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Follow-up

- If you do not already have an appointment, make a follow-up appointment. Typically, this should be 4-6 weeks after your surgery date.

What to Expect / Activity

- !!Pain!! is common after surgery on this part of your body. The skin around your anus is as sensitive as your fingertips!!
- Swelling may not COMPLETELY go away for 4-6 weeks.
- AVOID CONSTIPATION!! Having a bowel movement can be painful after surgery but constipation is MUCH WORSE.
- A small amount of bleeding is common following rectal surgery. If you had bleeding before surgery from hemorrhoids, this may continue for the first 1-2 weeks before it gets better. Some patients have bleeding that only starts 4-7 days after surgery. Do not worry if you have some bleeding, discharge, or itching during your recovery. This is normal. However, if you have prolonged or profuse bleeding with the passage of clots, seek medical attention at once. If a stitch was placed during surgery, this may come out; that is not a cause for concern unless there is also significant bleeding or pain.
- You may be given prescription(s) for pain medication. Never take more than the recommended dose, and do not take the drugs more often than directed. If the drugs do not seem to be working, call the office for advice. Do not share these or any other prescription drugs with others. Some people experience drowsiness, dizziness, lightheadedness, or a false sense of well-being after taking these medicines.
- In some patients, a white packing will have been placed in the anus at the end of the surgery. This should pass with the first bowel movement (or before).It is dissolvable.
- Difficulty urinating after surgery around the anus is usually due to spasm of the urinary sphincter resulting from pain due to the surgery. Getting the pain under control and relaxing the sphincter usually allows for the urine to pass. Take the pain medication you were prescribed and do warm sitz baths – either in a bathtub or sitz

basin. While soaking, attempt to relax the bladder and urinate into the water. If you are unable to urinate in the first eight hours after your surgery, notify the doctor's office. After hours, go to the nearest emergency room or urgent care center. A bladder catheter will be placed and remain in place for 2 days, you may call the office to have the catheter removed.

- You can place an icepack over the area for 20 minutes, 3 times a day for the first 5 days to help control pain and decrease inflammation. This can also help with some bleeding. Use a thin cloth between the incision area and the ice pack.
- You do not have any specific activity restrictions. Listen to your body and if something hurts, do not do it.

Driving

- You may drive when you can react safely in an emergency. You must not be taking an opioid or sedating medications when you are driving. You should you also not have a great deal of pain, as this will affect your ability to react quickly

How to manage bowel movements and diet

- To avoid constipation, take a fiber supplement and Colace 200 mg twice per day. For fiber, you can take Metamucil (orange bottle), Citrucel (orange bottle), or Benefiber (green bottle), etc. Pick the option that you tolerate the best. You can (and should) start this before surgery unless you have previously not tolerated fiber supplementation.
  - Start with one teaspoon once a day. You can increase this slowly to two teaspoons twice daily and the two teaspoons twice a day. Increasing fiber quickly can cause bloating and gas pains.
- If you are not having bowel movements (or having bowel movements less than every 3 days), your bowel movements are hard, you have to strain with bowel movements, and/or your bowel movements are small pebbles - YOU ARE CONSTIPATED.
- How to treat constipation:
  - Make sure that you are drinking at least 64 ounces of non-caffeinated non-alcoholic liquids daily.
  - Start with 200 mg Colace twice a day AND fiber.
  - If that does not work, then ADD MiraLAX 1-3 times a day.

o If that does not work, then ADD one dose of magnesium citrate or milk of magnesia.
o If you have not had a bowel movement by the morning of the fourth day following surgery, drink one bottle of citrate of magnesium, which can be purchased at any pharmacy. Following the first bowel movement, you should have a bowel movement at least every other day.
- After a bowel movement, you can use toilet tissue, wet Kleenex, cotton, Tuck's pads, or use a bidet to clean yourself. If possible, take a warm bath. After completing your cleaning, pat the area dry with dry tissue or use a hairdryer on a cool setting. Constant moisture in the area can cause itching and also delay healing.
- Eat a regular diet including plenty of fresh fruit and vegetables.
- Sitz Baths: sit in 8 to 10 centimeters of warm water (sitz bath) for 15 to 20 minutes 3 times a day and / or after bowel movements. Then pat the area dry. Do this as long as you have pain in your anal area.
- Avoid sitting on the toilet for long periods of time (greater than FIVE MINUTES) or straining during bowel movements.

