

## DaVinci Robotic Hysterectomy

### *How to prepare*

*This handout gives instructions to follow for patients who are scheduled for a DaVinci robotic hysterectomy. To learn more about this surgery and for recovery tips, visit [www.hystersisters.com](http://www.hystersisters.com).*

### **1 to 2 Weeks Before Surgery**

- Maintain a healthy lifestyle.
- Medicines:
  - Avoid all products that contain aspirin or ibuprofen **unless** your doctor tells you to take them. For example, if you take aspirin for a heart or stroke condition, your doctor might tell you to keep taking it.
  - Do not take any herbal products.
  - Tell your doctor what other medicines you are currently taking. Your doctor will tell you if it is OK to keep taking them or if you should stop taking them before surgery.
- You **must** arrange for a responsible adult to drive you home from the hospital. You cannot drive yourself or take a taxi or bus home.
- Also arrange for a responsible adult to stay with you for the first 24 to 48 hours after discharge. This person must be able to help you if you have symptoms such as a high fever, bleeding, or dizziness.
- **Pre-admission tests:** You may need to have some tests done before your surgery. Many of these tests can be done several weeks before your surgery. They may include:
  - *Hematocrit* to make sure you are not *anemic* (low red blood cell count).
  - *Blood type* and *blood screening* tests to make sure compatible blood products are available for you from the Puget Sound Blood Bank, in case you need them.



*Your doctor will tell you which medicines to keep taking before your surgery.*

## 2 Days Before Surgery

- **Do NOT drink any alcoholic beverages** for 48 hours before your surgery. Alcohol can seriously affect the outcome of your surgery and how your body responds to *anesthesia*. Anesthesia is the medicine you will receive before surgery to block all feeling so you do not feel pain.

## Day Before Surgery

- You will receive a call from our operating room staff. They will tell you what time to arrive at the hospital for your surgery. If your surgery is on a Monday, you will receive this call the Friday before.
- Drink **only liquids** for all of your meals. This can include soups, broth, water, and Jell-O.
- Consider doing an enema if you have not had a bowel movement during the day.
- Do **not** eat or drink anything after midnight. But, if your doctor or anesthesiologist has told you to take certain medicines before surgery, you can take them with small sips of water.

## Day of Surgery

- Do **not** take any prescribed medicines unless your doctor or anesthesiologist specifically said it is OK to do so. These may include medicines for heart conditions or blood pressure, *diuretics* (water pills), anti-seizure medicines, insulin, or other medicine to control your blood sugar.
- **If you have diabetes and take insulin or other medicine to control your blood sugar:** You will need to adjust your insulin dose(s) or other medicine on the day of surgery to avoid low blood glucose. Check with your diabetes health care provider about how to adjust these medicines.
- If you take any medicines or supplements by accident, or if you have eaten food that you should not have on the day before or day of your surgery, call the operating room at 206-598-9846.
- Bring all prescription medicines you normally take with you to the hospital. Bring them in their labeled containers.
- Leave valuables such as watches, jewelry, and money at home so that you do not misplace or lose them in the hospital.
- If you wear glasses, contact lenses, false teeth, or related personal items, bring a case to store them in during your surgery.

## What to Expect After Surgery

- When you wake up after surgery, a *catheter* (thin, flexible tube) will be draining urine from your bladder. This catheter will be removed the morning after surgery. Try to urinate within 2 hours after it is removed and then tell your nurse when you have. Your nurse will do a *bladder scan* to see how well you are emptying your bladder.
- Before you leave the hospital, you should:
  - Be able to eat and drink without nausea or vomiting
  - Have good pain control and be taking your pain medicine by mouth
  - Be able to walk

## Going Home

Most patients can leave the hospital within 24 hours after surgery. Remember, since you will not be able to drive yourself, you will need someone to drive you home.

DaVinci robotic gynecologic surgery is a major surgery. It will take some time and effort for you to recover. To help your recovery:

### Physical Activity

For 8 weeks after surgery:

- Do **not** lift anything that weighs more than 10 pounds (1 gallon of water weighs about 8 pounds).
- Do **not** do sit-ups or other abdominal exercises.
- Do **not** douche, use tampons, or have sexual intercourse.
- Slowly increase your activity. Try walking, yoga, or riding a stationary bike.

**Note:** Your doctor may give you different activity restrictions, depending on your surgery.

### Sexual Activity

At your follow-up visit, your surgeon will examine you and tell you when it is OK to resume sexual activity or place anything in your vagina.

- **If your cervix was removed in surgery:** Most women are told to wait 8 to 12 weeks after surgery before they have sexual intercourse or put anything in their vagina.
- **If your cervix was not removed:** Most women are told to wait 4 weeks after surgery before they have sexual intercourse or put anything in their vagina.

## Managing Your Pain

Remember, you had major surgery and you will have pain. The goal is to lower the pain to a level you can handle rather than to remove all pain.

Your doctor will prescribe a type of pain medicine called an *opioid*. You likely will need to take this for 1 to 2 weeks, and you will “taper” your dose (slowly lower the amount you take). Your doctor will tell you how to taper your dose.

Pain control after surgery usually includes:

- Taking 600 to 800 mg ibuprofen (Advil or Motrin) every 8 hours, alternating with 500 mg acetaminophen (Tylenol) during the day.

For example:

- Take ibuprofen at 8 a.m.
- Take acetaminophen at 12 noon.
- Take ibuprofen again at 4 p.m.
- Take acetaminophen again at 8 p.m.

After you go to bed at night, you do not need to get up every 4 hours to take pain medicines.

