

Umbilical Hernia Repair

Post-Operative Instructions
Alexis R. Alexandridis MD FACS

- *What to expect:*
 - You will be discharged from the recovery area so plan for a friend/family member to drive you home
 - You may feel sleepy, so rest for the first 24 hours.
 - You may have some nausea or vomiting the day of surgery, but this should not persist beyond the day AFTER surgery.
 - You may have a sore throat from the breathing tube for anesthesia, if one was used
 - It may take a few days before you have a bowel movement. Bowel irregularity is expected with pain medication. Take stool softeners to prevent constipation; over the counter Miralax or Milk of Magnesia are good choices and you can start them right away.
 - You will have swelling and bruising at the umbilicus. Ice packs are very helpful to minimize this: 15 minutes every few hours while awake, taking care not to have the ice directly on your skin.
- *Activity:* Take it easy. Walking short distances is a good choice to stay mobile while you recuperate and may help you recover faster. Stairs are OK. Limit lifting to less than 20 lbs for the first 3 weeks after surgery. Increase your activity levels as you are able, understanding that if it hurts, don't do it.
- *Work:* It is recommended to take at least one week off work to recover. If you need a work release form, please contact the office and provide a fax number to your work.
- *Diet:* Be sensible and start with bland foods in case of nausea. In general, you can eat your usual diet when you feel hungry for it.
- *Driving:* You may drive when you are not using narcotic pain medications anymore.
- *Wound care:* You will have an incision. All of the sutures are buried and dissolvable so there is nothing to remove. Let the skin glue fall off on its own. Showers are OK. Avoid swimming, baths, and saunas for one month after surgery.
- **When to Call the Doctor 707.938.7690**
 - Persistent fever over 101 degrees F (39 C)
 - Severe abdominal pain
 - Persistent nausea or vomiting
 - Bleeding
 - Increasing abdominal swelling
 - Pain that is not relieved by your medications
 - Chills
 - Persistent cough or shortness of breath
 - Purulent drainage (pus) from the incision.
 - Redness surrounding your incision that is worsening or getting bigger
 - You are unable to eat or drink liquids

My surgery is at:

Date:

Time:

My follow-up appointment is at my surgeon's office.

Date:

Time: