Inguinal Hernia

Preoperative Preparation

Fasting
It is important to follow your instructions about fasting before your surgery. Ask the doctor which of your routine medications you should take that day in spite of not eating.

Pre-op Shower
Take a thorough shower (preferably with antibacterial soap such as Dial or Hibiclens but any good soap will do) with emphasis to the area of the planned incision, the night before and the morning of your surgery. Do not shave the area. If any shaving is necessary it will be done in the operating room.

Post Operative Instructions

Post-op Nausea and vomiting
The anesthesia and/or pain medication can make some people nauseated. If you are throwing up and unable to keep anything down, contact the doctor on call to change medication and possibly order some nausea medication.

Post op Urinary Retention
The most common problem that occurs after hernia repair is difficulty urinating (more common in older men). In most cases adequate pain control and relaxation will lead to successful urination. If you become uncomfortable and cannot urinate, call the surgeon on call and he will arrange for the ER staff to place a catheter.

Pain Medication
Inguinal hernia repair is a painful operation and medication will be needed to help you recover. If a local anesthetic was used you may not have any pain for several hours after the operation. An important principle of good pain control is to take the medication when you start to hurt; don’t wait until you can’t stand the pain. “Stay ahead of the pain”. You may be given one or a combination of pain medications. Narcotics are used because of their potency. You do not have to worry about becoming addicted when using these medications for a short time. Unfortunately some people are sensitive to all narcotics and they become nauseated. Sometimes changing the medication will help. You should not be driving when taking narcotics.

Use of a non-steroidal anti-inflammatory agent (such as ibuprofen, Advil, Aleve etc) will increase the effectiveness of the narcotic and reduce inflammation. They can be taken with the narcotics. Take
them with food and be aware that they can increase the risk of stomach ulcers. Do not take additional Tylenol as most of the narcotics contain a large dose of Tylenol.

The pain medication will not make the pain disappear, but make the pain tolerable. If you need more pain medication please refer to the general instruction sheet about refills.

**Wound Care**
You should remove the gauze bandage 48 hours after the operation. Then you can shower and get the wound wet. You do not need to cover it unless replacing the gauze makes you more comfortable. If the dressing is replaced, it should be changed every day. If you have staples, there is always some redness that forms where the staples enter the skin. This does not mean the wound is infected. If the wound continues to drain blood or serum after the bandage has been removed, contact the office.

There is often some bruising that will move downward into the penis/scrotum or labia. This tissue is very porous and any blood at the surgical site will migrate with gravity. Some bruising and swelling is expected; if it is excessive, contact the office.

**Constipation**
It is normal to go 2-3 days without a bowel movement following this operation. If after three days you haven’t had a bowel movement take a mild laxative like milk of magnesia (1 tablespoon). If not effective repeat the dose or use something stronger like magnesium sulfate of Dulcolax tablets (available without a prescription).

**Activity Guidelines**
Do not lift more than 5 lbs or do anything that would strain your abdominal muscles. Get up and move around even though it may be painful. Lying in bed all day will only prolong your recovery. Going up stairs and leaving the house are encouraged. Do not drive until you are off the pain medication and you can comfortably control the car.

You may resume sexual activity when you feel comfortable. Remember not to strain your abdominal muscles.

**Call the office if:**
- Your temperature is higher than 101 F.
- Your pain is uncontrolled.
- You develop unrelenting nausea.
- You develop any unusual signs or symptoms.