

Gynecological & Obstetrical Associates Pre-Op & Post-Op Care Instructions

We understand the decision to have a surgical procedure can be a huge event in a person's life. And we're here to help our patients navigate surgery, providing thorough information about preoperative and postoperative care (pre-op and post-op), as well as answering questions about insurance coverage (through our billing department) and other related matters.

Before surgery

Prior to scheduling a patient's surgery, our office staff will verify any benefits with the insurance provider. Our policy is to collect patient copays for surgical procedures prior to the surgery.

The next step is to schedule the surgery. Our scheduler will be in contact shortly after the initial decision to confirm the surgery date and other important details. We take our patients' scheduling needs and considerations into account when choosing a date, and then coordinate the patient's needs with the surgeon's availability. We always try to schedule surgery in a timely fashion based on surgeon and operating room availability.

If patients anticipate having to fill out Family Medical Leave Act (FMLA) or short-term disability paperwork, they should bring the paperwork to their appointment or call our front desk and ask to speak with our surgery scheduler. This will enable us to provide their medical information to the appropriate parties.

For more information about surgery or other services at our office or to ask a question: Contact us at 214-369-1203

Pre-op instructions

In general, all patients should follow the following basic preoperative instructions.

- An appointment with the surgeon should be scheduled within 7-10 days of surgery to review medical history, discuss any medications the patient is taking, order pre-surgical blood work if indicated, and sign surgical consents. Specifically, blood-thinning medication may need to be stopped about 7-10 days before the procedure. Weight loss and other stimulant medications (Phentermine, Adipex, phendimetrazine, Qsymia, etc.) need to be stopped 7 days prior to surgery. The surgeon will provide specific instructions about which medications the patient should stop taking as well as any that should be taken on the day of the surgery.
- Unless otherwise instructed, patients should have nothing to eat or drink for 8-12 hours before the procedure. Water is usually ok up to 2 hours before the procedure.
- If your surgery is at the hospital, arrive 2 hours before the scheduled surgery time. If your surgery is at Women's Specialty Surgical Center, arrive one hour before the scheduled surgery time.
- Follow the doctor's instructions on the need for bowel preparation prior to surgery.
- Pick up all pain medications prior to the day of surgery
- You will have a telephone interview with someone from the anesthesia department prior to surgery. They will let you know if you should take any of your home medications the morning of surgery

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Postoperative care instructions:

Below are the postoperative care instructions for all surgeries provided at Gyn/Ob Associates. If you have any questions about any of the below instructions, please contact our office so we can help (214-369-1203).

For all surgical patients, unless otherwise instructed, attempt to eat a balanced diet. A variety of vegetables, fruits, whole grains and foods high in protein and fiber are recommended. Stay well hydrated. If you have other medical problems requiring a special diet, discuss questions with your physician. It is important for diabetic patients to maintain normal blood sugars to promote healing.

Dilation and curettage (D&C) or dilation and evacuation (D&E)

- There may be bleeding for 7-14 days after the procedure. We recommend using pads during this time.
- Sexual intercourse should be avoided for at least 2 weeks (or until bleeding has ceased) after the procedure.
- Take the prescribed pain medications per the doctor's instructions. Some medications need to be taken with food to avoid feeling ill. Typically, over the counter Ibuprofen, Aleve or Tylenol would be all you need for pain relief.
- Schedule a follow-up appointment for 2 to 4 weeks after the procedure.
- Call our office at 214-369-1203 if the patient has a fever greater than 100.5, severe pain (especially pain not relieved with over-the-counter pain medication), heavier than expected bleeding or any concerns during recovery.

Vaginal procedures (including [endometrial ablation](#)) & hysteroscopy

- The patient may take a bath or, preferably, a shower, but should avoid intercourse, douching or tampons for two weeks.
- Take the prescribed pain medications per the doctor's instructions. Typically over the counter Ibuprofen, Aleve or Tylenol would be all you need unless there are stitches. In that case, pain medications will be prescribed.
- Some medications need to be taken with food to avoid feeling ill.
- Some patients may experience post-surgical constipation from the anesthesia. If this occurs, she may take Milk of Magnesia, MiraLAX or Colace twice a day.
- It can be normal to have light bleeding or discharge after surgery.
- Call our office at 214-369-1203 if the patient has a fever greater than 100.5, severe pain (especially pain not relieved with over-the-counter pain medication or prescribed medications), severe nausea or vomiting, purulent discharge, heavy bleeding or any concerns during recovery.

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Abdominal procedures ([hysterectomy](#), cesarean section, etc.)

- Our goal is to have patients walking and active as soon as possible after surgery. Patients should avoid strenuous activity and may increase activity as their bodies allow.
- Patients should avoid driving for about a week and until they are weaned off narcotic pain medication and feel like you can slam on the brakes to avoid an accident.
- The patient may take a shower. Bathing should be avoided for the first 7 days after surgery. An incision check for 2 weeks post-operatively. She should avoid intercourse, douching or tampons until after the follow-up appointment, which should be scheduled 4-6 weeks post-surgery.
- While bathing, patients should keep the incision dry and may use a cool blow-dryer to help.
- Take the prescribed pain medications per the doctor's instructions. Some medications need to be taken with food to avoid feeling ill.
- Some patients may experience post-surgical constipation from the anesthesia. If this occurs, she may take Milk of Magnesia, MiraLAX or Colace 2 times a day.
- If the incision was closed with staples, an appointment for staple removal should be made for 3-7 days post-surgery. Please confirm with you doctor on the appropriate timing for staple removal.
- If the incision was closed with glue, it will flake off in 10-14 days.
- If the incision was closed with Steri-Strips, they will start peeling off in about 1-2 weeks. They can be removed at that time.
- Call our office at [214-369-1203](tel:214-369-1203) if the patient has a fever greater than 100.5, pain not controlled by the prescribed medications, severe nausea or vomiting, redness surrounding the incision, heavy drainage from the incision or any other concerns during recovery.

Laparoscopic procedures

- Some patients may have bloating and abdominal and right shoulder pain in the first 24-48 hours. The symptoms will often subside if the patient lies flat.
- Patients should avoid heavy lifting and other strenuous activity for 7-10 days after surgery and avoid driving until weaned off narcotic pain medications.
- The patient may take a bath or, preferably, a shower. But she should avoid intercourse, douching or tampon use until after the follow-up appointment, which should be scheduled around 2 weeks post-surgery or sooner if the doctor indicates.
- Take the prescribed pain medications per the doctor's instructions. Some medications need to be taken with food to avoid feeling ill.
- Some patients may experience post-surgical constipation from the anesthesia, if this occurs, she may take Milk of Magnesia, MiraLAX or Colace twice a day.
- If the incision was closed with glue, it will flake off in 10-14 days.
- Schedule a post-surgical appointment 2-4 weeks after surgery unless otherwise instructed.
- Call our office at 2143691203 if the patient has a fever greater than 100.5, pain not controlled by the prescribed medications, severe nausea or vomiting, redness surrounding the incision, heavy drainage from the incision or any other concerns during recovery.