

After Your Laparoscopy

Self-care and follow-up

You recently had a procedure called a laparoscopy. This handout explains what to expect during your recovery. Please read these instructions and refer to them at home after your procedure. We hope your recovery is quick and easy.

What to Expect

You may have these symptoms over the next few days:

Shoulder Pain

It is common to have sharp shoulder pain and upper back pain, most often when you are standing or sitting upright. This is caused by a small amount of gas that is still in your abdomen. The gas may irritate your nerves. Most of the time, this pain is on the right side.

The pain should slowly go away 1 to 2 days after surgery. Pain medicines that are prescribed by your surgery team should lessen any discomfort.

Call the clinic right away if you:

- Have severe shortness of breath
- Feel dizzy
- Have chest pain

Abdominal Incisions

You will have 1 or more incisions on your abdomen. You may have some redness, oozing, and bruising with the incisions in the first 1 to 2 days.

Vaginal Spotting, Bleeding, or Discharge

- You might have some light bleeding if an instrument was used to hold your uterus in a certain position during surgery.
- Your vagina was washed with a disinfectant solution that might cause some mild vaginal itching or discharge.



After your procedure, be sure to drink plenty of clear liquids. (See "Diet" on page 2.)

Discomfort When Urinating

You might have some short-term burning the first few times you urinate after surgery. This is caused by the catheter that was inserted into your bladder during the procedure. **If your symptoms get worse or do not go away, please call the clinic.**

Swelling

It is common to have some swelling from the *intravenous* (IV) fluids you received during surgery. **Call the clinic right away if you notice more leg or arm swelling on only 1 side of your body.**

Scopolamine Patch

A *scopolamine patch* may have been placed on your neck just before surgery to help control nausea. Remove this small patch before discharge or after you get home. Leaving it on can cause some problems with urinating. **Wash your hands right after you handle the patch.**

Bathing

- To lower your risk of infection, do **not** take a bath, sit in a hot tub, or go swimming for 2 weeks after your procedure. You may need to avoid these activities longer than 2 weeks if your incisions still have scabs or are still healing.
- It is safe to shower and gently pat your incisions dry. Do **not** rub them with a washcloth or towel.

Diet

- Your appetite may not be normal for several days after your laparoscopy. Also, your bowels are likely to be moving slowly from the surgery, anesthesia, and some prescription pain medicines.
- Do not eat foods that usually give you gas.
- Do not drink carbonated beverages. They may make your bloating worse.
- Eat foods you feel you can handle, but eat only small amounts.
- Drink plenty of fluids to stay hydrated.
- Some pain medicines can cause constipation or bloating. Please take stool softeners if you are taking a prescription pain medicine that contains *opioids*. You can buy stool softeners without a prescription at the drugstore. Ask your doctor if you have any questions about what type of pain medicine you are taking.

Activity

- Do **not** drive if you are taking opioid pain medicine.
- Avoid strenuous activity or sports for about 1 week after surgery. You may resume your other daily activities.
- You may get tired more easily after your surgery and anesthesia, and from the medicines you are taking. Each person recovers after surgery at a different rate.
- You may feel well enough to do some work at home, but we advise you to rest the day after surgery. Your doctor will talk with you about how long your recovery will take. This will depend on the type of laparoscopic surgery you had.

Pain

- You will be given pain medicine to take at home. Take this medicine as directed. Pain control works best if you take the medicine as soon as you begin to have discomfort. Do not wait until the pain is severe.
- For most patients, *non-steroidal anti-inflammatory drugs* (NSAIDs) such as ibuprofen (Motrin or Advil) work best to control this type of pain. If your doctor tells you to take ibuprofen for pain, take 600 mg every 6 hours with food for the first 24 to 72 hours after your surgery.
- Rarely, a patient has severe pain and needs a prescription pain medicine such as Percocet in addition to the ibuprofen. **Follow the specific instructions your doctor gives you for pain medicines.**

Incision Care

- Your incisions may be covered with a clear plastic film. Please leave this on for the next 48 hours and then remove it carefully.
- Under this film, your incisions may be closed with stitches that will dissolve, surgical glue, and/or Steri-Strips (thin strips of white tape).
 - Surgical glue may look like it is dirty. **Do not pick at it.** The incision could open.
 - The Steri-Strips will begin to come off at the edges. If they have not completely come off on their own after 1 to 2 weeks, remove them while you are in the shower. They are easiest to remove when they are wet.
- Keep your incisions clean and dry.
- **Do not put any ointment on your incisions.**
- **Do not poke at your incisions with Q-tips.**

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

Most women have a follow-up visit about 4 to 6 weeks after their surgery. At this visit, your doctor will review the findings from your laparoscopy and talk with you about your treatment plan, as needed.

If this visit has not yet been scheduled, please call the clinic as soon as you can.

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 nausea and vomiting, with bloating.
- 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?

Your questions are important. Call your doctor or health care provider if you have questions or concerns.

Women's Health Care
Center: 206-598-5500
(press 4 when the greeting
starts)