



Women's Group of Franklin

Hysterectomy Instructions

Before Surgery:

1. Nothing to eat or drink after midnight the night prior to your scheduled procedure. You may brush your teeth, rinse and spit. If you are instructed to take medications the morning of surgery, they may be taken with a tablespoon or two of plain water.
2. Do not wear jewelry or makeup on the day of your surgery. Do not wear your contact lenses. Leave all valuables at home with the exception of your insurance card and driver's license to present to the hospital.
3. Wear comfortable clothing. You want to bring something to wear after the surgery that is not tight on your abdomen so it does not rub on your incision.
4. If you are spending the night in the hospital, bring your basic toiletries as if you were spending the night in the hotel: toothbrush, brush, deodorant, etc.
5. The hospital will provide sanitary napkins for your use after your procedure. You may want to have light flow pads or panty liners ready for wearing at home after your surgery.
6. If you have been instructed to do a bowel prep by our staff or your physician, drink your magnesium sulfate (any flavor) starting between noon and 3 PM the day prior to your surgery. Once you start your bowel prep, you may continue to eat light foods and liquids up until midnight (broth, noodle soup without meat, shakes, and pudding are okay).
7. You may be contacted by us or the hospital the day prior to the surgery to change the time of your procedure. This is due to the hospital having to schedule multiple procedures for multiple doctors and some surgeries getting canceled or added on at the last minute. Please keep your phone handy and check for messages if you miss any calls.

After Surgery:

1. We will contact your designated contact person (family member or friend) during and/or after the surgery. Please instruct the contact person to wait in your hospital room or provide a contact number where we can reach him or her.
2. You may wake up with a catheter. In some cases, this will need to stay in overnight. In other cases, it may be removed once you are fully awake and can get up to go to the bathroom. Your physician will determine the best time for the catheter to come out after the surgery is done.
3. You will have one or more incisions on your abdomen if you have an open hysterectomy. If your hysterectomy is done vaginally you may not have incisions at all. If there is a bandage on your incision, it may be removed after 24 hours. If there are steri strips in place (look like white pieces of tape lying across your incision), try not to pry them off. If they come off on their own, that is ok. Many times we are using a clear adhesive that looks like clear glue on your incision. If you have this substance on , do not try to pick it off. It will gradually dissolve over time. Once you are 24 hours out from your procedure, it is ok to shower. You can get your incision(s) wet, just do not

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scrub on them. Make sure you gently pat them dry when you are done. Wet wounds are more likely to get infected. You should monitor your incisions for any significant redness, drainage, or breakdown. Bruising and a small amount of watery discharge (like when you pull off a scab) are to be expected.

4. You are expected to have some vaginal discharge after a hysterectomy. This is normal and may be white, clear, or even bloody. You should be alarmed and call the office if the discharge is heavier than a period, you have a fever, or the discharge is grossly discolored (like pus) or has a strong foul odor.
5. It is normal to have pain following surgery. When you use your abdominal muscles, it is going to pull and hurt. Try to minimize the use of your abdominal muscles for the first week after the surgery. You can hold a pillow over your abdomen to cushion if you have to cough or sneeze. Your pain medicine will be prescribed upon discharge. You can take your pain medicine as needed per the instructions with the prescription. If you need lesser medicine, you can just take plain Tylenol or ibuprofen. Some medications cannot be taken together. You should not take Tylenol (acetaminophen) at the same time as Percocet, Tylenol 3, Lortab, or Norco. You should not take Toradol or naproxen (anaprox) at the same time as Aleve (naproxen) or Motrin (ibuprofen). You can use heat or ice on your abdomen if you need for further pain control.
6. You should be at pelvic rest until you have your follow up exam in the office and your physician instructs you that it is safe to resume pelvic activity. This includes sex, tampons, and douching.
7. You should not drive for 2 weeks after your surgery. If you can comfortably drive without hesitating to hit the brakes or check your blind spot, then you can drive yourself to your follow up appointment. Please do not drive until you feel comfortable behind the wheel and do not drive while taking pain medication that may slow your reflexes.
8. If you are having a concerning vaginal discharge, redness or heavy drainage from your incisions, a fever (single temperature of >101.5 or 2 temperatures six hours apart that are 100.5 or more), or other concerns regarding your surgical recovery, please contact us through the office at 615-778-0010. After hours the answering service will get you in touch with us.

Insurance and Billing

We will contact your insurance carrier prior to the surgery and get their statement of your expected benefits for the procedure. This is our best estimation of what your expected out of pocket expense may be. Payment for your copay, deductible, or any other out of pocket expense quoted for our services is expected the day prior to the procedure. Once the procedure is done, we will file your insurance claim for you. If there is an overpay on your part, we will refund you once your claim has been fully processed by your insurance company. If there is a balance due on your part, you will receive a bill from us for the remainder of the out of pocket expense that is due. Your insurance may send you an EOB (Explanation of Benefits) that states you still owe money, however, that money may have already been remitted by you to us prior to the procedure. Wait until you receive a bill from us, not the EOB, prior to making further payments.