

Pelosi Medical Center
COSMETIC VAGINOPLASTY
POST-OPERATIVE INSTRUCTIONS

Below are post-operative instructions and information on what to expect during your post-operative recovery period. This information applies to the following procedures:

- Perineoplasty
- Colpoperineoplasty
- Rectocele Repair

If at anytime throughout your post-operative course you have a particular question or concern, never hesitate to contact Drs. Pelosi at 201-858-1800. During business hours you will talk to the office staff directly. After hours you will be connected to our answering service and Drs. Pelosi will either be connected directly or they will call you back at the phone number you provide. If for some reason you do not hear from us in 15 minutes, call the answering service again.

Discharge from the Facility

Make sure that you purchase the medications prescribed to you by your surgeon.

Home/Hotel

You have been given a local injection of a long-acting anesthetic during your surgery. The purpose is to provide you with post anesthesia comfort for 8 to 10 hours. Afterwards, take the analgesics that were prescribed to you as needed. Analgesics (pain medications) work best if you start taking it before discomfort gets too intense. Mild pressure and cramping sensations are normal after this type of surgery.

The First Postoperative day

The first day you should rest, eat light according to your appetite, drink fluids, and take your medications as prescribed.

If you have a bladder catheter, it will be removed on the first postoperative day in our office. Follow the instructions below in caring for your catheter and drainage bag:

- The tubing from the leg bag should fit down to your calf with your leg slightly bent. If you have extra tubing, you may need to cut it. Your nurse will show you how to do this.
- Always wear the leg bag below your knee. This will help it drain.
- Make sure to place the leg bag on your calf with the Velcro® straps your nurse gave you. Use a leg strap to secure the tubing to your thigh.
- If the straps leave a mark on your leg, they are too tight and should be loosened. Leaving the straps too tight can decrease your circulation and lead to blood clots.
- Empty the leg bag into the toilet through the spout at the bottom every 2 to 4 hours, as needed. Don't let the bag become completely full.
- Don't lie down for longer than 2 hours during the day while you are wearing the leg bag.
- At night keep the leg bag below the level of your bladder. To hang your leg bag while you sleep, place a clean plastic bag inside of a wastebasket. Hang the leg bag on the inside of the wastebasket.

If you have vaginal packing, it will be removed the morning after the surgery.

What to Eat During the First 4 Weeks of Healing

Try to avoid eating foods that produce constipation for the first 4 weeks. Eat a diet high in fiber, vegetables, fruit and water. If you are prone to constipation, take Colace 100mg twice a day. This is a stool softener. If you are still constipated, take a Fleet enema (this can be obtained over the counter at any pharmacy) and use as directed. Keep in mind that narcotic analgesics (Percocet, Vicodin, Oxycontin) produce constipation as a side effect.

How to Stay Comfortable During Healing

If you have discomfort in the first 12 hours after surgery, take an analgesic (pain medication). **Do not apply a cold pack or ice pack.**

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If you have discomfort in the first few days after surgery, place a cold pack on the perineum (the area between vagina and anus) or take an analgesic (pain medication). Do not keep the cold pack on continuously. Apply it for 5 to 10 minutes then remove it for a while and then place it again. Continue this process until you are ready to retire for the night. You do not have to use the cold pack while you sleep. If you do not have discomfort, do not use a cold pack.

To maximize comfort while sitting, use a ring cushion to keep pressure off the area.

Commonly Seen After This Type of Procedure

Some women with hemorrhoids may develop temporary hemorrhoidal swelling after this type of surgery. Although this is a nuisance, it is a self-limiting problem that will resolve over time. If this inflammation should develop call your surgeon and he will give you special instructions in the care of this condition and medications to assist in reducing discomfort and produce resolution.

Light vaginal bleeding is common in the first six weeks of healing. However, you should contact us if you note vaginal bleeding so we can determine if any special care is necessary.

Staying Clean for the First 4 Weeks of Healing

Beginning the day after surgery you may shower.

You may not take tub baths, Sitz baths, Epsom salt baths, Jacuzzi, etc. for the first 4 weeks because it will cause your stitches and surgical site to soften, weaken and possibly separate.

You should not apply any creams, lotions, ointments, hydrogen peroxide, alcohol, etc to the area unless you have been instructed to do so by your surgeon. Many topical compounds can interfere with the healing process and create problems.

The vulva and perineum can be gently washed with warm water and a mild soap. We recommend Hibiclens liquid soap (1 part Hibiclens with 20 parts tap water) in a spray bottle. Hibiclens is available over the counter in most pharmacies.

When using the toilet, dab gently with toilet tissue and avoid rubbing forcefully over the perineum. Finish by spraying the Hibiclens solution on the perineum and allowing it to air dry.

Restrictions on Sex and Other Activities

You may not have sex, you may not place anything into the vagina, and you may not go swimming until you have completely healed from surgery. Complete healing takes six to eight weeks for most women. You should make an appointment to be examined by your surgeon six weeks after surgery where you will be informed at the time of the examination if you are ready to resume these activities. If you cannot see your surgeon six weeks after surgery, we recommend that you wait until eight weeks after surgery before resuming these activities.

Patient's acknowledgment of receipt of instructions:

 Patient's Signature

____/____/____
 Date