AMBULATORY SURGERY:
You have been scheduled for outpatient (ambulatory) surgery. This means that you will arrive at the hospital the day of surgery, are taken to the operating room, and leave the hospital the same day.

DAY OF SURGERY:
We suggest that you use an ice pack on the anal area for the initial 6-8 hours after surgery to minimize pain and swelling, rest in bed for the remainder of the day and avoid all unnecessary activity

URINATION:
Only sip liquids after you leave the hospital until you are urinating normally without difficulty. If you feel the urge to urinate but are unable to do so, you should sit in a warm tub of water, try to relax and urinate in the tub. Once you urinate after surgery without difficulty, you may drink any amount desired. These instructions are intended to decrease your risk of having a problem with inability to empty your bladder. If you have not urinated after 6 hours go to the nearest emergency room.

DIET:
You should try to consume a high fiber diet. (Oat, wheat bran cereals and bread, fresh fruits, and vegetables.) In addition, you should purchase a fiber supplement (Metamucil, Konsyl, or Citrucel) and take it twice daily with approximately 8 oz of juice or water. In addition, it is important that you drink at least 6 to 8 large glasses of liquid daily. (excluding coffee or sodas). Please begin the regiment the evening preceding surgery and the evening immediately following surgery.

PHYSICAL ACTIVITY:
You may be as active physically as you feel like with the exception of heavy lifting or straining for approximately 2 weeks after surgery. You may return to work as soon as you are reasonably comfortable. Leave the pressure dressing in place until evening or early morning after surgery. This is to control any minor bleeding. You can also remove this to have a bowel movement.

PAIN MEDICATION:
In addition to the general anesthetic you will receive local anesthesia and as a result when you awaken you may have very little if any pain. You will be given 1 prescription for an anti-inflammatory and 1 for pain. Have these filled immediately and take exactly as indicated. The purpose of the pain medication is to help relieve the pain not completely get rid of it, you will experience some pain and discomfort, this is normal. Pain following anorectal surgery usually is the most severe over the first 48 hours but will improve with time.

ALL PRESCRIPTION REFILLS SHOULD BE CALLED INTO THE OFFICE DURING NORMAL BUSINESS HOURS UNLESS THERE IS AN EMERGENCY.
Please make every attempt to have prescriptions refilled prior to weekends and holidays. The covering doctor will be hesitant to dispense pain medicine without having the ability to review your chart.
**BLOOD THINNERS:**
If you take Aspirin or Plavix you may resume 7 days following surgery.
If you take Comoudin you may resume 3 days following surgery.

**SITZ BATHS:**
A portable sitz bath can be provided at the surgical center, you might also use your bathtub. Start the sitz bath once you remove the pressure dressing. Do not add anything to the bath water. You will soak at least 5-7 times per day for 15-20 minutes at a time. The circulating warm water is therapeutic and you cannot over soak. This helps reduce pain, swelling and in addition aids in the cleansing of the anal area. Test water to ensure it will not burn you. No ointments are needed on the wounds after surgery. Occasionally you may feel some sutures on the outside skin. These may be irritating but will dissolve with time and do not require removal. In order for the stitches to dissolve, the tissues around the anus will create an inflammatory reaction and cause swelling and itching.

Keep an ARD pad or clean gauze over the anus at all times to keep the area dry. Simply tuck the pad between the buttocks. This will protect your clothing and keep the irritating drainage off your skin. Do not use toilet paper, napkins, Kleenex etc in the buttocks. You will have a lot of drainage the 1rst week, but this will taper off through the healing process.

**BOWEL MOVEMENTS:**
It is not unusual to go for 2 to even 4 days after surgery without having your first bowel movement. If after 3 days you have not had a bowel movement you may take one ounce of milk of magnesia. If this does not work you may give yourself a small warm water enema. If this doesn’t work try, ½ bottle of magnesium citrate. All of these can be purchased over the counter.

A stool softener is recommended to help soften your bowel movements after surgery.

- Miralax (over the counter) use as directed
- Colace (over the counter) use as directed

You may experience pain and fullness, some bleeding with bowel movements, discharge with an odor, or a false urge to defecate. Bleeding with passage of stool is possible for six to eight days after surgery and is NORMAL unless it is excessive. If the bleeding is heavy and continuous call the office.

**OFFICE VISITS:**
Please call the office following surgery to schedule an appointment following your procedure if one hasn’t already been scheduled for you.

- 1 week
- 14 days

**QUESTIONS:**
Please call our office with any questions. We are available from 0830-5pm Monday through Thursday and close at noon on Fridays. The medical assist can answer most of your questions regarding your recover. After hours, there is a physician from the group on call 24 hours a day. Keep in mind that this is for emergencies only and not for routine questions or refills.