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## **POST OPERATIVE INSTRUCTIONS FOR LAPAROSCOPIC CHOLECYSTECTOMY**

- ADVANCE YOUR **DIET** AS TOLERATED. MOST PATIENTS CAN EVENTUALLY RESUME A NORMAL DIET WITHOUT RESTRICTION. SIGNS OF FOOD **INTOLERANCE** INCLUDE NAUSEA, HEARTBURN, INDIGESTION OR DIARRHEA. THESE ARE **NORMAL** POSTOPERATIVE COMPLAINTS. **AVOID** MEALS THAT CAUSE THESE SYMPTOMS (i.e., RICH, SPICEY, HEAVY OR GREASY FOODS).
- **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. WHILE UTILIZING NARCOTICS, YOU SHOULD REMAIN ON AN OVER THE COUNTER STOOL SOFTENER SUCH AS COLACE OR DOCUSATE. FIBER SUPPLEMENTATION WITH METAUMUCIL OR CITRUCEL (1 TABLESPOON WITH 8OZ WATER) IS ALSO **RECOMMENDED**. FOR **SEVERE** CONSTIPATION, MILK OF MAGNESIA (30 ML) OR A FLEETS ENEMA CAN BE HELPFUL. **DO NOT** USE THE ENEMA IF YOU HAVE ANY CHRONIC **KIDNEY** DISEASES SUCH AS RENAL FAILURE.
- **PAIN** IS A **COMMON** COMPLAINT AFTER LAPAROSCOPIC **OR** OPEN SURGERY. **RIGHT SHOULDER PAIN** IS AN ESPECIALLY **FREQUENT** COMPLAINT AFTER **GALLBLADDER** SURGERY. MAKE SURE TO UTILIZE THE PRESCRIBED NARCOTIC PAIN MEDICATIONS AS RECOMMENDED. 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. A **PROTECTED** HEATING PAD APPLIED TO YOUR SHOULDER CAN **SOMETIMES** HELP WITH SHOULDER PAIN.
- **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**.
- YOUR **INCISIONS** ARE CLOSED WITH **DISSOLVABLE** SUTURES AND COVERED WITH **STERI-STRIPS**. THE **STERI-STRIPS** NORMALLY LAST APPROXIMATELY **1-2 WEEKS**. IF THEY FALL OFF **SOONER**, **DO NOT** BE ALARMED. YOU CAN EXPECT EACH OF THE INCISIONS TO FORM A HARD KNOT BENEATH THE SKIN. **BRUISING** IS ESPECIALLY COMMON. IF YOU NOTICE ANY AREAS OF INCREASING WARMTH OR REDNESS, FEVERS, OR CHILLS, PLEASE CALL THE **OFFICE** AT **303.449.3642**.
- YOU MAY **SHOWER** THE DAY **AFTER** SURGERY. **AVOID SOAKING** YOUR INCISIONS IN A **BATH TUB** OR **HOT TUB** UNTIL YOU HAVE BEEN SEEN IN FOLLOW-UP.
- **DRIVING** MAY BE **RESUMED** WHEN **OFF** ALL **NARCOTIC** PAIN MEDICATIONS AND YOU CAN **TURN OR TWIST** YOUR BODY **WITHOUT** HESITATION.
- **ACTIVITY LIMITATIONS** INCLUDE **NO** LIFTING MORE THAN **30 POUNDS** FOR **TWO WEEKS** 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**.