- If you have bad *breakthrough* pain (pain that ibuprofen and acetaminophen are not controlling): Take 1 or 2 tablets of your prescription pain medicine if the pain is higher than 4 or 5 on a scale of 1 to 10. (One is no pain, and 10 is the worst pain you can imagine.)
- Do **not** drive while you are taking opioid pain medicine.

## Other Medicines

- You may resume any of the usual daily medicines you were taking before surgery for other medical conditions as soon as you are discharged from the hospital.
- **Do not take any medicines you are allergic to or that your doctor has told you to avoid.**

## Eating and Drinking

- Eat **small** amounts of food instead of large meals. Spread out your eating during the day for the first 2 weeks. Try non-creamy soups and other soft foods such as toast and oatmeal.
- Gas pains after surgery can be very painful! Avoid food and drinks that cause bloating or gas. Some of these are dairy products, beans, carbonated drinks, and spicy or greasy foods.
- Avoid alcoholic drinks if you are taking pain medicines.

- Avoid drinking too much fluid after 7 p.m. so that you do not have to get up during the night to urinate.

## **Bowel and Bladder**

- The surgery, anesthesia, and prescription pain medicines may slow down your bowels. You should be passing gas regularly, but you may not have a bowel movement for a couple of days after surgery.
- Because a full bladder or bowel makes abdominal or pelvic pain worse:
  - Keep your bladder as empty as you can during the first week after your surgery. Try to urinate every 2 hours when you are awake.
  - Take a stool softener if you are taking opioid pain medicine. Pain medicine can slow down bowel function and cause constipation. You can buy stool softeners at a drugstore without a prescription. Do **not** take laxatives such as Ex-Lax or Correctol. Ask your pharmacist if you have any questions about the stool softener you want to buy.

## **Incision Care**

- After 2 days at home, remove any dressing (bandage) that may be covering your incisions.
- Do not take a bath, sit in a hot tub, or go swimming for 2 weeks after surgery. Wait longer if your incisions still have a scab or are still healing. This will help reduce your risk of infection.
- It is safe to shower. Gently pat your incisions dry.
- Do not apply any ointments to your incisions.
- The greatest risk of infection is in the first 2 to 3 weeks after surgery. Some signs and symptoms of infection include:
  - Redness at the edges of your incision
  - Drainage from your incision
  - Increased pain in your incision
  - Increased drainage from your vaginaSee “When to Call” at the end of this handout.
- Your incision is closed with stitches (sutures) or surgical glue, or both. If you have:
  - Stitches, they will dissolve on their own over time.
  - Surgical glue (used to seal the skin edges), the incisions might look “dirty” because of the color of the glue. Do **not** scrub the glue off or pick at it, since the incisions could open.

## Other Tips

- Right after surgery, your abdomen will be bloated. This can make it hard to fit into your normal clothes. For comfort, wear loose clothing such as sweatpants, pants or skirts with an elastic waist, or a loose dress.
- If you have a swollen abdomen, constipation, or bloating:
  - Make sure you are taking the prescribed stool softener as directed.
  - Try drinking prune juice or milk of magnesia.
  - Avoid stimulant laxatives, large meals, foods that cause gas, and carbonated drinks.
- You may have shoulder pain when you are sitting or standing. This is from the small amount of carbon dioxide gas that is still in your abdomen after surgery. The gas is used to expand the area so that the surgeon can see it better. This pain should go away within several days as the gas is absorbed.
- You may have bloody drainage from your vagina when you strain, such as during physical activity or when you have a bowel movement. This happens for many women right after surgery. It should improve if you stop doing the activity and rest for a short while. Spotting is also normal.
- Do **not** use tampons during your recovery. Use only sanitary pads.
- You will have 1 or more incisions on your abdomen. It is common to have some redness, oozing, and bruising at the incisions in the first 1 to 2 days. These symptoms should go away as you heal.
- It is also common to have discomfort when you urinate. This is from the *catheter* (a thin, flexible tube) that was inserted into your bladder to drain urine during your surgery.

**If these symptoms do not go away, or they get worse, call the clinic.**

## Findings and Pathology

- Right after your surgery, your surgeon will talk with a family member about what was found during surgery. Your doctor will talk with you about these findings when you are awake the next day.
- Your doctor will tell you when your *pathology report* will be ready. This report is an analysis of tissue samples taken during surgery. It provides important information that is used to help diagnose diseases. The pathology report is usually ready about 7 to 10 days after surgery.

## Follow-up Visit

You will have a follow-up visit about 6 to 8 weeks after your surgery. This visit is scheduled at the time of surgery or when you leave the hospital.

## When to Call

Call your doctor if you have any of these symptoms:

- Fever higher than 100.4°F (38°C). Take your temperature several times a day if you feel warm, have chills, or just do not feel well.
- Increasing redness around your incisions or more drainage from your incision.
- Pus, discharge, or increasing watery fluid from your vagina
- Vaginal bleeding that is like a period. Vaginal spotting is normal.
- Ongoing bloating with nausea and vomiting.
- Increasing pain that your medicines are not helping. You should have less pain each day.
- You cannot empty your bladder or bowel.
- Uncontrolled leakage of fluid that looks like urine from your vagina.
- Leg or arm swelling and pain, especially if only on one side.

If you have any of these symptoms:

- **During clinic hours:** Call the UW Roosevelt Women's Health Care Center at 206-598-5500 (press 4 when the greeting starts).
- **After hours and on holidays and weekends:** Call 206-598-6190 and ask for the OB/GYN doctor on call to be paged.

### Questions?

If you have any questions about these instructions, including what you should and should not take before your surgery, please call the Roosevelt Women's Health Care Center at 206-598-5500 (press 4 when the greeting starts).