
POST OPERATIVE GUIDELINES: ROBOTIC INGUINAL HERNIA REPAIR

ACTIVITY

You just underwent major surgery. Of course you'll want to prevent a recurrence. This means DO NOT: LIFT, TUG, PUSH, PULL anything greater than 25 lbs x 6 weeks. If it hurts, don't do it!

It is OK to go up and down stairs, just conserve your trips and use the handrail.

You may drive when you are able to hop without pain (go up on your toes and drop down onto your heels. Once you can do this painlessly, you may resume driving a car.)

Sexual activity may resume at your own discretion. Of course, be wise, and be gentle. Stop or change activity if you feel ANY pain or discomfort. Most people need about a week or so before they can painlessly resume sexual activity.

PAIN CONTROL

You should expect the pain from the surgery to be in the mild to moderate category. With this in mind, you will not need heavy pain medications. The following regimen of medication is what works for most people and is recommended by our practice. If you follow these guidelines you are unlikely to experience any levels of heavy discomfort.

TYLENOL XTRA STRENGTH...2 pills every 6 hr

ALEVE...1 pill every 12 hr

(it is completely safe to combine these drugs, together; TAKE THEM WITH FOOD)

(Generics are just as good as name brand: Tylenol = acetaminophen; Aleve=naproxen)

>>>use this combination for 3 consecutive days, then you may decrease to using the Tylenol/Aleve combination only when needed. >>>We recommend using this around-the-clock for the first three days, even if you think you don't really need it. If not, the pain may escalate and you will likely find it difficult to get it back under control.

PRESCRIPTION PAIN MEDICATION

- THIS IS A NARCOTIC / A CONTROLLED SUBSTANCE.
- use ONLY when the Tylenol/Aleve combination doesn't work
- NOT designed to be used as a first line drug, but should be thought of as a RESCUE DRUG that is used IN COMBINATION with the TYLENOL/ALEVE.
- Most people never use the narcotic at all.
- NEVER USE THE NARCOTIC AS A SLEEP AID
- NEVER USE THE NARCOTIC AS PAIN PREVENTION

COMMON POST-OPERATIVE ISSUES:

- **Constipation** is a common post-operative complaint from the anesthesia.
 - Using a fiber product is recommended (Benefiber, Metamucil, etc) & Drink plenty of non-caffeinated beverages = water!
 - You may use MIRALAX (polyethylene glycol) - mix as directed. Use 2-3 times per day and then as needed.
- **Urinary Retention** is another POSSIBLE post-anesthesia issue = if you are unable to empty your bladder, CALL US ASAP!

WOUND CARE

Your incisions are (***)typically) closed with glue, so they are immediately waterproof.

You may shower, tube bath, swim whenever you desire.

(***)If your incisions are closed with paper steri-strips, then you may shower the day after your surgery, but you should wait approximately 1 week to tub bathe or swim in a pool/lake.)

Bruising is normal and may even extend down into the scrotum and penis.

CONTACT US WITH ANY PROBLEMS

Call with ANY concerns. The office phone (586-228-0550) is supported, 24 hours a day. If you need to speak with a physician after hours, call the office and simply follow the prompts. When you leave a message, simply leave your name, phone number and the type of surgery you had; a physician will call you back. Please do not leave messages attempting to explain the problem.