Laparoscopic Gallbladder Surgery (Cholecystectomy)

What to expect and how to prepare for your operation

In a laparoscopic cholecystectomy, your gallbladder will be removed using special instruments. These will be inserted through small incisions in your abdomen.

This handout explains what to expect, how to prepare for your operation, and how to plan for your recovery.

About Laparoscopic Surgery

In laparoscopic surgery, 4 or more small incisions will be made in your abdomen. Your abdomen will be filled with carbon dioxide (CO₂) gas to lift your skin away from your organs. This allows your doctor to see the area better.

Your gallbladder will be removed with a special scope and instruments. The benefits of this method are smaller scars and a faster recovery.

How to Prepare for Your Operation

Things to Remember

- **Aspirin and other medicines:** Do not take any aspirin or other products that affect blood clotting for 1 week before your operation. Two of these are ibuprofen (Advil, Motrin) and naprosyn (Aleve, Naproxen). See attached sheet for more information.

- **Shaving:** Do not shave any part of your body that you do not already shave every day. If you normally shave near your surgical site, do not shave that area for 2 days (48 hours) before your surgery.

- **Going home:** You cannot drive yourself or take a taxi or bus home alone from the hospital. Have an adult drive you home from the hospital and stay with you the first night.
Surgical Specialties
Laparoscopic Gallbladder Surgery (Cholecystectomy)

24 Hours Before Your Operation

- **Take 2 showers:** Take 1 shower the night before, and a second shower the morning of your operation. Use the antibacterial soap your nurse gave you to wash your body.
  
  Do **not** use the antibacterial soap on your face and hair. (See directions that came with the soap.) Use your own soap and shampoo on your face and hair. Use clean towels to dry off, and put on clean clothing.

- **Arrival time:** The pre-surgery nurse will call you by 5 p.m. the night before your operation. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the pre-surgery nurse by 5 p.m., please call 206-598-6334.
  
  The pre-surgery nurse will tell you when to come to the hospital and will remind you:
  
  - Not to eat or drink after a certain time
  - Which of your regular medicines to take or not take
  - To sip only enough water to swallow your pills

- **Heating blanket:** To reduce your risk of infection, you will be covered with a heating blanket to warm your body while you wait to go into the operating room. Ask for a heating blanket if you do not receive one.

What to Expect After Your Operation

**Going Home**

You will be going home the night after your operation or the next morning. You will need a ride home.

**Precautions and Self-Care to Speed Your Recovery**

Medicine given during and after your operation will affect you. For 24 hours after your surgery, do **not**:

- Drive or travel alone
- Use machines
- Drink alcoholic beverages
- Sign any legal papers
- Care for another person
Questions?

Weekdays from 8 a.m. to 4 p.m., call the Surgical Specialties Nurse Advice Line at 206-598-4549.

After hours and on weekends and holidays, call 206-598-6190 and ask for the resident on call for Surgery to be paged.

Or, ask for your surgeon to be paged:

Dr. ______________

Incision Care

You will have several incisions covered by plastic bandages. You can remove the plastic bandages and shower 48 hours after your operation. Under the bandage your incisions will be covered by white tapes called Steri-Strips. These tapes will fall off by themselves in several days.

Check your incisions every day for the signs of infection listed on the last page of this handout.

Pain Management and Medicines

Take your medicines as prescribed. Start taking your regular medicines as prescribed except for aspirin or other products that affect blood clotting. Do not take aspirin or aspirin-like products until 2 days after your operation.

Return to Work

Return to work when you are comfortable doing so. Most people can go back to work within 1 week.

Call the Nurse Advice Line or Your Doctor If You Have:

- Bleeding or drainage that soaks your dressing
- A fever higher than 100.5°F (38°C)
- Shaking and chills
- Any sign of infection in your incision:
  - Redness
  - Increasing pain
  - Swelling
  - Foul-smelling drainage
  - A change in the type or amount of drainage
- Nausea and/or vomiting
- Yellow, or jaundiced, skin
- Concerns that cannot wait until your follow-up visit