Medications

These are *Over-The-Counter medications* to that can be used after surgery. I highly recommend taking all of these medications using the instructions below. Each medication affects a different pain receptor. Using them all together can be very effective.

<u>Pain Medications</u>

- Ibuprofen (Motrin/Advil). This is an anti-inflammatory medication.
- Take 600 mg (usually 3 tablets but check medication dose before using) every 8 hours with food or milk for 2 weeks. After 2 weeks, take as needed for pain. DO NOT TAKE IF YOU TAKE A BLOOD THINNER, TAKE ASPIRIN DAILY, OR HAVE HEARTBURN. DO NOT TAKE THIS WITH CELEBREX (CELEBREX REPLACES THIS MEDICATION).
- Extra-Strength Tylenol (500 mg). This is a pain reliever medication.

- Take 2 tablets (two 500 mg tablets or 1,000 mg total of medication) every 8 hours for 2 weeks. After 2 weeks, take 1-2 tablets as needed for pain every 8 hours.

Take BOTH Tylenol and Motrin (Advil/ibuprofen) THREE TIMES A DAY for 2 weeks after surgery.

Constipation Medications

- Colace 100 mg. This is a stool softener.
- Take 2 capsules twice a day to prevent constipation. If you have loose stools take 1 tablet daily. If you still have loose stools then stop this medication.
- MiraLAX (Purple Top container). This is a laxative.
- Take 1-3 capfuls daily with liquid for constipation. Put the powder in a liquid and mix it. Wait 10 minutes for it to fully dissolve; this will significantly help the taste. Then drink the liquid. If you have loose stools, stop this medication.
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These are *prescription* medications that you may be prescribed after surgery.

Pain Medications

- Celecoxib (Celebrex) 100 - 200 mg. This is an anti-inflammatory medication.
  - Take 1 tablet or capsule 1-2 times per day (your prescription bottle will provide full instructions). This is INSTEAD OF IBUPROFEN, typically if you have a history of heartburn. DO NOT TAKE IF YOU TAKE A BLOOD THINNER OR TAKE ASPIRIN DAILY
- Oxycodone 5 mg. This is an opiate pain medication. One tablet of this medication provides the same pain relief as a combination of Tylenol and Motrin together. Tylenol, Motrin, and Oxycodone all work on different pain receptors.
  - Take 1-2 tablets every 4-6 hours for pain not controlled by Tylenol or Motrin.
  - This medication causes significant constipation.
- Baclofen 5 - 10 mg. This medication is a muscle relaxer.
  - Take 1 tablet 1-3 times daily for muscle spasm pain. This medication can you make you sleepy, so start this medication at night.
- Lidocaine Ointment or Cream. This is a numbing medication.
  - Apply to the area 1-2 times per day.
- Gabapentin 100 - 300 mg. This is a nerve pain medication.

- Take 1 capsule at night. You can increase this up to 3 times a day. This medication can cause you to be sleepy or dizzy. If this happens, stop taking the medication.

• Journvax (suzetrigine) 50 mg. This is a pain medication that works on different pain receptors than the other medications listed above.

- Take this medication every 12 hours. For the FIRST dose, take 2 tablets on an empty stomach. For all of the following doses, take ONE tablet with or without food every 12 hours.

When Should I call the Physician?

• Diarrhea: Occasional loose bowel movements are common. Constant watery diarrhea, especially with fever, can mean there is an infection of the bowels.

• If you do not have a bowel movement for 3 days despite doing all of the recommended steps (Colace AND MiraLAX AND fiber AND water AND magnesium citrate or milk of magnesia).

• Inability to drink liquids due to nausea

• Fever with or without cough (temperature of at least 101.4F): This could be a sign of lung, wound or stomach infection. Elevated heart rate: If your heart rate is more than 100 beats per minute, this could be a sign of infection.

• Sudden shortness of breath and/or chest pain: This could be related to a heart problem, such as a heart attack, or could be related to a blood clot to the lung (pulmonary embolus) or a lung infection.

• Leg swelling and pain: Blood clot formation in the leg, particularly if it is on one side, could cause swelling with pain in the calf.

• Passing out: This could be a sign of low blood pressure, which could be caused by blood loss, low blood sugar, or other causes.

• UNABLE TO URINATE WITHIN 8 HOURS AFTER YOUR SURGERY

• If you are concerned, then call. It is better to catch any problem earlier rather than later. If you cannot easily reach someone who can answer your questions, then seek medical attention.