of 10-14 days after surgery, depending on their level of discomfort. If your work requires you to perform physical type duties, you may return after 6 weeks. Please notify our office if you need a return-to-work letter for your employer.

You are ok to drive once you are no longer taking narcotic pain medication and feeling capable of performing safely.

Follow-up Appointments

Please call 541-735-3778 to schedule your 4-week post-op appointment.

Things to Watch For

- 1. Chest pain or difficulty breathing.
- 2. Dressings saturated with blood.
- 3. Severe swelling or bruising.
- 4. Fever greater than 101.0.
- 5. Uncontrolled pain.
- 6. Nausea and/or vomiting that continues for 12-24 hours.
- 7. Diarrhea that continues for 12-48 hours.
- 8. Signs of a wound infection: increased swelling, redness, pain, drainage and/or odor.
- 9. Your incision separates or opens up.
- 10. Pain or swelling in your calf.

If you are having a life-threatening emergency, please call 911.

If you need to contact us, call 541-735-3778. We check messages throughout the day. Please keep your messages brief and know that we will answer you as soon as possible. There is no need to leave the same message multiple times as this will only slow down our ability to respond to you. The office is open 9:00 am to 5:00 pm Monday through Friday. For urgent needs after office hours, call 541-222-9911 to speak with our surgeons.

Oregon Surgical Wellness

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