

Post-Operative Instructions

Robotic or Laparoscopic Post-Operative Instructions

You may take your home medications as soon as you get home and may eat whatever you feel like eating. It takes most patients a few days for bowel movements to resume.

Incision: Remove dressing the day after surgery; if you leave them on, they will retain moisture and increase the risk of infection. The incisions are closed with dissolvable sutures that do not need to be removed. You can wash your incisions with soap and water and pat dry when you shower. No tub bath for 6 weeks.

Pain: Take ibuprofen 800mg with food every 8 hours for pain. If still having pain after one hour, take the oxycodone/acetaminophen every 4 hours as needed. If you are taking the oxycodone, be sure to take the Colace® 100 mg twice a day to prevent constipation.

Restrictions: No driving until you can stomp both feet on the ground, twist and turn at the waist without having pain, and are no longer taking narcotics. Nothing in your vagina until your doctor approves; tampons or sex can cause the vagina cuff to rupture. You do NOT want this to happen. Do not lift anything greater than 5-10lbs. or do any aggressive fitness workouts or housework until you can stomp both feet on the ground, twist and turn at the waist without having pain, and are no longer taking narcotics. Most patients can return to work in 2-3 weeks.

Call the office if you experience:

- Fever greater than 100.9, chills
- Uncontrollable nausea, vomiting, or diarrhea
- Wound issues
- Vaginal bleeding that is heavier than a period (passing clots). You can expect to have some spotting for about 4-6 weeks after hysterectomy
- Any acute change

Please do not hesitate to call the office with any questions.

Open (big-incision) Post-Operative Instructions

You may take your home medication as soon as you get home and eat whatever you feel like eating. It takes most patients a few days for bowel movements to resume.

Staples: You can shower with staples in. Wash them with soap and water and then pat dry with a clean dry towel. You will need to have them removed 7-10 days after surgery in our office.

Pain: Take ibuprofen 800mg every 8 hrs. for pain with food. If still having pain after one hour, take the oxycodone/acetaminophen every 4hrs. as needed. If you are taking the oxycodone, be sure to take the Colace® 100mg twice a day to prevent constipation.

Restrictions: No driving until you can stomp both feet on the ground, twist and turn at the waist without having pain, and are no longer taking narcotics. No tub bath until your doctor tells you it is okay to do so, as this can inhibit wound healing.

Nothing in your vagina until your doctor tells you it is okay; tampons or intercourse can cause the vagina cuff to rupture. You do NOT want this to happen.

Do not lift anything greater than 5-10lbs. or do any aggressive fitness workouts or housework until you can stomp both feet on the ground, twist and turn at the waist without having pain and are no longer taking narcotics.

Most patients can return to work in 6-8 weeks.

Call the office if you experience:

- Fever greater than 100.9, chills
- Uncontrollable nausea, vomiting, or diarrhea
- Wound issues
- Vaginal bleeding that is heavier than a period (passing clots).
- You can expect to have some spotting for about 4-6 weeks after hysterectomy
- Any acute change

Please do not hesitate to call the office with any questions.

Post Vulvectomy Instructions

You may take your home medications as soon as you get home and may eat whatever you feel like eating. It takes most patients a few days for bowel movements to resume.

Incision: Clean vulva after every urination and bowel movement with a squirt bottle of water and pat dry.

Apply antibiotic ointment thinly to wound twice a day.

Antibiotic: Take cephalexin 500mg orally 4 times per day.

Use a mirror to inspect daily for any redness or purulence (forming of pus).

Pain: Take ibuprofen 800mg every 8 hrs. for pain with food. If still having pain after one hour, take the narcotic every 4 hrs. as needed.

Restrictions: No driving until you can stomp both feet on the ground, twist and turn at the waist without having pain, and are no longer taking narcotics. No tub bath until your doctor tells you it is okay to do so, as this can inhibit wound healing.

Nothing in your vagina until your doctor tells you it is okay; tampons or intercourse can cause the incision to rupture. You do NOT want this to happen.

Do not lift anything greater than 5-10lbs. or do any aggressive fitness workouts or housework until you can stomp both feet on the ground, twist and turn at the waist without having pain and are no longer taking narcotics.

Most patients can return to work in 2-3 weeks.

Call the office if you experience:

- Fever greater than 100.9, chills
- Uncontrollable nausea, vomiting, or diarrhea
- Wound issues
- Vaginal bleeding that is heavier than a period (passing clots). You can expect to have some spotting for about 4-6 weeks while the incision is healing.
- Any acute change

Please do not hesitate to call the office with any questions.

Cone Biopsy Instructions

How the Test is Performed

This is a surgical procedure that is done in the hospital while you are either sedated through an IV or under general anesthesia.

You will lie on a table and place your feet in stirrups to position your pelvis for examination. The doctor will insert an instrument (speculum) into your vagina to open the vaginal walls and examine the cervix.

A small cone-shaped sample of tissue is removed from the cervix and examined under a microscope for any signs of cancer. This biopsy may also be the treatment if the doctor removes all the diseased tissue.

How to Prepare for the Test

The procedure is done in an outpatient (same-day) setting and a hospital stay is usually not needed. As with any procedure that is done under anesthesia, you will need to fast for 6-8 hours prior. You must sign an informed consent form.

What to Expect After the Procedure

After the procedure, you may have some cramping or discomfort for a week or so.

For about 4-6 weeks avoid:

- Douching (never recommended)
- Sexual intercourse
- Using tampons

For 2-3 weeks after the procedure, you may have discharge that is bloody, heavy, or yellow- colored.

Risks

- Bleeding (most commonly occurs about 10 days after procedure)
- Incompetent cervix (which may lead to premature delivery)
- Infection
- Scarring of the cervix (which may cause painful menstrual periods, make it more difficult for doctors to ready an abnormal Pap smear, increase the chance of premature delivery, and make it harder to become pregnant)

To schedule an appointment:

888-GYN-ONC1