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Hernia Discharge Instructions

Diet:

- Clear liquids initially, then advance diet as tolerated to regular diet.
- Soft mechanical diet; then advance to regular diet over 3-4 days.
- Regular diet as tolerated.
- Other _____

- Eat soft foods that are easy to digest.
- Drink plenty of fluids.
- Your appetite when you return home may be less than normal. Do not force yourself to eat. Eat when you are hungry. Concentrate on liquids as it is important to stay hydrated.

Activity:

- Walking around the house, work, climbing stairs or riding in a car is fine as soon as you feel able.
- No heavy lifting of greater than 20-30 pounds or any strenuous activity for 3-4 5-6 weeks.
- Wear abdominal binder at all times except in shower for 2-3 weeks.
- After first 2-3 weeks, wear abdominal binder only while out of bed except in shower for another 3-4 weeks.
- Other _____

- You will not harm the incision by walking , and walking provides benefits of helping you recover faster, decreasing incidence of pneumonia and blood clots, and improving circulation to promote healing.

Incision Care:

- Showers are OK starting 24-48 hours after surgery.
- You may remove the outer dressing 24-48 hours after surgery, before the first shower, and you may leave it off after the shower. You may replace the outer dressing as necessary if there is continued drainage.
- NO** Baths, swimming, soaking or saunas for 2-3 weeks after surgery.
- Your incision will be covered with small white steri-strips. **Leave them on.** It is OK to get them wet in the shower. If they fall off on their own it is OK. If they are still on after 1 week then peel them off.
- Other _____

- It is normal to have some bruising and swelling around incision.
- There may be a small amount of drainage initially. The drainage will slowly decrease over time as the incision heals. When the incision no longer has fluid draining then you do not need a dressing

Physician's Initials: _____



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Medications:

- Resume all home medications as previously taken.
 - Except Stop _____
 - Changes _____
- A prescription for pain medications has been Written for you Sent into your pharmacy. Please take as directed.
- Other : _____

- The pain medicine may cause constipation. You may take over-the-counter (OTC) stool softener such as Colace or Surfak as directed while taking the pain medicines.
- You may take Ibuprofen (OTC) as needed for pain in between you pain medication doses. Take as directed on the bottle and per the pharmacy recommendation.
- You may wean yourself off the pain medication as soon as you feel able. Once off the pain medication, you may transition to plain Tylenol and/or Ibuprofen as needed for pain.

Follow –up:

- Follow – up with me in : 2-3 Weeks Other _____ : Call for appointment.
- Follow- up with _____
- Other: _____

Call if:

- You have fever over 101 degree Fahrenheit.
- Signs of infection such as redness, swelling, warmth around the wound or drainage of pus.
- Severe vomiting or cannot keep food down.
- Severe pain that is not controlled with pain medicine or is getting worse.
- You have trouble having a bowel movement or have significant diarrhea.
- You have heavy bleeding from incision.

For any questions that are not emergencies, call your doctor during regular business hours at 512-491-6542 and talk to one of the Medical Assistants. If you have urgent concerns after regular office hours, please call the office at 512-491-6542 and have the doctor paged.

Physician Signature: _____

Date: _____ Time : _____