

## Anorectal Surgery Discharge Instruction Sheet

### Central Texas Colon and Rectal Surgeons

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#### 1. Supplies

When you leave the hospital, you will need the following items. If these items are not in your possession at the time of your discharge from the hospital, they may be obtained from your pharmacy

<input type="checkbox"/> Konsyl or equivalent	<input type="checkbox"/> Dulcolax tablets
<input type="checkbox"/> B-SURE pads	<input type="checkbox"/> Milk of Magnesia
<input type="checkbox"/> 4 X 4 gauze	<input type="checkbox"/> Prescription Medications
<input type="checkbox"/> Baby wipes	<input type="checkbox"/> Balmex or Desitin
<input type="checkbox"/> Stool softeners	

#### 2. Medications

Konsyl will produce a soft, well-formed stool. Take one teaspoon once or twice daily as directed. Mix well in 8 ounces of juice and follow with another glass of juice. You may substitute Benefiber, Metamucil, Hydrocil, Citrucel, etc., but you will need to double the dose.

Pain pills should be taken as directed. Do not drink alcohol or drive while taking them. If you anticipate having a BM, you may take the pain medication 20-30 minutes beforehand. Remember, all pain medications are constipating. The more taken, the more opportunity for hard stool. If anti-inflammatory type pain medications have been prescribed, they should be taken on regular schedule. Please call the office during regular office hours and prior to noon on Fridays for refills. Pain medications are not refilled on weekends and holidays. Calling your pharmacy and having them fax refill order to the office will greatly expedite the process.

Muscle relaxants should be taken as directed. Do not drink alcohol or drive while taking them.

Stool softeners such as Colace, Surfak, or generic equivalent can be taken once or twice daily as directed. These can be taken long term for hard or "dry" stool.

#### 3. Diet:

A high fiber diet is critical to maintaining a soft (and less painful) stool. Handouts on high fiber diets can be obtained from our office or the surgical facility nursing staff. Be sure to drink at least eight 8 oz. glasses of fluid daily. Avoid excessive milk or milk products. Minimize caffeine, spicy food, and alcohol the first few days.

#### 4. Bowel Movements

You should have one or two good BMs each day.; If you have more than 2-3 BMs of adequate size or if the stools get too loose, you should decrease the amount of stool softener and laxative you are using. If BMs are hard or difficult, you should increase the laxative and fluids. Good fluid intake is a critical part of having a soft stool. Starting the second day after your procedure, do not go more than 24 hours without a BM. Any day that you do not have a BM, you should take 2 tablespoons of Milk of Magnesia or 1-2 Dulcolax tablets at bedtime. If this does not produce results, then repeat the next morning. If still no results, then call the office for further instructions. Following each BM, you should clean with a damp cloth, baby wipe or soft wet tissue. Do not use dry tissue or soap while cleaning.

#### 5. Sitz Baths:

Take a hot bath for 10-15 minutes (maximum) three or more times daily, after BMs or whenever you are uncomfortable. This will need to be done for about 2 weeks. Ice packs may also be helpful for discomfort in the first 24 hours. After that, warm witch hazel packs or warm Tucks Pads can provide some relief. If you are unable to sit in a tub, use a Sitz bath which can be purchased at most pharmacies.

#### 6. Rest and Activity:

Do not confine yourself to the bed for the new few days, but do rest quite a bit. Activity and exercise are important in avoiding constipation. Gradually increase your activity level as your soreness resolves.

#### 7. Drainage

You should expect drainage and a small amount of bleeding on a daily basis for 4-6 weeks. The ARD pads or gauze will absorb this drainage and keep the wound dry, thus aiding the healing process. If you pass a significant amount of blood or clots, call the office immediately.

#### 8. Winking:

This is important after any anal surgery, but especially after sphincter repair. The anal muscles should be tightened as if trying to "hold in" a BM. Count to 5, relax and repeat 5 times. Do this at least 5 times a day.

#### 9. Packing:

\_\_ Remove packing (gauze or "shoe string" within the wound) in the morning after surgery. Soaking in the tub or Sitz bath first will help. After the bath, place 4x4 gauze or an ARD pad over the wound. Do this twice daily till seen in the office.

\_\_ A pack is in the anal canal. This will soften and pass with the first BM. If uncomfortable, it can be removed the day after surgery.

\_\_ A wet to dry dressing will need to be done for your wound. Remove the old dressing (while dry). Shower or bathe to clean the wound. Open gauze all the way and wet it

with the Normal Saline. Wring it dry. Place it in the wound. Place dry gauze over top and tape in place. Do this twice daily.

10. Office Appointments:

Please call the office the next working day after surgery and make an appointment to be seen in about \_\_\_\_\_.

11. Don't Worry:

If you have any problems, special concerns or questions, be sure to call the office. Most patients ask similar questions that the nurse can answer for you. If not, the doctor will be notified for his advice. Peace of mind is important to your recovery, and that is what we are here for, so be sure to call when you need to do so.