



## COLON AND RECTAL CENTER OF ARIZONA

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*A member of Arizona Associated Surgeons*

***We highly recommend you read all of these instructions prior to your surgery and have the items suggested available for your use after surgery. Keep your receipt and unused items can be returned. Refer to these instructions after surgery frequently:***

### **Post Operative Instructions:**

1. When you return home from surgery, we suggest consuming liquids or light food (Soups, jello, etc.) initially to ensure no nausea. Resume a regular diet within 6 hours – a liquid diet will result in constipation, as it has no fiber.
2. Keep the dressing placed over the wound during surgery in place for 4-6 hours after surgery. This will reduce the amount of swelling. After that time, remove the dressing. Usually the time to remove is on paperwork given to you from the hospital/surgicenter.
3. You may have a small amount of bleeding and/or discharge. **THIS IS NORMAL.** You can have some bleeding up to 3 months after the procedure. Rarely, if the dressing is saturated with blood place a thin pad and sit on a frozen hot dog or peas. Re-examine the area for bleeding. If you have more than a cup of blood at any time from your rectum, call the office. If you cannot reach anyone, head to the nearest emergency room immediately.
4. If the dressing is dry or has a few spots of blood you may begin to take hot baths every 1-2 hours for 10 minutes per bath. This can be done in a tub or in a portable sitz bath. Hot baths cleanse the area and help decrease the pain. Do NOT soak more than 10 minutes or more than 5 times a day, as you can soak your skin off. If you have little or no pain do the hot baths only after stooling to keep the area clean. (The only dressing needed between these baths is Kotex mini-pad or sterile gauze.) If the area becomes raw, use some Desitin or A & D ointment that can be found on the baby aisle at the store. DO NO USE ANY PREPARATION H PRODUCTS OR WIPES AFTER SURGERY.
5. For most procedures excluding fistula repairs, you most likely have been prescribed a special cream that can only be picked up from a compounding pharmacy (Potter's House Apothecary 21753 N 77<sup>th</sup> Ave #1500 Peoria, AZ 85382 623-362-9322) Your surgeon discussed this with you in pre op. Many insurances do not pay for this cream and as it is a special compound there is no substitution for it. If your insurance does not cover it prior authorization is not an option. This cream is recommended after surgery for comfort but is not a requirement for healing if you are unable to pay for it, although it does give great benefit for pain and preventing infection. Again, there is no over the counter or other prescription replacement if it is too expensive.
6. If you do not have kidney problems or an allergy, you have been prescribed Toradol. You are to take one pill every 6 or 8 hours as prescribed until gone. You will be given a total of 12-20 pills. These are for pain and to prevent swelling – so even if you have no pain, keep taking them as directed to treat the swelling until all gone. After you are done with this, you may then take 2 aleve 1-2x daily or motrin, although aleve works better for most patients.
7. If you still have pain, try the muscle relaxer prescribed (if given) or take 1 tablet of your prescription narcotic pain medication every 4-6 hours as prescribed. Take the first tablets as the local anesthetic wears off. **DO NOT wait until the pain is severe before taking the pain medication.** It is best to take the medication with food or liquids. **DO NOT** drink alcoholic beverages while taking the pain medication. Do not drive while on narcotics.
8. If the pain increases and you are having fever >101.5, chills, or sweats call the office.



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9. It is important that you urinate the evening of the day of surgery. **DO NOT** wait until your bladder feels uncomfortably full. If you cannot urinate normally, try to do so either in the shower or bath tub. Showering or bathing will not hurt the wounds. **DO NOT** over-hydrate yourself trying to urinate; drink only your usual amount of liquids. If you have not urinated even by sitting in the tub or any other method within 6-7 hours of your procedure, you will need to report to your nearest ER in order to be catheterized. This is rare, so please let us know if it happens.

### **FOLLOWING DAY OF SURGERY:**

1. Eat a regular diet as tolerated including plenty of oatmeal or bran, fresh fruits and vegetables. For many, milk products (cheese, etc) are often very constipating, so avoid or minimize these for the first few days after surgery. Red meat is similarly constipating, so at first eat more fish or chicken.
2. Take a hot bath after bowel movements but no longer than 10 minutes at a time. This will help with pain. You can take sitz baths 4-5 times daily. Do NOT add in Epsom salts, that will burn the skin. Cold packs (no longer than five minutes per hour) may give relief. The frozen peas and frozen hot dogs fit well into the area of the wound (we recommend you do not eat these items and that you discard after use).
3. Avoid constipation and diarrhea. It is expected that you will have a bowel movement by 48 hours after surgery, and then one daily or every other day afterwards. If you have not moved your bowels by the evening of the first day after surgery, take some milk of magnesia:
  - a. Take the fiber supplement started prior to surgery - Citrucel, metamucil or an equivalent. Drink plenty of water.
  - b. Dried prunes or prune juice taken in the evening can also act as a mild laxative.
  - c. Take Colace 300 mg daily (3 pills). If you have no stools by 2 days, add in Senokot or Milk of Magnesia (follow the directions on the package) or use an enema – cover the tip with Lidocaine ointment
  - d. If your stools are too hard, add in two to four flax seed oil capsules (available at CVS/Wal-greens, etc) and increase your fluid intake.
  - e. If you do not move your bowels on any given day, add the flax seed oil capsules (if not taking them) or increase the stool softeners. If you go 2 days without a bowel movement, or feel as though you need to have a bowel movement, use the Senokot or Milk of Magnesia, and if this has no positive result, take a Plain Fleet Enema and call the office only if the enema does not work. Coating the tip with Lidocaine ointment will help make the enema easier.
  - f. If you are having diarrhea (loose stools, or more than three stools daily), stop the Colace/flax seed oil capsules and add more fiber to your diet or consume some Kaopectate (Imodium). If you allow the diarrhea to continue, there is high risk for infection and for severe anal pain in the form of spasm which can take several weeks to resolve.
  - g. Apply the compound cream or topical Lidocaine ointment (recticare) prior to stooling to help decrease discomfort.
  - h. The area will swell and look like hemorrhoids. **YOUR HEMORRHOIDS ARE NOT GROWING BACK AND THEY WERE REMOVED.** This will resolve in 2-3 weeks.



