ACTIVITY - No heavy lifting for 6 weeks (nothing more than 10-15 pounds). You may walk on a flat surface as much as you feel comfortable, but expect to fatigue quickly especially at first, so don't be too ambitious! You may drive when you would not hesitate to brake if someone stopped suddenly in front of you. This is usually within 1-3 weeks of the surgery. You should not drive if you are still requiring narcotic pain medication. Stairs are not a problem, but you may want to limit the number of times you go up and down at first because it may make you more sore. Your doctor will advise you when you may resume sexual activity and more strenuous physical activity.

INCISIONS - If staples have been left in, please call the office to arrange an appointment for removal. Your incision can get wet in the shower. Squeeze the suds of a soapy washcloth over the area to clean and then pat dry. If you have steristrips, please remove them after a week - they get fairly dirty and have no function at that point. They may be removed prior to that if they are excessively soiled or are pulling your skin. If your skin was glued with Dermabond, this will peel off in 1-3 weeks. You may remove pieces as the edges loosen. Any drainage from the incision should be reported to your doctor.

PAIN - It is normal to experience pain in your pelvic area and abdomen following the surgery. This pain will increase if your bladder is full, if you are constipated or if you just need to move your bowels. Too much physical activity may also make it worse. You will be given prescriptions for pain medication to take home. Your need for these medications will decrease day by day. It is prudent to use a stool softener (like Colace - docusate sodium) while you are taking any narcotic medication to prevent constipation. Gas pains can be fairly miserable until your bowel function returns to normal. Any simethicone containing medication (GasX, Maalox Plus, Mylicon) can help.

VAGINAL BLEEDING - This should be very minimal. A mini pad should suffice, but the color may vary from brown to bright red. Occasionally, as the stitches at the top of the vagina dissolve, you may get some bright red bleeding about 3-5 weeks after the surgery. This is normal unless it is excessive.

HOT FLASHES - If your ovaries were removed and you had not yet completed menopause, you may experience hot flashes. These are usually worst right after the surgery and will get better with time. They do not require treatment unless they are very bothersome to you. Please call your doctor if you can't wait for your next appointment and she will be happy to make some suggestions. Some premenopausal women whose ovaries were not removed will experience hot flashes transiently after the surgery. These generally clear within weeks to months.

PATHOLOGY REPORT - This is usually available a week after your surgery and will be discussed at your first post-operative appointment unless your doctor advises you otherwise.

CALL THE DOCTOR'S OFFICE IF YOU EXPERIENCE:
- Excessive vaginal bleeding (more than a pad full in an hour).
- Chills or temperature over 100.4 degrees.
- A foul smelling discharge.
- Increasing pain.
- Inability to urinate or defecate.
- Any drainage from your incision or any redness of the skin around it.

You should have follow-up appointments already scheduled for 2 weeks and 6 weeks following your surgery.