Recovery/Post-operative Instructions: 
Cholecystectomy (Removal of Gallbladder)

Diet/Bowel Care

- No restrictions, you may resume your regular diet.
- Advance your diet as you can tolerate, starting with bland (non-greasy, non-spicy) food, in small portions, that is easy to digest for first 2-3 days.
- Drink plenty of fluids (> 2 Liters per day) to keep well hydrated as your body is recovering (juices, water, broth, sports drinks).
- Some patients, after having their gallbladder removed, may have loose stools (diarrhea) after meals, especially fatty meals. This usually resolves within a few months as your body adjusts to not having a gallbladder. Talk to your doctor if you are having more than 3-4 loose stools per day.
- Having abdominal surgery and narcotic pain medications can cause your bowels to slow down, and can cause constipation. You should start taking a stool softener (Colace or generic Ducosate Sodium) 100mg twice daily (available over the counter), starting the day before your surgery.
- If you go more than 2-3 days without a bowel movement, you should take 2 Tablespoons of Milk of Magnesia (available over the counter) 3 times per day until your first bowel movement, and then stop.

Medications

- Pain medications
  - You will be given a prescription for pain medication (narcotics); it is important to take these, as instructed, to keep your pain controlled.
  - The most commonly prescribed narcotics include: Percocet, Oxycodone, Norco, Vicodin, Tylenol with Codeine, or generic versions of these.
  - The narcotic pain medication can make you sleepy and dizzy – you should not drive a vehicle while taking narcotics, and you should not drink alcohol while taking them. Narcotics can also cause nausea in some people so it is best to take them with food. Some people may have itching with narcotics; unless you have a rash, this is not an allergic reaction, just a side effect. You can take Benadryl to help with the itching.
- Regular Prescription Medications
  - You may resume your regular medications immediately after surgery (either in the evening after surgery or the following morning), unless told otherwise by the surgeon.
  - If you were given antibiotics, take them as instructed to completion.
General Wound Care

- Keep the dressings clean and dry for first 48 hr. (no showering). After 48 hrs., you may remove the outer bandages over your incisions and you may shower; wash and dry wounds gently with soap and water; no dressing needed after first 48 hrs.
- No soaking in tub or pool for 2 weeks following surgery.
- If you have staples on your incision, they will be removed at your follow up appointment.
- If you have steri-strips (white paper tapes), leave these on until they fall off on their own.
- If you have “skin glue” over the incisions, this will wear off in about one week; do not try to scrub it off.
- You may use ice over the incisions for the first 24 hrs., 30 min. on/30 min. off while awake, to help with pain relief.
- Some bruising and soreness is expected around the incisions. Remember we had to cut through the muscles.
- Some people, after having laparoscopic surgery, may experience pain in their shoulders after surgery. This is due to the carbon dioxide gas, which is used to open the inside of the abdomen during surgery, pushing up on the diaphragm. This should resolve on its own in 24-48 hours as the excess gas is absorbed.

**If you are a smoker, you should quit smoking to help with your overall health and recovery and with your wound healing.**

Activity

- You may resume normal activities as you feel you are able. You should be up walking around your house several times per day after surgery. This improves circulation and helps prevent complications after surgery. Walking outside and doing stairs are acceptable, and you can increase your activity as you can tolerate.
- Use a small pillow, hug it against your abdomen, to help brace your incisions if you need to cough or sneeze, and to do deep breathing exercises.
- Roll to one side and use your arms to push yourself up when getting in/out of bed or a chair, in order to not use your abdominal muscles.
- No lifting more than 20 pounds (or lesser weight that forces you to use your abdominal muscles) and no aerobic exercise (other than walking) until your follow up office visit (about 2 weeks after surgery). Further restrictions will be discussed at that time.
- You may return to work or school as you feel you are ready, with lifting restrictions in mind if you have a labor-intensive job.
- NO DRIVING FOR 24HRS AFTER SURGERY AND WHILE TAKING NARCOTICS. You may drive when you feel that you can safely operate the vehicle (think about turning or stopping suddenly, maybe take a test drive in a safe area first).
**Call the surgeon's office: (303-689-6560) if you experience any of the following:**

(If you call after hours or on the weekend you will get the answering service and you will speak to the doctor on-call)

- Temperature higher than 101.
- Any chest pain or difficulty breathing.
- Redness (more than a ¼ inch around the wound)/drainage/bleeding/pus from wound(s) or IV sites.
- Increased pain at incisions. Some pain is expected but should get progressively better over about a week.
- Worsened abdominal pain or vomiting or increasing abdominal distension (bloating).
- Any other concerns or questions regarding your surgery or recovery.

**Follow-up Visit**

For follow up appointment, call our office at 303-689-6560, to make an appointment with your surgeon within 10-14 days. Please call with any concerns regarding your surgery or recovery.