

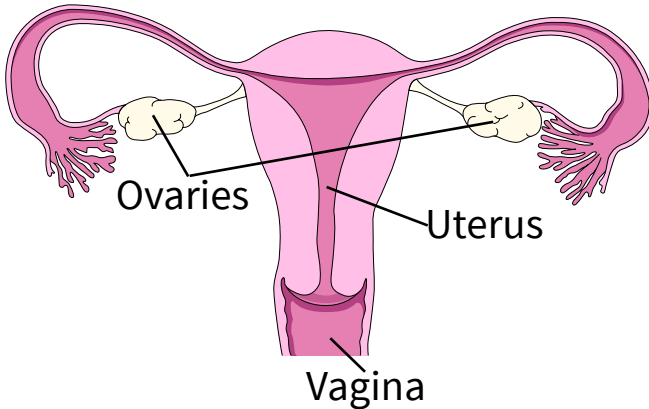
Hysterectomy, Oophorectomy, and Repair of Vagina (Anterior and Posterior)

Discharge Instructions

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Hysterectomy

A hysterectomy is the removal of the uterus. The uterus is removed through the vagina or through an incision (cut) in the abdomen (stomach area).



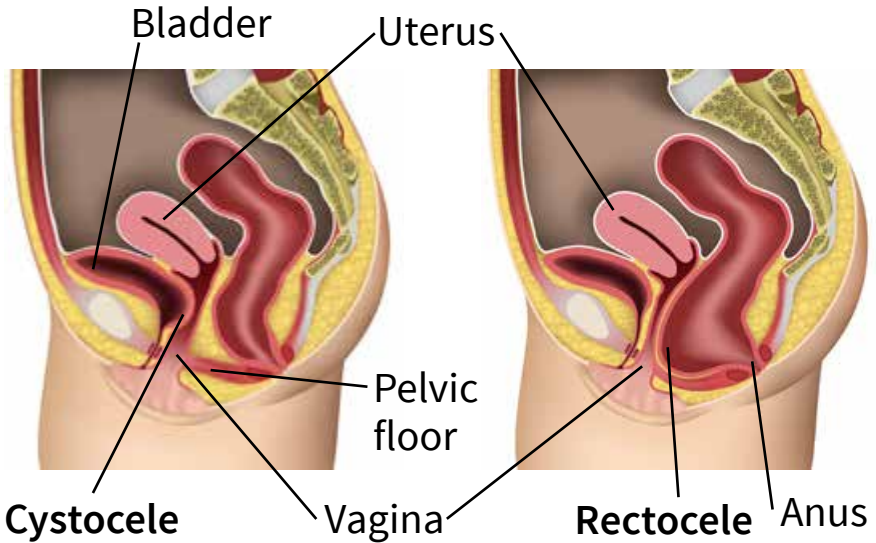
Oophorectomy

An oophorectomy is the removal of one or both ovaries. It is sometimes done at the same time as a hysterectomy.

Repair of vagina

An anterior (front) repair of the vagina is surgery to correct a cystocele. A cystocele is a bulge in the bladder through the vaginal wall. Surgery tightens the pelvic muscles to provide better bladder support.

A posterior (back) repair of the vagina is surgery to correct a rectocele. A rectocele is a bulge through a weak place in the vaginal wall muscles. Surgery tightens the weakened muscles. This surgery is sometimes done together with an anterior repair.



Rest and activity

- You may notice that you get tired more easily for several weeks after your surgery. This is normal. Rest when you are tired and do more activity as you feel comfortable. Walking is good exercise. Avoid any activity that causes discomfort or makes you very tired.
- Avoid lifting heavy objects (e.g., wet laundry, groceries, young children) until your followup appointment with your doctor. Check with

your doctor about when you can go back to driving (this is usually 4-6 weeks after surgery).

Baths and showers

A shower is better than a bath for the week after surgery. Having a sitz bath or using a squeeze bottle 2-3 times a day, and after bowel movements, can be soothing. Washing your hands well is always important.

Eating and drinking

It may take a few days to get your normal appetite back. Your appetite will improve as you start to feel better. It is important to drink plenty of fluids (6-8 glasses per day) and eat a healthy diet.

Going to the bathroom

Bowel movements: Pain medications with narcotics (such as Tylenol[®] with Codeine No. 3 and Dilaudid[®]) can cause constipation (not being able to poop). Drink plenty of fluids, such as water and fruit juices. Eat foods high in fibre. If you feel you need a laxative (medication to help you poop), talk with your family doctor or pharmacist. It may take 2-4 weeks for your bowel function to return to normal. You may go home from the hospital without having a bowel movement.

Urinating (peeing): You may have a little trouble peeing in the first week or so after this surgery. Talk with your doctor if you:

- › have burning when you urinate (pee)
- › have to urinate often and only small amounts
- › have trouble emptying your bladder

Medications

You may have some discomfort in the area that was operated on. Your doctor may give you a prescription, or recommend a pain medication, before you go home.

Vaginal flow

- You may have pink, yellow, or yellow-brown vaginal flow for 4-6 weeks after surgery. Some pieces of suture (stitch) material may also come out - this is normal.
- Do not use tampons or have sexual intercourse (sex) until your healing is checked by your doctor (unless told otherwise by your doctor).

Call your family health care provider or go to the nearest Emergency Department if you have:

- › severe (very bad) pain
- › more bleeding or bright red blood
- › bad-smelling flow
- › unexplained fever (when you don't have a cold or flu, etc.)

Followup appointment

Your doctor will see you in the office 4-6 weeks after surgery. The ward clerk will usually make an appointment for you before you leave the hospital.

Compliment? Concern?

We want to know! Self care and quality service is our goal. We value your feedback.

Call our Satisfaction Line:

902-679-2494 or toll free: 1-800-866-9757