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### **GENERAL INSTRUCTIONS:**

1. **DO NOT** drive if you are taking the narcotic prescriptions for pain following surgery. Also, **DO NOT** drive if you feel weak or lightheaded or are taking pain medication more often than every 6 hours.
2. NEVER mix pain medication with alcohol.
3. Except for your pain medication prescription, all medications listed above (Metamucil, Citrucel, Senokot, Milk of Magnesia, Colace, Plain Fleet Enema, and FiberCon) are available at your local drug store without a prescription.
4. Avoid heavy lifting and straining for the next one to two weeks. However, it is important that you be active to stimulate the bowels. Engage in activities such as walking and usual activities around the house as soon as possible after surgery. Swimming is appropriate after the incisions have healed. If you would like to swim sooner it must be in a personal pool and after one week after surgery, and never if you had an abscess or fistula treated or have an open wound.
5. The anal area is richly supplied with blood vessels and as such, the main risk of surgery is bleeding. This risk persists for about 10 days after the operation. We recommend you remain in the area during this time and avoid sitting for long periods of time.

### **OTHER TIPS:**

1. No rubbing – Only patting to clean or apply medications.
2. The local injection will last for approximately 6-36hrs.
3. We may place a foam inside your anus decrease/absorb bleeding. You may feel the urge to pass this on the day of surgery or the next day. This is no hard packing. This is okay – do not be alarmed. It often will fall out and look like a blood clot.
4. As soon as you return home, eat and then take pain medications. Sit in the sitz bath or the tub, use only warm water (no less than 4 times a day.)
5. Have the first bowel movement on the sitz bath if necessary.
6. Keep the anus area clean and dry. If necessary, use a cool hair dryer for total drying.
7. The first 2 days after surgery take pain medications as often as they are prescribed.
8. **AVOID** narcotics if possible; these are constipating (Norco, Codeine, Percocet). Take Tylenol for mild pain, and use the compound cream or topical recticare - Lidocaine jelly.
9. If you need a refill on medications, call the office (602) 993-2622 Monday-Friday from 8am-4pm.
10. If you have some difficulty in urinating, sit in a hot tub and run warm water over the palm of your hands. If the difficulty persists call the office.
11. Some bloody discharge is normal for up to 2 weeks to 3 months. Use the light day pads.
12. There will be some swelling in the skin tissue around the area of the surgery. Patients commonly think this is hemorrhoids returning; it is not and should resolve over several weeks.
13. Remember- after surgery, return to a regular high fiber diet including oatmeal, fruits and vegetables. **DON'T** think that doing a liquid diet only or fasting is okay. **It is not**—your body will continue to produce stool, only it



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will be diarrhea. Diarrhea and thin stools can cause severe muscle spasm. You must eat a normal diet to have normal bowel movements.

14. Drink plenty of juice and liquids, at least 6-8 glasses of liquid a day.
15. Colace helps to keep your stools soft while on narcotics. You can stop the Colace when you are completely off of narcotics. If you develop diarrhea, stop taking the Colace and use Imodium if needed to keep stools under 3 times daily.
16. Your absence from work will vary according to the severity of your illness and the extent of surgery. You can usually return to work in about one to three weeks, after being examined by your doctor, but we will not provide an excuse for any unauthorized leave of absence prior to surgery.
17. Call 602-993-2622 to schedule an appointment for a follow up visit in two weeks.

### **Fistula/abscess Patients:**

1. **You will have an open wound after surgery, although the doctor will stitch it with dissolving suture to make it as flat as possible. Remove this dressing the evening/late afternoon after surgery. If some of the gauze is sticking, then stand in a shower to loosen it first.**
2. **Shower or soak in plain water for 10 mins 2x daily for the next two weeks until you return to see your doctor, but replace the gauze 4-5x daily. The gauze needs to be in contact with the open wound in order to dry it and help you heal faster. This does not need to be sterile gauze, and it is not to pack it full, just to put it into the wound to absorb discharge.**
3. **There will be a lot of drainage after surgery. This may appear to be like pus, and you may think you have another infection. This is not the case; it is inflammatory products and protein as your body heals and gets rid of the infectious products after surgery and is expected. The more times you change gauze to dry the wound, the faster this will stop.**
4. **Purchase a topical lidocaine spray, like dermoplast, as this can be sprayed into the wound and help with pain that might occur during dressing changes. This is usually found in the First Aid section of the pharmacy.**
5. **If you have a drain/seton placed for fistula surgery, this does not change any of the wound care. Some patients, however, will have a small amount of stool or gas escape along the drain at times, and this is also normal.**
6. **No swimming until the external wound heals.**
7. **You may start (and are encouraged to start) advil or aleve once 24hrs has elapsed from surgery, as this will help with pain control.**
8. **Again, please call 602-993-2622 to make your post operative/follow up visit in 10-14 days after surgery.**

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