Anal Surgery Instructions

- Prior to surgery, it is important to take a Fleets Enema the night before and again on the morning of your surgery. In the morning, it should be taken at least one hour prior to coming to the hospital.
- After your surgery, resume a normal diet without restriction. It is recommended that you focus on a high fiber diet with lots of fruits and vegetables. You should drink 6-8 glasses (8 ounces) of water each day.
- When you return home from your surgery, a local anesthetic will have been placed at the time of your surgery. This usually lasts from 4-6 hours after your surgery. It is recommended that you begin taking your pain medications three hours after your surgery. Pain is best controlled by not letting it get out of control.
- You will need to contact the office for a postoperative visit if you have not already scheduled one. This should be scheduled approximately three weeks after your surgery. You will be seen sooner if you are having problems that are out of the ordinary.
- It is advised that you take three Advil tablets (600 mg Ibuprofen or Motrin) every six hours for the first few days after your surgery as long as you do not have kidney disease, a history of duodenal ulcer or GI bleeding, or allergies to the drug. This will serve as your base line medication.
- The narcotic prescribed (Vicodin, Darvocet, or Lortab) should be taken every four hours. Tylenol (acetaminophen) is part of this medication so you should not drink alcohol while taking it.
- A topical cream (Elamax 4) will also be prescribed. This medication is often not on Formularies and somewhat expensive (\$60) but it is the most effective cream available. It topically numbs the area of the

surgery and should be applied every two hours as needed. It is advised that you apply it 30 minutes in advance of an anticipated bowel movement.

- Often the 4th postoperative day from surgery is the hardest day in terms of pain. After that things tend to improve.
- If you become constipated, take two table spoons of Milk of Magnesia twice a day. If that fails to relieve the problem then try Fleets tablets (2) by mouth. Often the key is try to be as relaxed as possible since it is an unrealistic fear of the first bowel movement that gets in the way.
- Sitz Baths are very helpful in both cleaning the area and improving comfort. Portable Sitz Baths can be purchased for use on the toilet. The alternative is a nice warm bath which works very well.
- Avoid heavy lifting (more than 5-10 lbs) postoperatively.
- Walking on a regular basis is advised but heavy exercise is comfort related and should be deferred at least 7-10 days.
- Take Metamucil or Citrocelle twice a day to promote normal bowel motility unless you have previously found you cannot tolerate these fiber products.
- Small amounts of bleeding is normal after anal surgery and will resolve in 10-14 days in most instances. You should notify your physician if you notice large amounts of bleeding or clots.
- Avoid aspirin products for the first 10 days after surgery.
- Sutures are often used to close the incisions. They will absorb or pass spontaneously. Sometimes they can be felt but you should not worry about them. They will not need to be removed.
- Call if you are having any problems or questions not covered here or in the other literature provided.

Post-Op Instructions for Anal Surgery including Hemorrhoidectomy, Anal Mass Excision, Drainage of Abscess, or Fistulotomy.

Wound Care	Remove all anal dressings the morning after surgery in a sitz bath (warm soapy water for 10 minutes). If your dressing or packing falls off or out before this, it's OK, do not replace it. There may be some packing inside the rectum that will come out with a bowel movement or may come out on its own. Do not replace. Perform a sitz bath twice a day or more and after every bowel movement. A hand-held shower may also be helpful after bowel movements. We advise against using toilet paper in the perioperative period until healed. If you must wipe, use baby wipes whereas toilet paper is quite abrasive and can damage the skin of the anus. Do not sit on a 'donut'. If you need padding for prolonged sitting, use a pillow. If you cannot urinate, try sitting in warm water.	,
Pain Medication	You will possibly be given a prescription for a narcotic pain medication (usually hydrocodone or oxycodone). Please use these sparingly whereas constipation is not your friend after anal surgery. Options for non-constipating and non-narcotic pain medications include Motrin, Advil, Ibuprofen or Tylenol.	
Bowel Medications	Take a tablespoon of Metamucil or any fiber supplement of your choice daily. Dissolve in water. Drink at least 8 glasses of water a day also. Colace can be taken two or three times a day also if needed. If you don't have a bowel movement in 48 hours, take a tablespoon of Mill of Magnesia. If this doesn't work, try another tablespoon the next day. If no bowel movement for four days, call the office.	k
Activity	Do not do any heavy lifting (more than 5 pounds) or vigorous exercise for at least 5 days.	
Driving	Driving is not permitted for one week or while you are taking narcotic pain medication. You should also to be able to react quickly.	
Return to Work	You may return to work in 1 week.	**********
Diet	You may eat anything you desire. If your throat is sore, try eating soft foods.	
Physician Appointment	Call 415666 9905 to make your post-operative appointment to see your surgeon in 2 weeks or if you have any questions.	
When to call your Surgeon	Persistent fever over 101.5 degrees F (39 C) Pain that is excessive and not relieved by your medications Persistent nausea or vomiting Persistent cough or shortness of breath Purulent drainage (pus) or bleeding from any incision Redness surrounding any of your incisions that is worsening or getting bigger You are unable to eat or drink liquids	
in Case of Emergency	Your surgeon is available 24 hours a day at 4156669905 or you can call 911, or go to the nearest emergency department.	