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POST OPERATIVE INSTRUCTIONS FOR HEMORRHOIDECTOMY

- A MILD **DIET** THE DAY OF SURGERY IS RECOMMENDED. ADVANCE YOUR **DIET** AS TOLERATED.
- **CONSTIPATION** IS TO BE **EXPECTED** WHILE ON NARCOTIC PAIN MEDICATIONS. MOST PATIENTS **DO NOT** HAVE THEIR FIRST **BOWEL MOVEMENT** UNTIL **AT LEAST 3 DAYS** AFTER SURGERY. THIS IS OFTEN **PAINFUL**. WHILE UTILIZING NARCOTICS, YOU SHOULD REMAIN ON AN OVER THE COUNTER **STOOL SOFTENER** SUCH AS COLACE OR DOCUSATE (ONE TABLET TWICE DAILY). **FIBER SUPPLEMENTATION** WITH METAUMUCIL OR CITRUCEL (1 TABLESPOON WITH 8OZ WATER) IS ALSO **RECOMMENDED DAILY**. FOR **SEVERE** CONSTIPATION, MILK OF MAGNESIA (30 ML) CAN BE HELPFUL TAKEN UP TO TWICE DAILY.
- **PAIN** IS TO BE **EXPECTED** AFTER HEMORRHOID SURGERY. MAKE SURE TO UTILIZE THE PRESCRIBED NARCOTIC PAIN MEDICATIONS AS RECOMMENDED. DO **NOT** GET **BEHIND** ON YOUR **PAIN** MEDICATIONS. CATCHING UP IS OFTEN DIFFICULT. IF NO SENSITIVITY TO **ANTI-INFLAMMATORY MEDICATIONS** OR **ULCER** HISTORY EXISTS, **IBUPROFEN (400-600MG)** EVERY **6-8 HOURS** IS AN EXCELLENT ALTERNATIVE IN **ADDITION TO OR AS A SUBSTITUTE** TO YOUR NARCOTIC.
- **RECTAL BLEEDING OR DRAINAGE** IS **NORMAL** AFTER HEMORRHOID SURGERY. UTILIZE A SANITARY NAPKIN TO COLLECT ANY DISCHARGE. IF THE PAD BECOMES **SOAKED** WITH **BRIGHT RED BLOOD** OR IF YOU EXPERIENCE **FEVERS OR CHILLS**, PLEASE CALL THE **OFFICE AT 303.449.3642**.
- **NAUSEA** IS A COMMON COMPLAINT POST OP. THIS CAN BE ASSOCIATED WITH **NARCOTIC** PAIN MEDICATIONS, GENERAL ANESTHESIA, AS WELL AS WITH SEVERE **CONSTIPATION**. TRY TO **MINIMIZE** YOUR NARCOTIC PAIN MEDICATIONS AS SOON AS ABLE. IF VOMITING, FEVERS OR CHILLS OCCUR, PLEASE CALL THE **OFFICE AT 303.449.3642**.
- **DRIVING** MAY BE **RESUMED** WHEN **OFF** ALL **NARCOTIC** PAIN MEDICATIONS AND YOU CAN **TURN OR TWIST** YOUR BODY **WITHOUT** HESITATION.
- **URINARY RETENTION** IS A **COMMON** PROBLEM AFTER HEMORRHOID SURGERY. IF YOU ARE **UNABLE TO URINATE** WITHIN **8 HOURS** AFTER SURGERY OR IF YOU FEEL **UNCOMFORTABLE** PRIOR, PLEASE CALL THE **OFFICE AT 303.449.3642**.
- FREQUENT **TUB SOAKS** OR **WARM SHOWERS** ARE OFTEN SOOTHING. AFTER **BOWEL MOVEMENTS**, YOU MAY WANT TO **WASH** IN A **TUB** OR SHOWER WITH **WARM** WATER. **AVOID SOAP** TO MINIMIZE ADDED RECTAL **IRRITATION**.
- **NO STRENUOUS ACTIVITY** (i.e., RUNNING, JOGGING, SWIMMING OR WEIGHT LIFTING) FOR **ONE WEEK** AFTER SURGERY.
- **SCHEDULE** A POST-OPERATIVE **VISIT 7-14 DAYS** AFTER SURGERY IF ONE HAS NOT BEEN ARRANGED BEFORE SURGERY. PLEASE CALL THE **OFFICE AT 303.449.3642**.