

Information post-women's surgery: D&C and/or hysteroscopy

Please check that you have the following information or services before you go home (discharged) and that you understand their purpose if required. Ask your nurse or doctor if you are unsure or would like more information.

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| <input type="checkbox"/> Outpatient appointment, or when to see your GP | <input type="checkbox"/> Discharge medications |
| <input type="checkbox"/> Private X-rays, personal belongings, medications | <input type="checkbox"/> Copy of Discharge Summary |
| <input type="checkbox"/> Travel bookings and forms (if applicable) | <input type="checkbox"/> Medical certificate |
| <input type="checkbox"/> Compliments and Concerns pamphlet | <input type="checkbox"/> Family notified |
| <input type="checkbox"/> Outpatient procedures as required | <input type="checkbox"/> Contraceptive / Fertility information |
| <input type="checkbox"/> Blood Test Request Form | |

First 24 hours

After your operation and because of the effects of the anaesthetic, it is important that you:

- Arrange to have a responsible adult stay with you for at least your first 24 hours at home.
- Rest quietly at home for 24 hours following discharge and gently ease back into normal activities.
- Do no heavy lifting, housework or cooking.
- Do not operate machinery or electrical appliances or drink alcohol.
- Do not drive a car and do not sign any important or legal documents.
- Do not swim or use spa baths (for four weeks) due to the increased risk of infection.
- Avoid constipation by drinking extra water and adding fibre to your diet.

Medication / Pain

It is normal to have some pain (including cramps) post-surgery. Taking regular analgesia, e.g. paracetamol (Panadol®) every four to six hours will help to keep your pain under control (see manufacturers instructions for recommended dose). A maximum of only eight paracetamol tablets per day is advised. Additionally to help with cramps, non-steroidal anti-inflammatory medications such as ibuprofen (Advil®, Nurofen®) may assist in dealing with pain.

If contraception is a concern to you, it is important to use some form of contraception for the first three months after your operation to give yourself time to heal. You will need to start this immediately if on hormonal contraception (e.g. the pill, depo) or as soon as possible. Barrier methods (e.g. condoms, diaphragm) can be used when you recommence intercourse. For more information, speak to your doctor, nurse or Family Planning Queensland (www.fpq.com.au)

Sexual activity

Penetrative sex (intercourse) is not recommended until bleeding stops (about two weeks). Additionally, you may need to use a water-based lubricant (e.g. KY Jelly® or Sylk®) when recommencing sexual activity.

Activity

You should be able to resume your regular activities within a day or two. However, rest is important.

Vaginal discharge

- Within 24 hours of your operation your bleeding should settle to be like a menstrual period. You may experience a slight pink/brown discharge on your sanitary pad or liner for the next five to ten days.
- Do not use tampons or douche due to the risk of infection.
- If you still have periods, expect them within four to six weeks of discharge, unless you have been otherwise advised.
- If your bleeding continues or becomes bright red and/or you develop an offensive smelling or abnormal coloured discharge you should seek your local doctor's advice or go to your local or RBWH emergency department.

When to seek advice

If you are discharged from Women's Recovery (Level 5, Day Surgery Unit) on the day of your operation a nurse will phone you the next day to check on your progress. However, if problems persist, please contact your local doctor.

If you experience any of the following symptoms that are not relieved by your usual medications or practices, you should seek your local doctors advice, or go to either your local or the RBWH emergency department as soon as possible, or call 13 HEALTH.

- Sudden shivers or chills, hot flushes or sweating, fever and feeling generally unwell
- Unusual shortness of breath or chest pain
- Cramping lasting longer than 48 hours, with pain worsening
- Heavy or prolonged vaginal bleeding or large clots (especially if bright red). It is not normal to have bleeding that soaks a pad within one hour more than once
- Offensive smelling, or unusual coloured vaginal discharge
- Burning, stinging, excessive frequency or inability to pass urine
- Tenderness and/or swelling or a hot sore area in the calf muscles

Follow up appointments

It is important that you have an appointment two to four weeks after your operation with your local doctor to check how you are going and to give you an opportunity to discuss any queries or concerns you may have. In addition, general reproductive health care (e.g. contraceptive plans, Pap smear) may be done if required.

If necessary, your hospital doctor will request and organise a follow-up appointment for you, which will be posted to you four weeks prior to the appointment date, please ensure you phone and confirm this appointment as per instruction in the offer letter.

If you would like further information, please contact: 13 HEALTH (13 432 584).



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Consumers and/or carers provided feedback on this publication.

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