



Care After Gynecological Surgery

This handout offers recommendations for the care of your child or teen after a gynecological surgery.

How do I care for the incision (wound)?

- The incision will be covered with Steri-strips (small tapes). Steri-strips stay on until they are curling at the edges and look like they are ready to fall off.
- Your child or teen should not take a bath or go swimming until the doctor says that it is OK. This will be about 2 to 4 weeks after her surgery.
- Your child or teen may shower. She should not scrub the incision. The water can run down over the incision and a little soap may be used if needed.
- Cover the steri-strips with saran wrap or a plastic sheet held on by tape when showering. Do this for the first 3 or 4 days after surgery to keep them from falling off.
- The incision should be dried after a shower. A blow dryer on a cool setting can be used to do this.

Will my child or teen be in pain?

- After a surgery some pain is normal. Your child or teen's incision may be sore if she is very active. Sharp, shooting pains in the incision that last a few seconds are a normal part of the healing process.

What medicine will my child or teen take after the surgery?

- Your child or teen may be given a narcotic pain medicine (such as oxycodone) along with ibuprofen, acetaminophen (Tylenol), and a stool softener when she goes home.
- Use the ibuprofen and/or acetaminophen regularly to control the pain. Save the narcotic pain medicine for when your child or teen is very active or at bedtime to help her sleep. Your teen should not drive a car while taking narcotic pain medication.
- Decrease the amount of pain medicine slightly every day, until your child or teen no longer needs it.
- Pain medicine makes some people constipated. Your child or teen can take the stool softener to help with that.
- If your child or teen was given a numbing cream, she can rub it on when needed. She should wash her hands before and after using the numbing cream.

Will my child or teen have constipation after surgery?

- Your child or teen may not have a bowel movement before leaving the hospital. She should have one a few days after leaving the hospital. As long as she is passing gas and does not have nausea, a few days longer is OK.
- Narcotic pain medicine causes constipation. You can give your child or teen a tablespoon of milk of magnesia the third and fourth night after surgery. This will help her have a bowel movement if she has not had one yet.

What can my child or teen eat after surgery?

- Your child or teen can eat whatever sounds good. Bland and softer foods are recommended the first 2 to 3 days at home. Raw vegetables and fried food are harder to digest and may cause constipation and gas pain.

When can my child or teen return to normal activity?

After surgery your child or teen:

- May feel tired. She may need to take morning and afternoon naps for the first few days after surgery. She may feel tired even into the second week after surgery. After major surgery the body needs extra energy to heal.
- Can walk around the day after surgery. She will not be able to walk really long distances for about a week.
- Can climb stairs right away. Going upstairs will be slower than normal and she may need to stop and rest. She should be extra careful when walking down stairs.
- Should become more active each day. If she is too active one day, she may be extra tired the next day.
- Can return to school or sedentary (not active) work within a week, but she may be tired. She may need to take more time off after major surgery.
- Should not play sports or take part in physical education class for 2 to 4 weeks after her surgery.
- Should not lift anything heavier than 10 pounds for the first 6 weeks after major surgery, unless the doctor says it is OK.

If your child or teen had a procedure in the vagina or the entry to the vagina (labia or hymen), she:

- Should not put anything into her vagina for the first 6 weeks after surgery.

If your child or teen had a laparoscopy (a procedure used to view the ovaries and the outside of the fallopian tubes and uterus, with a scope inserted through a small incision below the woman's navel) or had ovaries or a cyst removed, she:

- Can use tampons 2 weeks after her surgery. She should not put anything else in her vagina for 6 weeks.

To Learn More

- Adolescent Gynecology
206-987-3005
- After hours on-call OB/GYN
206-987-2000
- Ask your child's healthcare provider
- www.seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your child's nurse.
- From outside the hospital, call the toll-free Family Interpreting Line 1-866-583-1527. Tell the interpreter the name or extension you need.
- For Deaf and hard of hearing callers
206-987-2280 (TTY)

When should I call the doctor?

Call the Adolescent Gynecology clinic at 206-987-3005 during normal office hours (Monday to Friday, 8 a.m. to 4:30 p.m.), or call the paging operator at 206-987-2000 or 866-987-2000 after hours and on weekends and ask for the on-call OB/GYN (obstetrics and gynecology) doctor if your child or teen has any of these signs or symptoms:

- Fever of 101.4° F or higher
- Severe vaginal bleeding
- Nausea and vomiting
- Severe stomach pain that won't go away with pain medicine. The pain is deep and is getting worse.
- Skin around the incision is red, is draining pus, blood, or a lot of watery liquid

Seattle Children's offers interpreter services for Deaf, hard of hearing or non-English speaking patients, family members and legal representatives free of charge. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201.

This handout has been reviewed by clinical staff at Seattle Children's. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's healthcare provider.

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