



Post Op Abdominal Hysterectomy

The removal of the uterus, cervix, and often the fallopian tubes and ovaries, through an incision in the abdomen is an abdominal hysterectomy. With removal of the ovaries, sudden surgical menopause occurs. You can expect to tire easily for the first month after surgery, it is important to increase your activity gradually, plan frequent rest periods and rest when you feel tired.

- Eat a regular high fiber, protein, fruit, and dairy product diet.
- Plan on taking 4-6 weeks off of work. Earlier return might be arranged if necessary.
- You may drive if needed, use good judgment. Do not drive if you are taking prescription medication.
- No intercourse, douching or tampon use for 4 weeks after surgery or until the final visit with your physician.
- Use the stairs only as tolerated: one step at a time.
- No strenuous activity: long walks, exercise, housework, heavy lifting, or pushing, for up to 6 weeks or until the final visit with your physician. No lifting over 20 lbs for 2-3 weeks.
- Medications might include; estrogen patches or pills and pain medications.
- There are no bathing restrictions.
- Use Milk of Magnesia for constipation. Drink plenty of water and fruit juices and use gentle pressure with bowel movements.
- Make your first post-op appointment for 2 weeks after the surgery date.

You may shower with the incision uncovered; this promotes healing and relieves some discomfort. The doctor or nurse will remove the staples 4-7 days after the surgery, if not done during your hospital stay. You can shower with plastic covering the incision; the steri-strips need to stay dry for 10 days after the surgery and then they may come off. Steri-strips are more easily removed after a shower or bath. Abdominal bandages can be changed as needed; never leave a wet or damp bandage over your incision.

Notify your physician if you have any of the following:

- Fever of 100.4F or chills.
- Heavy vaginal bleeding; heavier than light menstrual period.
- Bleeding, drainage or separation at the incision site.
- Severe or unusual pain that is not controlled by your pain pills.
- Burning, frequency or difficulty urinating.
- Pain or swelling in legs.
- Foul smelling vaginal discharge.