

B. Biomed. Sc. (1st Class Hons), M.B., B.S., F.R.A.C.S.

General and Colorectal Surgery

Provider Number: 248039CX

ABN: 53 135 443 969

2 Wyandra Crescent (P.O. Box 9429) Port Macquarie NSW 2444

Tel: (02) 5524 7474

Fax: (02) 6584 1408

Post-operative instructions for Totally Extraperitoneal (TEP) hernia repair

After your TEP hernia repair (unilateral or bilateral), you will be reviewed by me or one of my team members and discharged. This may occur on the same day as the surgery (this will have been previously discussed) but more commonly it will be the day after. Below are some post-operative notes, please familiarise yourself with them.

Diet:

No special restrictions. Everything in moderation.

Pain relief:

Regular Panadol and Nurofen are usually sufficient and should be taken regularly **and** together, at least for the first 1 or 2 days. You will be provided with a script for a stronger analgesic (such as Tramadol or Endone) to supplement the Panadol and Nurofen **if** you need it.

Wound care:

Your wounds will be dressed with waterproof dressings. Please do not allow water to get under the dressings for 48 hours. After 5 to 7 days, feel free to remove the dressings and leave the wounds uncovered. You may get them wet at this time. There are **no** sutures to remove.

Activities and driving:

Please move about as much as you can within the limits of your comfort. My only recommendation is to avoid heavy lifting (> 5kg) or straining for 6 weeks after the surgery. This allows your hernia repair mesh to "set" properly. You should only drive once you are comfortable performing the normal maneuvers of driving without limitations due to pain/discomfort. Usually this is 2 weeks.

Expected healing process:

Tenderness, slight swelling and bruising can occur around the port sites (the "cuts") but this is not a cause for concern and will improve in 2 to 4 weeks. Tenderness in the operated groin is also common but will resolve in about 2 weeks. Scrotal bruising (in men) is also common and disappears on its own in 1-2 weeks. Supportive underwear ("Y-fronts") can help. A non-tender lump in the groin (cord haematoma) can also appear in some men and usually corrects itself in 6 to 8 weeks. This **is not** the hernia coming back.

Return to work:

Expect to take at least 2 weeks off work while you recuperate. You will need to be on light duties until 6 weeks after the operation.

Things you should tell your GP or me about:

- Inability to pass urine in some men with larger prostates (and occasionally in women) can sometimes happen and may require the insertion of a temporary catheter into your bladder. Before leaving hospital, you **must** have passed urine with no issues. If you experience this after going home, you must present to the emergency department for assessment.
- Severe pain that is not responding to the pain relief prescribed needs attention and should not be ignored.
- Increasing redness or discharge from the wounds may indicate a wound infection (rare) and may require antibiotics.
- Fevers or feeling sick after this procedure is unusual and you should contact your GP or me for attention immediately.

Follow up:

Your usual follow up with me will be around 4 to 6 weeks after the procedure and you will be provided with an appointment card at discharge or will be asked to make an appointment yourself (if you go home on the weekend, for example). It is important for you to keep your appointment as we can discuss your recovery and I can assess your healing and give you the all clear.

All the best,

Dr Mark Romero