

Gynaecology Surgery

Post-operative Information

If you need this leaflet in a different language or accessible format
please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید،
لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie,
proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotowuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil,
vă rog să discutați cu un membru al personalului să se ocupe
de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق
يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Wound care, vaginal bleeding

This leaflet gives you information about your recovery when you go home after gynaecology surgery. Every woman is different, and our bodies recover and react in different ways. There are a few things you should and should not do once you go home. The important thing is to strike a balance, listen to your body, and only do as much as feels comfortable.

If you have any concerns within the first **two weeks** after your surgery, please contact Ward 3E Gynaecology on 0151 430 1522 to speak with one of the nurses. After this period, please contact your GP for advice.

Wound care

Dressings: your dressing will usually be removed prior to your discharge. You may have stitches, glue or clips to close the wound, your nurse will advise if these are absorbable or if you will need an appointment with a community nurse to remove them. You may have steri-strips over the wound, please allow them to fall off when they are ready. If you see stitch material, it is advised to leave them alone, do not pull them. If you are concerned about your wounds, please see your GP or contact ward 3E.

Cleansing: a shower is best, as we do not want you soaking your wounds until they have started to heal over. Once showered, pat the wound dry with a clean towel to make sure it is fully dry. Avoid using soaps, shower gels, moisturiser or ointments whilst your wounds are healing.

Healing: your wounds will go through several stages of healing. To start with you may feel numbness, tingling or itching. As new tissue forms your wound may feel lumpy and you may experience some pulling as it heals. During the first one to two weeks, your wounds may be slightly red and uncomfortable. However, if your wound is hot to touch, swollen, oozy, very red or you feel unwell with a high temperature, these are signs of an infection. Please contact your GP or ward 3E if you have any concerns about your wounds.

Vaginal bleeding and discharge

It is normal to experience some vaginal bleeding following your gynaecology surgery. This can last for one to two weeks after your surgery. You should use sanitary towels rather than tampons, as using tampons could increase the risk of infection. Mild vaginal discharge is part of the normal healing process. However, if it becomes excessive or offensive this may indicate an infection and you should see your GP.

Pain

Pain and discomfort after surgery is a normal part of the healing process. This is known as acute pain and can be reduced with pain medicines. The extent and duration of pain after surgery can vary and individual patients may have different experiences, even after the same operation. Using a combination of different pain killers, taken regularly, usually provides very good pain relief in the days after surgery. The aim of taking regular pain relief is to enable you to take deep breaths, cough, move and walk about, which is vital to your recovery after surgery. These activities reduce the risk of complications, such as a chest infection or clots in the legs or lungs.

Acute pain will lessen as your body heals and you steadily increase your daily physical activities. When your pain lessens, you should reduce pain medicines. You should aim to stop taking opioids sooner than other pain medicines, such as paracetamol and ibuprofen.

If you have any concerns after you have gone home, or if your pain continues contact your GP for advice.

Movement and exercise

Try to sit in a chair which is high enough to rise easily from, without putting strain on your stomach muscles. Walking is encouraged following your surgery. You should aim to gradually increase your level of physical activity when you go home. Introduce gentle exercise as soon as you feel able to and build up to your previous levels of activity, by 4-6 weeks after surgery.

Household chores can involve stretching and bending, which you may find uncomfortable. Try to get some help with household chores for at least the first two weeks after your surgery. You may feel much more tired after your operation as your body is healing. This is to be expected and can take several months before you feel your energy levels have returned to normal.

Nutrition

A balanced diet is recommended. Some general advice is to sip fluids regularly, avoid lots of caffeine, do not skip meals but eat small and often if you are struggling with larger meals. It is essential to obtain an adequate number of calories and protein to help your body heal.

Bowels

Your bowel habits may change after surgery. To avoid constipation, eat a balanced diet, including foods such as vegetables, fruit, and whole grains. You should drink 8 glasses or cups of fluids per day. It is especially important not to strain while opening your bowels after gynaecology surgery, so please take a laxative if needed.

Prevention of deep vein thrombosis

During your stay at hospital, you may be asked to wear compression stockings, we recommend you continue to wear these after your surgery as much as possible, day and night until you are fully mobile. Compression stockings are used after surgery to reduce the risk of blood clots from developing in the leg, which is known as Deep Vein Thrombosis (DVT). You may also be prescribed blood thinning injections, known as clexane. Please complete the injections as directed. You can also reduce the risk of DVT by being mobile as early as possible after your operation, by doing leg exercises when resting and by staying well hydrated.

Sexual intercourse

Depending on the type of surgery you have had, you may need to avoid sexual intercourse for a period of time. If you have had a hysterectomy or prolapse surgery, we advise to avoid intercourse for a minimum of 6 weeks. Your doctor will be able to advise further. If you are still experiencing a lot of pain, vaginal bleeding or experiencing an unusual vaginal discharge, please seek further advice before resuming intercourse. It is not unusual to feel some initial discomfort during intercourse, but this should settle with time. If discomfort does not settle, please contact your GP.

Driving

The drivers medical unit at the Driving and Vehicle Licensing Agency (DVLA), advises you should only drive when you are free of pain and able to perform an emergency stop comfortably. However, you should also advise your insurance company that you have had surgery.

Return to work

Returning to work depends on the type of surgery you have had and your occupation. We will be able to arrange a sick certificate on discharge. Should you feel you require more time to recover once home, please contact your GP.

When to seek medical advice

If you have any concerns **within the first 2 weeks** after your surgery, please contact the Gynaecology team to speak with one of the nurses for advice.

After this period, please see your GP, out-of-hours clinic, contact 111, or attend A&E as below:

Please attend your nearest emergency department (A&E), if you experience any of the following issues:

- A sudden onset of shortness of breath and/or chest pain
- A temperature of 38 degrees Celsius or above (100.4 Fahrenheit)
- Severe pain or increasing pain
- Heavy bleeding from your vagina (bright red blood or clots)
- Pain, swelling or redness in your calf
- If you are unable to pass urine
- Severe nausea and vomiting
- You feel very unwell and need urgent medical care

Please contact your GP or contact NHS 111 (dial 111, free from both landlines and mobile phones), or attend the emergency department (A&E) if the symptoms are severe:

- Wound pain or swelling/redness of your wound area
- Discharge/oozing from your wound or your wound opening
- Constipation that lasts longer than 3-4 days and does not improve after taking a laxative
- Offensive vaginal discharge
- Burning pain or discomfort when passing urine
- Pain relief is not adequately controlling your pain.

Contact

Please contact the Gynaecology Ward (3E) Whiston on 0151 430 1522 or E ward Southport and Ormskirk 01695 656901.

My care plan

Use this page to document any important information about the post-operative care plan:

Operation:	
Follow up:	
Clexane injections:	Yes or No Duration:.....
New medication/HRT:	
Any other important information:	

Further Information

Royal College of Obstetricians and Gynaecologists (RCOG) www.rcog.org.uk/for-the-public/browse-our-patient-information/recovering-well-from-gynaecological-procedures/

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 26633

Ormskirk Hospital
Wigan Road,
Ormskirk L39 2AZ
Telephone: 01695 577111

Southport Hospital
Town Lane, Kew
Southport PR8 6PN
Telephone: 01704 547471