

Postoperative Instructions: Anal Fistula Repair

1) Start with light liquids to make sure your stomach is settled following the anesthetic. If you feel well, you may advance your diet to a regular diet, as tolerated today. It is a good idea to avoid any roughage, spicy foods and dairy products in the first week following surgery. A lot of roughage can make for a bulky bowel movement that is difficult to pass. Spicy foods can cause more acid in the stool and irritate your surgical area and dairy products can be very constipating. At any time you experience any nausea or vomiting; simply stop and take ice chips and light liquids until the nausea and vomiting resolves.

2) Limit your activity the first two to three days following surgery. although you can probably not harm yourself by being too active early, unless you were to fall on the area; the more active you are the more pain and swelling you will have and the more uncomfortable you will be. If you rest as much as possible the first few days, you will have less pain and swelling; therefore, much less discomfort. As the days progress and you become more comfortable, you can begin to be up on your feet, sitting and riding as tolerated. As soon as you are no longer requiring any pain medications and are essentially pain free, you may drive a car.

3) You may remove the bandage on _____. When you remove the bandage it is a good idea to begin sitting in a Sitz bath. A Sitz bath can be done by filling your bathtub with a few inches of warm, comfortable water. You should sit in that tub of water for 10-15 minutes. You may do this four to six times per day. Warm water is all that is necessary in the tub and there is no value to adding Epsom salts or detergent. It is then a good idea to use a peripad (sanitary napkin) over the area to collect any drainage. There will be some bloody, mucus drainage for several days that can be collected in the peripad. The pad should not be taped to your skin and can be held in place by your underclothing and is just designed to collect drainage. You will find that your wound is open and not stitched together. This is to allow the incision to heal from the inside out. Do not place any ointment over the wound, but do use a peripad to collect any drainage. If the pad sticks to your wound, simply soak it off in the next Sitz bath.

4) Take your medications as prescribed for pain and nausea. You may be given more than one medication for pain and if directed, you may take both of them together as needed. It is a good idea to take your pain medications regularly the first few days so that you never let yourself experience much discomfort. You may take the nausea medication the first day or so, following surgery if you have any nausea from the anesthetic. If you have nausea from the pain medication you may take the nausea medication before or with the pain medication.

5) It is important that you take your stool softener two to three times per day as prescribed. This will keep your bowels soft, lubricated and will have a mild laxative effect. In addition, if you do not have a bowel movement by _____, you should begin to take Milk of Magnesia, two to four tablespoons per day until your bowels move. We do not want to go too many days without a bowel movement, as that can create a bulky bowel movement that can be uncomfortable to pass. Obviously, do not insert any suppositories or give any enemas unless directed by the nursing staff or myself.

6) It is very common the experience some bleeding following this surgery. This will be particularly true when you have a bowel movement. This is normal. However, profuse bleeding or the passage of large amounts of clots without stoppage of the bleeding is not normal. If this occurs you should notify me. This is most likely to occur approximately 7-10 days following the surgery. If it occurs at this time, please notify me immediately.

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7) Infections are very rare following the surgery, but can occur. Should you experience a fever greater than 101 F, spreading redness, or a crackling sensation under the skin in your bottom or genitalia, please notify me immediately. You may, or may not have been prescribed antibiotics following surgery. Even if you are taking antibiotics and these signs of an infection occur, please notify me.

8) Following a bowel movement, you should gently blot the area dry with a tissue paper. In some cases you may want to use a moistened wipe to continue cleaning yourself. In the early days following surgery, you will find it most comfortable if you simply get into the shower or Sitz bath following a bowel movement and let the warm water gently wash the area clean.

9) It is extremely common for you to retain urine following this surgery. It is a good idea not to overfill your bladder in the first 24 hours with fluids, as an overfilled bladder is much more difficult to empty. If you do experience a fullness in your bladder and cannot empty it, you should simply sit in the hot Sitz bath try to empty your bladder in the tub. If you still cannot empty your bladder and feel as though you are becoming quite distended, please notify the outpatient nursing staff or me.

10) Call my office for an appointment as soon as possible. We would like to see you for a return visit in approximately 7-10 days, but do call for an appointment as early as possible.

11) It may be necessary for you to contact me following your surgery to ask questions regarding your surgery or care, or to have medications refilled. Although we will be available to take your calls in the evening hours; as a courtesy to us and to assure you better service since resources are limited after hours, please call as early in the day as possible. If you think you are having a problem with your incision or need medical care, it is better to call earlier in the day; not only to allow us to see you if necessary, but to make sure that your pharmacy is open. If your medications are running low, please call us for refills before they run out so that you do not have to go for an extended period of time without them.