Acute Care Surgery Service

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When to call:

Fever of more than 101 F.

- Redness, swelling, bleeding or drainage from the incision.
- Worsening pain If pain is still uncontrolled please call the office.

Follow-Up:

Please call our office at **973-322-2686** to schedule an appointment 1-2 weeks after surgery.

Our office is located at:
Saint Barnabas Medical Center
94 Old Short Hills Road
Livingston, NJ 07039
Department of Surgery Suite 1172 on the first floor.

Acute Care Surgery Comprehensive Recovery Guide - Appendix Surgery (Appendectomy)

What is the Appendix?

The appendix is a small pouch that hangs from the large intestine where it joins the small intestine.

What is Appendicitis?

Appendicitis occurs when the appendix becomes infected due to a blockage caused by hard stool, thick mucus or on rare occasions a tumor.

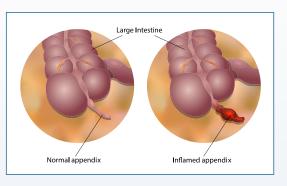
Signs of appendicitis include: abdominal pain starting at the naval and migrating to the right lower quadrant, fever, nausea, vomiting, and lack of appetite.

Appendicitis is diagnosed based on your symptoms, lab work and sometimes a CT scan or ultrasound.

When is the appendix removed?

If you are diagnosed with appendicitis it is recommended to have the appendix surgically removed (appendectomy) to prevent the appendix from rupturing and causing serious infection in the abdomen.

The surgery is usually done laparoscopically which involves several small incisions on your abdomen through which the surgeon places a camera and instruments to remove the appendix. In some cases the surgery may need to be done through a larger incision (open appendectomy). There are situations (abscess) in which you may be treated with antibiotics and scheduled to have an appendectomy at a later date.



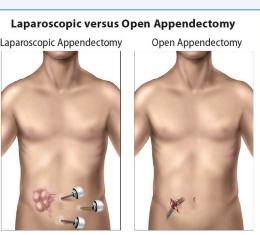


Image: American College of Surgeons

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	Time in hospital	Once Discharged
Pain Management	 IV and oral medications TAP Block (done by anesthesia) 	 Acetaminophen (Tylenol®) and Ibuprofen (Motrin®, Advil®). Alternate taking Acetaminophen and Ibuprofen every 4-6 hours on a regular schedule for the first 1-3 days. Then take as needed. Do not take more than 4,000mg of Acetaminophen per day or 3,200mg of Ibuprofen per day. Heat or ice packs. Do not place the pack directly on your incision, place a towel or clothing between the pack and your skin. If you need to cough, place a pillow over your abdomen for support. Pain after surgery is expected and normal. The pain is typically worse the first 1-3 days and will improve every day thereafter. Shoulder pain can occur after laparoscopic surgery.
Nutrition	 Drink carbohydrate loading drink 2 hours before surgery Post-op: Regular diet unless nausea/vomiting or if doctor indicates differently 	Regular diet – high-fiber foods Stay hydrated
Activity	 Out of bed 2 – 4 hours a day Ambulate at least 3 times a day in hallway 	 Walk as much as possible, this will help with gas pain. Do not lift more than 10-15 pounds for the first 4-6 weeks after surgery. Slowly work up to 30 minutes of moderate-intensity physical activity most days of the week. Do not drive if you are taking opiate pain medication.
Medications	 IV antibiotics IV and oral fluids Pain Medications Stool Softeners	Medications reconciliation/cross-checked and reviewed before discharge: • Stool softeners (Miralax®, docusate) • Simethicone (Gas-X®) as needed
Respiratory	Incentive Spirometer 10 breaths each hour when awake	Incentive Spirometer 10 breaths each hour when awake
Skin	You may shower next day after your surgery	 If you have surgical glue (Dermabond) covering the incisions it will peel off on its own around 2 weeks after surgery. If you have gauze and tape (Tegaderm) covering your incisions please remove this 1-2 days after surgery. Keeping these dressings on too long can lead to infection. Under the gauze will be small tape strips (Steri-strips) these will peel off on their own, do not remove them. Do not pick at surgical tape or glue. The steri-strips or dermabond can get wet. Do not scrub the incisions, let soap and water run over your abdomen. Do not soak in a tub or pool until you're instructed.
Testing	 Routine Blood work Pre-op Imaging (CT or ultrasound) Chest X-ray EKG if needed 	Repeat imaging or bloodwork as per doctor's orders.
Planning for Home	Discharge planning	 Schedule follow-up appointment with surgeon 1-2 weeks after surgery. Prescriptions for new or changed medications should be filled and reviewed with patient and family.