

Post-operative Instructions for Pilonidal

FOLLOW-UP:

Follow-up:

Your follow-up appointment is a telephone appointment at _____.
Note Dr. Dalvi or Dr. Mosseler may call you within 2hrs of this time

Please call our office the Monday morning after your surgery to arrange a:

___ week telephone follow-up appointment.

___ week in-person follow-up appointment.

Office Number 905-702-2629. The office is in the medical building behind Georgetown Hospital. .
Contact us if any concerns about wound healing or your post-operative course.

Address:

40 Hillside Drive, Suite 204

Georgetown ON L7G 4W3

Email: info@georgetowngeneralsurgery.com

Returning to the Emergency Department:

If you have worsening pain, fevers, chills, nausea and vomiting or unable to tolerate fluids, or any significant concern regarding your wounds or your wellbeing after surgery, return to the emergency department at for assessment. If possible return to Georgetown Hospital (where you had your surgery).

Incision Care and Showering:

Typically there will a 5-10 cm incision along the upper aspect of your gluteal cleft in your lower back. The incision is usually left open but may be closed with stiches in special circumstances.

- 1) You may shower after 48 hrs but you will need to keep your surgical site dry if it is being packed with dressings. Given the size of the wound you may find sponge bath easier.
- 2) If stiches are placed do not soak the incisions, and pat dry after the shower. You should not soak the incisions in standing water until you have had your follow-up appointment.
- 3) No ointments, powders or creams on the incisions unless instructed.
- 4) No additional dressings are needed on your incisions unless instructed

- 5) Watch for signs of infection:
 - a. Increasing redness or warmth around the incision
 - b. Pus-like drainage
 - c. Excess swelling or bleeding
 - d. If you take your temperature and it is greater than 38.5 C in two readings 4 hours apart
- 6) If there is any significant warmth, increasing pain, increasing size of the swelling return to the emergency department or call our office. Although walking is encouraged, for the first 1-3 days it may be helpful to take breaks and avoid vigorous activity.
- 7) **You will have nursing care arranged for your incision. Be aware that for incisions that have been closed with stiches there is up to a 50 percent chance that the incision can come apart, and in which case will require wound packing.**

Diet:

- 1) There are no long term changes to your diet.
- 2) After your surgery, while in hospital you will be immediately started on clear fluids and progressed slowly to a solid diet prior to discharge, although it is not a strict requirement for discharge.
- 3) You can slowly return to your regular diet, but for the first two to three days you may not feel like eating anything heavy as it takes some time for your bowels to start moving regularly
- 4) After any surgery always make sure you are drinking plenty of water as dehydration can be a common cause of post-operative emergency visits.
- 5) You may consume caffeinated beverages immediately after your surgery but for the first week be sure you are keeping hydrated as caffeine will dehydrate you.
- 6) Do not drink alcohol for the first 48 hrs after surgery and anytime while you are requiring prescription pain medication. Be very careful with alcohol as it can interfere with other medications, and dehydrate you, and impair your recovery. If possible avoid for the first two weeks.
- 7) Bear in mind that constipation is common after surgery particularly if you are on a prescription pain medication. You can use a stool softener like Restoralax or a fibre supplement like Metamucil for example to help ensure you are having regular bowel movements. Drinks lots of water.

Medications:

Unless discussed, you may return to your regular medications following the surgery, once you are able to tolerate liquids. Any exceptions (for ex. Blood thinners) will be discussed with you. If you have any questions regarding your home medications contact my office or your family physician.

Other Instructions: _____

Activity:

- 1) Immediately after your surgery you are encouraged to get out of bed and walk as this will decrease the risk of blood clots and pneumonias after surgery.
- 2) You are able to do most activities around the house including dressing yourself, walking up and down stairs.
- 3) You may find a donut pillow helpful for sitting.
- 4) Do not lift anything greater than 15 lbs or equivalent additional resistance or for the first two weeks (discuss with your surgeon) to avoid wound disruption. After two weeks you may slowly return to regular activity being careful to monitor any sensation of pain or strain on your incision.
- 5) With respect to driving, you should not drive for the first 48 hrs after surgery and anytime you are requiring prescription pain medication. If you are easily fatigued, have pain that will restrict sudden movement or range of motion, or are having difficulty with being alert or concentrating, DO NOT drive.
- 6) With respect to sexual intercourse, as long as the type of activity is not cause significant discomfort for your incisions you may slowly return to regular activity as you feel comfortable.
- 7) With respect to work, for jobs not requiring heavy lifting (greater than 15lbs) we recommend you take at least 3-5 days off, and possibly more depending on your recovery and size of incision. With respect to jobs requiring lifting greater than 15 lbs you may require at least 2 weeks off work, depending on the work. Talk to your doctor.

Pain and Symptom Control

The first 1-3 days after surgery you will have soreness at the incisions, typically worst at the belly button. We recommend you take around the clock pain medication for the first 1-2 days after the surgery, alternating between Tylenol (325-975 mg) and Advil (200-600mg) every three hours, and supplementing with your prescription pain medication as needed.

For example you could take 650 mg of Tylenol at 8:00 am and 400 mg of Advil at 11:00 am and if you have some persistent soreness after 30 min to 1hr take Statex (or other prescribed medication) at that time but continue to take around the clock Tylenol or Advil. DO NOT go over the maximum daily dose of any medication.

If your pain is minimal certainly return to as needed pain medication rather than taking it regularly but try to use Tylenol or Advil first rather than the prescription pain medication.

Speak to your doctor if you have any concerns with Advil or Tylenol including liver disease, kidney disease, a history of stomach ulcers or use of blood thinners.

If you are having worsening pain despite pain medication or requiring more and more pain medication, return to the emergency department or call our office for assessment.