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## AFTER CARE INSTRUCTIONS for GENITAL PROCEUDRES

#### MEDICATIONS

- You may be prescribed narcotic pain medication, which you should take as directed and as needed for pain. Do not exceed the prescribed amount, unless instructed by your surgeon.
- Wean yourself off narcotic medication as soon as you are able.
- Take over-the-counter Tylenol (acetaminophen) on a scheduled basis (Ex.: 650mg every 4 hours, or 1000mg every 6 hours) starting on your day of surgery. *If you have liver problems, do not take acetaminophen, unless you have discussed this with your doctor.*
- DO NOT TAKE MORE THAN 4000 mg of acetaminophen per a day.
- Your narcotic medication may also contain acetaminophen, so you need to be aware of your total dose from all medications you are using.
- Ibuprofen (ie. Advil, Motrin) or naproxen (Aleve) may be started the same day as your surgery and may be used together with your narcotic pain medications and/or with acetaminophen. However, do not use ibuprofen or naproxen if you have had problems with stomach ulcers, kidney problems or if you have been told by a doctor not to use nonsteroidal anti-inflammatory drugs (NSAIDs).
- Wean yourself off acetaminophen and/or ibuprofen/naproxen as soon as you are able.
- Purchase an over-the-counter stool softener (Metamucil, Colace) while taking narcotic pain medication. This helps avoid constipation.
- You may resume taking your routine medications, unless your physician instructs you differently.

#### DIET

- You should gradually resume your normal diet.
- Drink plenty of fluids/ water (eight 8-ounce glasses a day).
- Do NOT drink alcohol for 24 to 48 hours after surgery, or while taking narcotics.

## **CLOTHING INSTRUCTIONS**

• Wear loose, comfortable clothing.

## ACTIVITY

- **SHOWER:** You may shower the day after surgery. Do **NOT** take a tub bath, swim, or whirlpool for 3 weeks or if there are any openings in the incision.
- If you have paper tape or Steri-Strips over the incisions, do **NOT** remove them. You may still shower with them and they will be removed in the office.
- You are encouraged to begin walking the evening of surgery. While sitting, alternate moving your ankle up & down several times each hour to help with circulation (flexing your calf muscles).
- **DRIVING:** You may begin driving the day after surgery. Wait longer if you do not feel comfortable with your reflexes behind the wheel.

Do not drive while taking narcotic medications.

• Do **NOT** do any strenuous activity or exercise/ activities (running, weight lifting, aerobics, vacuuming) for 4 weeks. After your start exercising, go slowly over 1 to 2 weeks until you are comfortable with more strenuous exercises.

- Do NOT engage in any sexual activity for 4-6 weeks; you may resume when approved by your surgeon
- Do **NOT** drive or handle heavy machinery while taking narcotic pain medication or muscle relaxant medications.

## WHAT ELSE TO EXPECT

- Some pain and discomfort for 3 to 4 weeks, although it should gradually get better after the first 2 to 3 days.
- You will notice swelling and bruising that may get worse for the first few days.
- You may notice a small amount of drainage from the incision sites on the first 1 to 2 days. This is normal. You may cover with gauze or a feminine hygiene pad.
- If there are any non-absorbable sutures, they will be removed in 2 weeks after your surgery.

## **INCISION CARE**

• For labiaplasties, apply Vaseline or an antibiotic ointment to the incisions three times a day for 3 days. Please apply a thin coating only. Excessive amounts of ointment are not necessary. Gently clean the incision before applying a new layer of ointment.

#### SCAR MANAGEMENT

See Incision and Scar Care instructions

## ADDITIONAL INSTRUCTIONS

- Look at your incisions daily to note any signs of infection:
- SIGNS of INFECTION include:
  - Incision area becoming red and warm to the touch.
  - Drainage leaking from incision site that is cloudy or pus-like.
  - Excessive swelling, or more swelling on one side or the other.

## WHEN TO CALL DR. GUTOWSKI or DR. MARTIN:

- Fever over 100.5 for 2 readings taken 4 hours apart.
- Marked increase in redness, swelling, or pain around incision.
- Any excessive bleeding or drainage from your incisions.
- Pain is not relieved by prescription medication.
- Persistent problems with nausea or vomiting
- CHEST PAIN or TROUBLE BREATHING: CALL 911 or go to an Emergency Room