

Hernia Repair

i Important information for patients having hernia repair surgery.

About this booklet

The purpose of this booklet is to give you information about hernia repair and the care which you will receive from staff.

About your visit to the Golden Jubilee

During your stay with us, our primary concern will be your comfort and return to good health. If you have any questions or concerns, our staff will be pleased to assist you in any way they can. If you have any questions or concerns regarding the procedure or anything contained in this leaflet, please discuss this with a member of the nursing staff before discharge.

For hernia repair, you will be admitted as a day case to the Surgical Day Unit. Please ensure you have an escort to take you home that evening and a responsible adult to stay with you overnight and for the first 24 hours. A small number of patients require to stay overnight. If the surgeon makes this decision, please be appropriately prepared for this.

Admissions

The booking office staff will make admission plans with you and will make this as easy as possible.

You may have been asked some personal details before you arrive which we may need to ask you again at admission. These may include contact numbers, your GP's name, address and telephone number and other relevant information.

If you would like to be chaperoned at any time during your preoperative assessment or any other medical assessments, please tell a member of nursing staff.

What is a hernia repair?

The operation for hernia repair involves repairing a weakness or defect in the abdominal wall. This can be done either using keyhole surgery or through an open wound. Sometimes a strong, flexible patch, known as mesh, will be placed over the defect in the abdominal wall.

Before surgery

You will be asked to attend a pre-assessment clinic to ensure that you are fit for surgery and anaesthetic. This will either be at your own local hospital or here at the Golden Jubilee National Hospital.

You will be:

- asked about your past medical history;
- asked to bring all the tablets you are taking; and
- asked to provide a sample of urine and a blood sample will also be taken by a Nurse.

If you are unable to attend this assessment please let us know.

What to expect on admission

You will be introduced to your nurse who will complete the paperwork, discuss your procedure and answer any questions.

You will meet the ward doctor who will examine you and ask some more questions.

You will meet the anaesthetist who will again ask more questions and answer your questions. You may be prescribed a pre medication (tablets). The nurse will give you these before you go to theatre.

You will meet the surgeon who will explain the procedure and answer any questions and ask you to sign the consent form for your procedure. You will have the opportunity to ask any further questions regarding your procedure.

Day of surgery

You will be asked to change into the theatre gown and pants provided. You will then be taken to pre op by your nurse or the theatre nurse. You may be walking to theatre but if you require a trolley or chair, this will be made available for you.

You will be met by the theatre staff and the anaesthetist. After insertion of a needle in the back of your hand for your anaesthetic, you will be taken through to theatre.

After your procedure you will be taken through to recovery until it is time for you to return to the ward.

When returned to the ward, you will be offered something light to eat and drink. The nurse will monitor your vital signs and wounds until all discharge criteria has been met and you will then be prepared for discharge.

Going home

Rest this evening and avoid strenuous activities. A competent adult should stay with you overnight. You should eat and drink normally as able (unless otherwise advised).

In the first 24 hours, you must not:

- drive;
- drink alcohol; or
- use machinery.

Take your usual medications and any that you may have been given by the nurse today. It is normal to feel some pain after surgery. You will be prescribed painkillers during your stay in hospital, and will be given some to take home.

Ongoing recovery

You may feel drowsy or weak for several hours after your surgery/ anaesthetic for up to 24 hours.

Common side effects are:

- dizziness
- drowsiness
- nausea/vomiting
- sore throat
- general aches and pains

If a follow up appointment is required, you will be advised of this on discharge. You can contact the hospital immediately after discharge for any advice.

Contact your GP if:

- You have severe pain not relieved by medication.
- You have excess bleeding from the wound site.
- You have extreme redness or swelling around the wound site or drainage of pus.
- You are unable to pass urine.
- You have continual vomiting.
- You have a fever.

In the event of an emergency, you should go to your nearest Accident and Emergency department.

Recovery advice and wound care

- You will feel tired for the first few days following surgery. Rest for some of the time, but gradually increase your activity until you feel able to resume normal activities; this will take a few weeks. You should not go to your bed as if you were ill. Avoid heavy lifting for six weeks following surgery. It is advisable to wear your support stockings during the day until your activity has increased to near normal levels.
- You may return to driving when you can apply the brakes and perform emergency stops without pain. Check with your car insurance company.
- Continue to take the painkillers given to you on discharge.
- You will normally need 2 weeks off work depending on how well you recover from your surgery. Depending on what job you do, you may require longer, e.g. if you carry out heavy physical work.

When can I bath or shower?

It is advised to have a shower 24 to 48 hours after surgery. Avoid bathing for the first week after surgery as soaking your wounds could loosen the dressings and increase the likelihood of infection. It is also advisable to avoid scented, soap products, shower gels, talcum powders near your wounds. Once your wounds are exposed, after showering, lightly pat your wounds dry with a clean towel.

Caring for your wound

If you have keyhole surgery you may have three or four incisions or cuts in your abdomen. If you have an open hernia repair you will have one wound. Please avoid getting the outer dressings wet for 48 hours after surgery. If your dressing gets wet during this period, replace with the dressings supplied by the ward nurse on discharge. Leave the dressings on for five days then remove if the wounds are clean and dry, no further dressing is required.

Your wounds may be closed with steri- strips, glue, sutures or clips. You will be given instructions regarding removal of sutures or staples if required. If there are steri-strips covering your wounds, they normally fall off within seven days.

Bruising is expected following hernia repair, and in gentlemen the bruising can develop around the scrotal area. If the bruising is particularly excessive and increasing pain and discomfort, please make an appointment with your GP or Practice Nurse for a wound check.

Changing the dressing

Ensure your hands are clean and that the area you have placed the dressing on is also clean, a table or tray would be sufficient. Remove the dressing and air dry or dry with a clean towel do not be tempted to cleanse the wound with anything, once dry replace the dressing.

Infection or Sepsis

If you feel unwell, develop a temperature, the area around the wound becomes inflamed (red/hot), discharge from wound or any odour it is advisable that you make an appointment for a wound check with your GP nurse. Do not delay in having any of these symptoms checked.

Contact

If you need further assistance or have any questions, please contact the day unit on 0141 951 5400 during Monday to Friday 7am to 8.30pm. Out of hours you should contact the Senior Nurse via the switchboard on 0141 951 5000.

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