

Notify your surgeon or doctor if you experience any of the following

- Increased redness or swelling at the incision site(s)
- Pus or drainage with a foul odour from an incision site(s)
- Fresh or ongoing bleeding from the incision site(s)
- Persistent fever (temperature above 101°F or 38.9°C)
- Chills, shivering, or other flu-like symptoms
- Nausea and vomiting lasting longer than 24 hours
- Difficulty urinating
- Persistent or severe headache
- Dizziness, fainting or light headedness
- Weakness, numbness, or tingling in your arms or legs

Seek immediate medical care if you experience: prolonged, increased, or severe abdominal pain.

- Chest pain or trouble breathing

Following anaesthetics and procedural sedation

- Anaesthetics and sedatives can disturb your judgment and coordination, therefore:
- You must be accompanied home by a responsible person who must stay with you for a minimum of 24 hours.
- If you take a taxi home, an adult (other than the taxi driver) must be with you.

For at least 24 hours after your procedure, do not:

- Drive any type of motorized vehicle
- Ride as a passenger on a motorcycle or snowmobile
- Operate any power tools
- Sign any legal document or important papers
- Drink alcohol or use recreational drugs for 24 hours
- Be the primary care provider for dependents

Your personal follow-up instructions

- You may shower in _____ days.
- Clips to be removed by _____
- Do not lift, push, or pull anything that requires an effort or is heavier than 5 kg (10 pounds) for _____ weeks or until advised by your physician.
- Return to work as directed by your physician

Next appointment

- Only if required
- _____ days / weeks with _____
(call physician's office for appointment)
- Date _____ Time _____
Physician _____

IHA – Surgical Services
DCS & PSS Clinical Practice Standards Working Group



Interior Health
Every person matters

Post-operative Discharge Instructions HERNIA REPAIR

Our Mission

To strengthen the quality of personal, family and community life through counselling, education, support or referral.

For general questions or concerns call

B.C. Nurse line: 811
Hearing impaired: 1-866-889-4700
Contact your physician

For emergency concerns

Call 911 or go to the nearest
Emergency Department

General information

What is a hernia?

A **hernia** occurs when an organ pushes through an opening in the muscle or tissue that holds it in place. For example, the intestines may break through a weakened area in the abdominal wall. **Hernias** are most common in the abdomen. However, they can also appear in the upper thigh, belly button, and groin regions.

Hernia repairs

Traditional hernia repair (open)

The surgeon makes an incision near the hernia site. The weak muscle area is repaired. Mesh may or may not be sutured or stapled into place to provide extra support.

Laparoscopic hernia repair

The surgeon will make several small punctures or incisions into the abdomen. Ports (hollow tubes) are inserted into the openings. The abdomen is inflated with carbon dioxide gas to make it easier for the surgeon to see the organs. Surgical tools and laparoscopic lights are placed into the ports. The hernia is repaired, usually with mesh sutured or stapled into place.

What happens when I go home?

1. Incision and dressing care

If you have had a traditional open repair, you will have one incision. If you have had a laparoscopic repair you will have several small incisions. Either way, your incision(s) will be closed with dissolvable sutures, steri-strips, or clips (staples). These will often be covered

by small dressings (dry gauze or waterproof). Some bruising around the incision(s) is normal.

When showering, remove outer dressing and leave steri-strips or clips (if present) intact. After showering, pat dry and reapply a band-aid or small gauze dressing over the incisions.

Do not have a tub bath or sit in a hot tub until your incision is healed unless otherwise directed by your surgeon.

It is important to keep your incisions clean and dry.

You may remove any remaining steri-strips in 10 days or leave until they fall off on their own. Clips (if present) will be removed in your surgeon or family doctor's office.

2. Pain or discomfort

Expect some discomfort and/or muscle stiffness. This should be manageable with regular pain medication. Your surgeon may give you a prescription for pain medication, if so, be sure to have it filled before going home after surgery. Take the medication regularly as needed so that you will be comfortable and will be able to move about more easily. If no prescription pain medication has been given, take acetaminophen or ibuprofen as per package/pharmacist directions. These drugs can be purchased at a pharmacy without a prescription.

When sneezing, laughing, or coughing, support your incision with a folded towel or small pillow.

It is common to experience some abdominal bloating, shoulder or neck discomfort in the first 48 hours after laparoscopic surgery. This is usually the result of residual carbon dioxide gas that was inserted into the abdominal cavity during the surgery. This gas will be gradually reabsorbed by the body. Discomfort may vary with sitting, standing, lying etc. Lying down flat and applying warmth to the shoulders and/or neck (not abdomen) may aid in relieving any discomfort.

Groin incisions may cause bruising and swelling of the genitals. This is not usually a problem but occasionally makes it hard to pass urine. Once at home, if you are unable to pass urine for eight hours and are uncomfortable, go to the emergency department. Wearing well-fitting briefs may provide support and increase comfort in the event of genital swelling.

3. Nutrition

After your surgery, start your diet slowly with clear fluids (water, juices, jello, and broth) and return to a normal diet.

4. Elimination

The surgery, the anaesthetic and pain medications (along with reduced activity and oral intake) may cause temporary changes in bowel function including bloating and constipation, or diarrhea. It is important that you take measures to prevent constipation. Drink plenty of fluids, eat high fibre foods such as fruits and vegetables and if desired use a mild laxative or stool softener. You should have a bowel movement within three days after surgery.