

Abdominal Surgery Post-Operative Instructions

General Guidelines



Diet

- For the first 2 weeks, start with a soft diet. You may return to a normal diet after that.
- Eat small, frequent meals. Try 6 small meals a day rather than 3 large meals.
- Drink adequately. Take 8 glasses of plain water daily.
- Alcoholic beverages are fine but in moderation.
- Try to finish your proteins to aid the recovery process.

Choose	Avoid*
Carbohydrate	
White rice, white bran, noodles, pasta, peeled potatoes	Brown rice, wholemeal bread, wholemeal pasta, wheat bran, potatoes with skin, spicy/greasy/fried food
Protein	
Fish, skinless chicken, lean meat, egg, tofu, tempe, milk and dairy products	Legumes (can be taken in small amounts)
Vegetables	
Cooked vegetables (½ cup per meal)	Raw vegetables
Fruits & Sugar	
Peeled fruits, canned or cooked fruits, seedless fruits	Fruits with skin, fruits with seeds, high-sugar food and beverages

**reintroduce gradually to your diet. Choose one at a time.*

If you are feeling bloated, observe the following:

- Avoid gas-producing food and beverages such as fizzy drinks, broccoli, cauliflower, cabbage, sweet potato, corn.
- Avoid chewing gum and drinking with a straw.
- Take small bites and chew thoroughly.

Activity and Wound Care

- Avoid activities that cause pain. Walking or climbing stairs is recommended.
- Avoid lifting weights greater than 10 kg or straining abdominal muscles (i.e. sit-ups, press-ups) for 2-3 months.
- Unless instructed otherwise, leave incisions uncovered. Showering or bathing daily is fine (pat the wound dry afterwards).
- Do not drive for 2 weeks after discharge. Do not go alone the first time and do not drive after taking pain medications.

Medication

- Pain: Celebrex, Arcoxia, Ultracet, others
- Anti-diarrhoeal: Imodium 2 mg caps, Lomotil 2.5 mg tab — take either Imodium or Lomotil 30 minutes before meals and at bedtime. As diarrhoea improves, take it less frequently and as needed for loose stools (maximum 8 a day of each).
- Others: Antibiotics — Flagyl/Cipro/Bactrim/Zinnat/Amoxycilin/others (as instructed)
- Resume any medication your own doctor has prescribed (unless instructed otherwise).





Possible Problems

- Bowel function: Bowel function tends to be unpredictable (wind, diarrhoea, seepage or cramps; good days and bad days) up to 6 months after bowel surgery. It takes your body time to adjust. Avoid foods that make you feel worse.
- Bowel obstruction: Abdominal cramps, bloating, nausea, vomiting, constipation and not passing wind. When these symptoms develop, contact your doctor for advice. If the symptoms are mild, you may restrict dietary intake to liquid only and avoid solid food. If symptoms persist beyond 24 hours or if they are severe, you must call and inform us.
- Wound infection: Excessive swelling, redness, drainage or severe pain around the incision should be reported.
- Infections related to surgery: Fever, especially if associated with abdominal discomfort, nausea, and the feeling of being unwell should be reported.
- Stoma: If you have a stoma, make sure you are comfortable with caring for it before discharge. Bananas, peanut butter, tapioca, applesauce, and marshmallows may thicken the stoma output. Get help if there is difficulty with keeping the stomal appliance on for at least 24 hours. If there is recurrent bleeding, severe pain and swelling around the stoma, or if the stoma stops functioning or the stoma output is more than 1,000 ml in 24 hours, you must call and inform us.
- Dehydration: Decreased urine output or dark urine is a sign of dehydration. Drink at least 8 glasses of liquids a day.



Appointment and Contact

Follow-up appointments with your surgeon are usually between 1 to 2 weeks. If not already organised prior to discharge, call (see below) for scheduling.

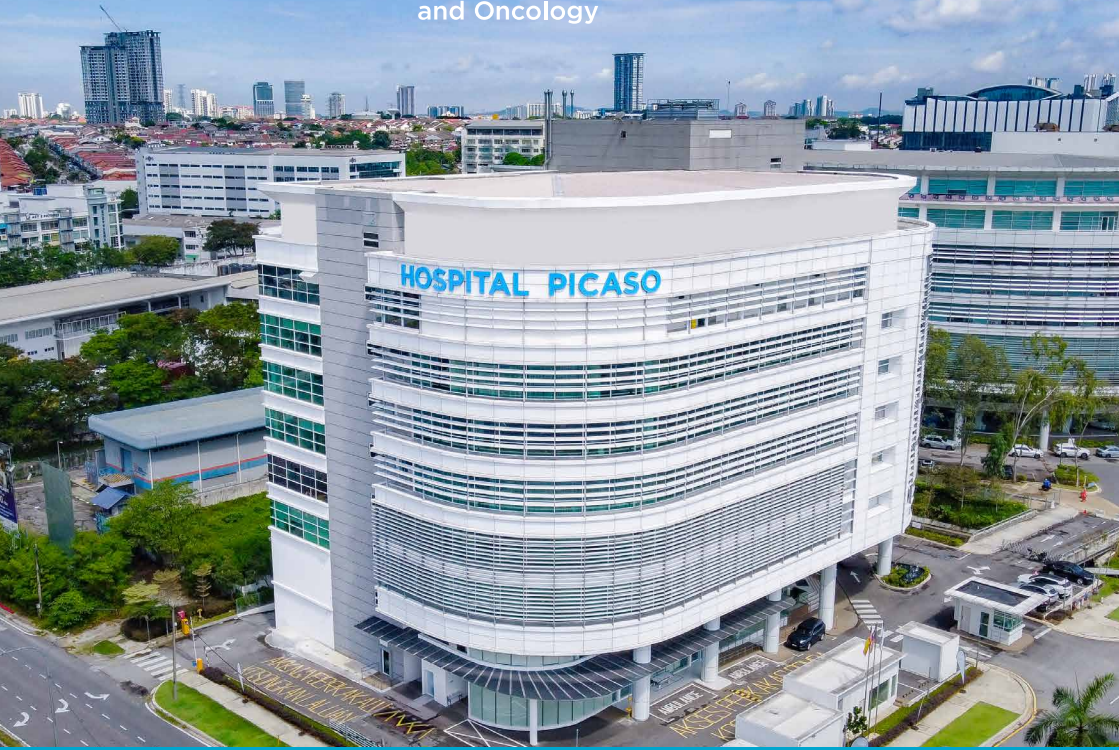
If you encounter any problems, please contact:

Dr Luqman Mazlan's clinic	+603 7457 2825
Dr Cha Kar Huei's clinic	+603 7457 2898
Dr Chong Hoong Yin's clinic	+603 7457 2887
Dr Yeap Chee Loong's clinic	+603 7457 2833
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