

Center for Colon & Rectal Health, Inc.

1203 Langhorne-Newtown Road, Suite 130, Langhorne, PA 19047

Phone 215-741-4910 / Fax 215-741-4394

ANAL SURGERY POSTOPERATIVE INSTRUCTIONS

OPERATION: You have just undergone a _____.

WOUND CARE: Over the anal area you may find a small gauze dressing which is mainly to protect your clothing from any possible drainage. This can be replaced as necessary. A small piece of cotton gauze or a sanitary pad can be used. If there is no drainage, this can be discontinued. Taking a warm Sitz bath or spraying the area with warm water using a flexible showerhead may be very soothing. Too much time in the water may, however, lead to skin irritation and a rash. A small amount of bleeding from the anus is not unusual. A small amount of blood staining after bowel movements is also common. A packing may have been placed at the end of your surgery. This should either dissolve or pass with the first bowel movement, but should not be a cause for alarm. If there are any questions, please contact our office.

MEDICATIONS: At the time of your surgery you received a local anesthetic that should provide pain relief for several hours. You have been given a prescription for a pain medication. You may also have been given a muscle relaxant and/or an antibiotic. Take as directed on the prescription. It is recommended to start the pain medication with two tablets every four hours for the first twenty-four hours and then decrease down to one tablet every four hours as needed after that. If you find yourself getting too sleepy, light-headed, or nauseated from the medicine, call our office for advice. Pain medication can cause constipation and, therefore, should not be used excessively. Maintain a high-fiber diet (fresh fruits, vegetables, and bran) and avoid any food that can be constipating to you. If you have no bowel movement after two days, take two tablespoons of Milk of Magnesia. This may be repeated and, if this is not effective, you may use a stronger laxative such as Magnesium Citrate. If you remain constipated after that, call our office for advice. If you take aspirin, Plavix, or Coumadin (warfarin), ask us for advice.

STOOL SOFTENERS: Take a psyllium fiber product such as Konsyl, one heaping teaspoon in a glass of juice daily or Miralax, one capful in a glass of juice daily, for two to three weeks. Pill type softeners, such as Colace, generally are inadequate for post-op use. Prune juice can be very helpful in this regard.

ACTIVITIES: Use common sense in your activities and do not do anything that causes excessive discomfort. Do not drive a car until you have discontinued the pain medications and are reasonably comfortable. Vigorous physical activity will likely best be avoided for a week or two. Women who have had anal surgery should not have anything inserted in their vagina for two weeks. If the surgery was for fecal incontinence, a rectocele, recto-vaginal fistula, or any other condition that might affect the vagina, vaginal penetration must be avoided for six weeks.

FOLLOW-UP: You will need a follow-up visit in our office. If you do not already have an appointment, call the office today to make an appointment for three weeks after your surgery unless you feel you need to be seen sooner.

REASONS TO CONTACT THE OFFICE: Watch out for the following signs or symptoms: Severe pain in the anal area that is increasing. Fever or chills. Difficulty with urination. General weakness or loss of appetite. Excessive bleeding. (A small amount of blood staining with bowel movements is common.) Inability to have a solid bowel movement (see "**MEDICATIONS**" above). Should any of these occur, please call our office immediately for advice.