

# Robotic Hysterectomy Pre & Post-Operative Instructions

Please read all instructions carefully. Contact our office if you have questions before or after your procedure.

**PRE-OPERATIVE**

## Before Your Surgery

### 7 DAYS BEFORE SURGERY

- Stop taking aspirin, ibuprofen (Advil, Motrin), naproxen (Aleve), and all blood-thinning medications unless directed otherwise by your surgeon.
- Stop all herbal supplements (fish oil, vitamin E, garlic, ginkgo, St. John's Wort) — these can increase bleeding risk.
- Fill all prescriptions sent to your pharmacy in advance so they are ready when you return home.
- Arrange a responsible adult to drive you home and stay with you for the first 24 hours after surgery.
- Prepare your home recovery area: stock easy-to-eat foods, place frequently needed items within reach, and set up pillows for comfort.

### GLP-1 & WEIGHT LOSS MEDICATIONS — STOP 2 WEEKS BEFORE SURGERY

• **GLP-1 medications and weight loss injections** (e.g., Ozempic, Wegovy, Mounjaro, Zepbound, Victoza) must be stopped **at least 2 weeks before your surgery date.** These medications slow gastric emptying and significantly increase the risk of aspiration during anesthesia.

• **Certain diabetes medications** may also need to be paused before surgery. **Please contact our office before stopping any diabetic medication** so we can provide personalized guidance. Timing and specific medications depend on your individual regimen.

• If you are unsure whether a medication you take falls into either of these categories, please call our office and we will be happy to help.

## BOWEL PREPARATION — STARTING 2 DAYS BEFORE SURGERY

• **MiraLAX (polyethylene glycol):** Begin taking one dose (17g mixed in 8 oz of liquid) once daily, starting 2 days before your surgery. Continue until the morning before surgery.

• MiraLAX helps prevent constipation, which is a common side effect of anesthesia and narcotic pain medications used during and after your procedure.

• You may mix MiraLAX into water, juice, or any clear beverage. It is tasteless and dissolves completely.

## NIGHT BEFORE SURGERY

• Do not eat or drink anything after midnight — including water, gum, or mints — unless given specific instructions otherwise.

• Shower with regular soap, paying extra attention to the abdominal area. Do not use lotions, perfumes, or powders afterward.

• If you were given a bowel prep solution or enema, follow those specific instructions now.

• Lay out comfortable, loose-fitting clothing to wear home from the hospital.

• Remove nail polish from at least one finger and one toe so monitoring equipment can be used accurately.

• Get a full night's rest if possible.

## DAY OF SURGERY

• Arrive at the surgical facility at your scheduled check-in time (typically 1–2 hours before the procedure).

• Take only the medications your surgeon specifically told you to take the morning of surgery, with a small sip of water.

• Do not wear jewelry, contact lenses, or makeup. Leave all valuables at home.

• Bring your photo ID, insurance card, and a complete list of all current medications.

• Inform nursing staff of any allergies or changes in your health since your last visit.

### IMPORTANT NOTE ON SMOKING

Smoking significantly increases your risk of complications, including poor wound healing and respiratory issues. Please stop at least 2 weeks before surgery. Notify your surgeon if you have not been able to quit.

## FIRST 24-48 HOURS

- Rest at home. You may feel groggy or nauseated from anesthesia — this is normal and will pass.
- Keep your incision sites clean and dry. Leave dressings in place until instructed to remove them.
- Start with clear liquids and advance to soft foods as tolerated. Avoid heavy or greasy meals.
- Begin gentle walking around the house as soon as you feel able — this helps prevent blood clots.
- Take your prescribed pain medication as directed. Do not wait until pain is severe to take it.
- Shoulder or upper back discomfort from surgical gas is common — heating pads and gentle walking can help.

## BOWEL & GAS MANAGEMENT — FIRST WEEK AFTER SURGERY

- **MiraLAX (polyethylene glycol):** Continue taking one dose (17g) once daily for **1 full week** after surgery. This helps keep bowel movements soft and prevents straining, which is important for your healing.
- **Gas-X Extra Strength (simethicone 125 mg):** Take 1 softgel or chewable tablet **4 times daily** for 1 full week after surgery to help relieve abdominal bloating and gas pain from the CO<sub>2</sub> gas used during your laparoscopic procedure.
- Both medications are available over the counter at any pharmacy. You may begin them as soon as you are home from surgery.
- If you have not had a bowel movement within 3 days after surgery, contact our office.

## ACTIVITY GUIDELINES FOR THE FIRST 6 WEEKS

### YOU MAY

- ✓ Walk short distances, gradually increasing each day
- ✓ Climb stairs slowly as needed
- ✓ Shower after 24–48 hours (no baths)
- ✓ Drive after 2 weeks if off narcotic pain medication
- ✓ Return to desk work in 1–2 weeks as tolerated

### DO NOT

- ✗ Lift anything over 10 lbs for 6 weeks
- ✗ Insert anything vaginally (tampons, douches) for 8 weeks
- ✗ Have sexual intercourse for 8 weeks
- ✗ Soak in baths, pools, or hot tubs until cleared
- ✗ Perform strenuous exercise or heavy housework

## WOUND CARE

- Small laparoscopic incisions (usually 3–5 sites) may be closed with sutures, staples, or surgical glue — follow your surgeon's specific wound care instructions.
- Keep incisions clean and dry. Gently pat them dry after showering.
- Do not apply creams, ointments, or powders to incisions unless specifically instructed.
- Mild bruising and swelling around incision sites is normal and will resolve on its own.
- Some vaginal discharge (pinkish or brownish) is expected for several weeks as the vaginal cuff heals.

## MEDICATIONS & FOLLOW-UP

- Take all prescribed medications as directed, including stool softeners to prevent straining with bowel movements.
- Do not take aspirin or anti-inflammatory medications (Advil, Motrin) for at least 1 week unless approved by your surgeon.
- If hormone replacement therapy (HRT) was discussed with you, follow the specific instructions provided.
- Your post-operative appointment is typically scheduled 2–4 weeks after surgery — confirm the date before leaving the facility.

**⚠ GO TO THE ER OR CALL 911 IMMEDIATELY IF YOU EXPERIENCE:**

Heavy vaginal bleeding (soaking more than 1 pad per hour) · Fever over 101°F (38.3°C) · Severe or worsening abdominal pain · Leg swelling, redness, or pain (possible blood clot) · Difficulty breathing or chest pain · Signs of infection at incisions (increasing redness, warmth, pus, or foul odor) · Inability to urinate, or no bowel movement after 3 days

**EMOTIONAL RECOVERY**

It is completely normal to experience a wide range of emotions after a hysterectomy — including grief, relief, or mood changes. If your ovaries were removed, you may also notice symptoms of menopause. Please talk openly with our team about how you are feeling. We are here for you throughout your entire recovery journey.

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These instructions are general guidance and do not replace the individualized advice of your surgeon. Always follow the specific instructions given by your physician.