

## **Pre and Post-op Gallbladder Surgery Instructions**

### Prior to your operation:

Your surgeon may order some specific labs related to your surgery.

There will be an opportunity to meet with the anesthesiologist prior to the operation to discuss the anesthesia for your surgery. Depending on the location of the surgery, that may be the day of the surgery or several days prior.

All aspirin and aspirin like drugs (ibuprofen (Motrin), Aleve, Indomethacin) must be stopped 7-10 days prior to surgery. Please make sure your surgeon is aware of any other blood thinning medicines.

No special dietary changes are needed prior to the surgery. Everyone is encouraged to remain on a low fat diet around the time of the surgery.

#### Day of the Surgery:

You are not to eat or drink anything after midnight the day prior to your surgery.

If you are on regular medications like blood pressure medicines, you should take these with a sip of water only. Please do not take oral diabetes medicines and talk with your primary care doctor as to how much insulin you should take if you are on insulin. You are to come to the facility at the designated time to be prepared for surgery. You will have a chance to meet with your surgeon in the holding area prior to the surgery.

#### Post-OP Instructions and Care:

Most of the surgeries are done as outpatient surgery – meaning that you will be going home the same day as the operation.

The vast majority of these surgeries are done laparoscopically. There will be a series of small incisions on the abdomen. These are usually closed with sutures and covered with either a glue or steri-strips. In either case, they do not need to be covered with bandages or gauze. The strips and the glue will fall off on their own, but if remains after 8-10 days, you may remove them. They are easiest to remove in the shower.

You may shower – the day after your surgery. You may get the incisions wet and wash with normal soap and water. Do not submerge in the water (bath, pool, ocean, hot tub etc) for 1 week after your surgery.

There are no true dietary restrictions after surgery. We always recommend a low fat diet around the time of the surgery. Foods that are very greasy or high in fat may lead to some GI upset or diarrhea. This is always short lived and most people can migrate back to their usual diets with in just a short period of time.

Everyone will be given a prescription for pain medication to take after the operation. The prescription can be requested prior to surgery so that you have it at home after your operation. The medication is usually a narcotic and can cause some constipation. We



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usually recommend taking a stool softener with the narcotic to help with this. Some examples are Colace or Surfak. You may also take ibuprofen (if this does not upset your stomach) or Tylenol if you do not need something as strong as the narcotics, or even as an adjunct to them.

When the surgery is done with a series of small incisions (laparoscopically), there are no true restrictions on your activity. It is best to take it easy till you are feeling back to yourself. A general rule is to let your body guide you. Once you are no longer having any pain you may return back to normal activities and as long as those activities are not causing you any pain – you may do whatever you are comfortable doing.

There are certain things to expect after the operation. Shoulder pain can be a part of any laparoscopic surgery. This is referred pain to the shoulder from the gas used during the surgery. It is most often the left shoulder, but may be the right side too. It can be felt in the shoulder blade are as well. It usually goes away in the first 24-36 hours and is best managed with anti-inflammatories like ibuprofen and activity (walking). If you are concerned – do contact your surgeon or your primary doctor. Feeling "gassy" or "crampy" may also be seen after laparoscopic surgery. The small intestines can sometimes react to the gas by "going to sleep". As they return to function, you may feel bloated. This will pass in the first few days.

You may return to work as soon as you feel comfortable to do so. If your job requires strenuous activities you may want to give yourself a little extra time. Most people are comfortable to go back to work, school etc within the first 1-2 weeks.

Most patients will be given an appointment to follow-up in the office after surgery, when they are given their surgery date. If you were not given an appointment, please call the office to make one – for 10-14 days after the surgery. The office number is **(954) 966-8559.** 

There is a physician on call for you 24 hours a day. In case of an emergency you may call the office at the above number or please proceed to your nearest emergency room, or call 911. You should notify your surgeon if:

- You have fever over 101 degrees F
- You have worsening pain, not relieved with the pain medications
- You have nausea or vomiting that persists
- You have redness around the incisions that is worsening or drainage from the incisions
- You notice yellowing of the eyes or skin or change in the color of your stools (black or pale grey)
- Chest pain or shortness of breath