

URETHROPLASTY Post-Surgery Home Care General Urology

Home Care

MEDICATIONS

You may take acetaminophen (Tylenol) or ibuprofen (Advil) for pain control. You should take up to 1000mg of Tylenol every 8 hours and up to 800mg of Ibuprofen every 8 hours. Take these medications 2-3 hours apart so that you have constant pain control. For intense pain, you have been prescribed narcotic pain medications to control your discomfort after surgery.

Do NOT use alcohol, drive, or operate heavy or complex machinery while taking these medications, as they make impair your ability to perform these activities safely.

Narcotic pain medications may cause constipation. Stool softeners, such as Colace; mild laxatives, such as Milk of Magnesia, Sennakot, or Ducolax tabs; or enemas may be used if needed and are over-the-counter medications available at most local pharmacies. Prunes or prune juice, taken daily, can also be helpful for constipation treatment or prevention and are available at most supermarkets.

You have been prescribed an antibiotic (Bactrim DS twice per day for 10 days) to help prevent developing an infection. Please complete the entire course as prescribed.

Do not resume any blood thinning medications (aspirin, Coumadin, Eliquis, etc.) without first discussing with your surgeon.

Important considerations regarding narcotic pain medication:

- You may be given a prescription for a narcotic medication immediately following your surgery. Narcotics are prescribed for short-term use to help treat your pain.
- Initial prescriptions are typically for no longer than 2 weeks following your surgery. This will be determined by your surgeon.
- Narcotics have many side effects such as constipation, lightheadedness, dizziness, sedation, confusion, nausea and vomiting.

- Driving and the use of alcohol are strongly discouraged while you are using narcotic pain medications. Narcotics do not reduce inflammation, and inflammation is usually a major cause of pain after surgery. Non-steroidal anti-inflammatory drugs (NSAIDs) such as naproxen (Aleve) and ibuprofen (Advil, Motrin) are medications that can significantly reduce pain and inflammation.
- As you progress through your post-operative period, your pain should decrease and the use of narcotic medications should be less necessary. To reduce the chance of side effects, you may save your narcotic medication for nighttime use and instead use NSAIDs or acetaminophen (Tylenol) during the day.
- Alternative means of pain relief such as rest and relaxation, heating pads, positioning, as well as decreasing stimulants such as coffee, tea, soft drinks, and nicotine may also help to alleviate pain. Use caution with heating pads and use only on low setting as your skin's sensation may be altered due to surgery and you may not feel excessive heat until you are burned.
- If you continue to experience significant pain 5-7 days after your procedure, it may be necessary to be re-evaluated by your physician.
- Renewal requests should be called in to the clinic. Narcotic renewals may be requested during business hours, Monday to Friday. Due to patient safety, narcotic renewals will not be honored after hours or on weekends. It is best to make your request 2-3 days before you run out of your medication, as it will take at least 24 hours for physician approval and nurse follow-up.
- Certain prescriptions, such as Percocet, oxycodone, Vicodin, and hydrocodone, cannot be called into a pharmacy and must be picked up.

DIET

Eat a well-balanced diet. Fresh fruits, vegetables and fiber-containing foods are recommended. This will assist in wound healing.

Continue a "mechanical soft diet" for the next 2 weeks. This will help your mouth heal. Continue to use the prescription mouth wash twice per day for 2 weeks.

WOUND CARE

You can shower as usual and wash the incision area gently. Pat the incision dry with a clean, dry towel. Do not soak the wound (avoid spas, pools, and bathtubs) until it is fully healed. Do not use creams, oils, or ointments on the wound. Keep the wound open to air if it is not draining. Do not remove sutures.

CATHETER CARE

Please keep the Foley catheter in place and capped. Please keep the suprapubic tube in place connected to a drainage bag. Do not remove the catheters. If the catheter becomes dislodged, please call our office.

COMFORT

Some incision soreness can be expected. Take your pain medication as needed and prescribed. Slowly decrease your use of pain medication as pain lessens.

Special Instructions

DRIVING RESTRICTIONS

Do not operate a vehicle if you are too sore from surgery to enter or exit your vehicle comfortably, or if you are too sore to easily check your blind spot. No driving while using prescription pain medications.

ACTIVITIES

No heavy lifting. You may lift what is comfortable to lift with one arm. Nothing greater than 10 pounds (e.g., a full gallon jug) until re-evaluated by your physician. Discuss return to work or school with your physician.

Take several slow, short walks each day for the first two weeks, and gradually increase your distance. Exercise will assist in your recovery.

No straddle activities, such as riding a bike, motorcycle, horse or lawn mower for 6 weeks.

No sexual activity until cleared by your surgeon.

Follow-up Care

FOLLOW-UP APPOINTMENT

You will be scheduled to see the Urologist in 2 weeks post-op for a wound check. If you do not hear from the clinic in next few days, do not hesitate to call the number listed above to have your appointment scheduled.

Call your doctor or nurse when

- You have a fever greater than 101 degrees F within one month of your surgery.

- You have diarrhea or vomiting for more than 24 hours, or stop having bowel movements or passing gas.
- You have worsening pain, not controlled with your pain medication.
- You develop redness, swelling, or new drainage from your wound.
- You notice decreased urine output, or the catheter stops draining.
- You have any other acute change in your health status.

Emergency Center

In case of any emergency, call 911 or go to the nearest emergency center. *For non-emergencies during business hours, call our triage line at 904-202-7300 option 3.*