## **Laparoscopic Adrenalectomy**

#### WHAT TO EXPECT DURING YOUR HOSPITAL STAY

This information helps you understand your hospital stay so you have realistic expectations for the first few days after surgery. Following the guidelines on this sheet will help you recover from your surgery as quickly as possible and reduces the risk of some complications.

### What to expect on a day to day basis:

#### <u>Day 0: the afternoon and evening of surgery:</u>

Once you wake up you should start your breathing and leg exercises. You will be encouraged to sit in a chair, and to take a short walk in the hallway. Please ask for assistance if needed but it is important to begin physical activity as part of your recovery.

You will be allowed to drink liquids once you are fully awake from the anesthesia and without nausea. Drink only what you can comfortably tolerate.

### Day 1: the first post-op day:

Keep doing the breathing exercises. Get out of bed and walk at least five times.

Your diet will be advanced to a regular diet at some point during the day. Drink or eat only what you can comfortably tolerate.

If you have a tube in your bladder it will be taken out this morning

You will be started on pain pills first thing in the morning. Use your oral pain medications to keep yourself comfortable. You will likely have some combination of the following medications for pain control:

Ibuprofen 400-800 mg 3x per day Tylenol 650mg 4x per day Oxycodone as needed for severe pain

You may be allowed to go home later in the day, depending on your recovery. If not, don't worry. Everybody is different and sometimes it takes another day or two before you are ready for discharge.

# Day 2: the second post-op day:

If you are still in the hospital you will probably be going home today.

Keep doing the breathing exercises. Get out of bed and walk the halls.

You may shower tonight either at home or in the hospital. The small little bandaids (steri-strips) will stay on until they fall off by themselves in 1-2 weeks.

### **Specific points:**

<u>Breathing exercises:</u> These are extremely important. You should do these every hour during waking hours, taking at least ten deep breaths. This expands the small air sacs in the lungs and minimizes postoperative fever and pneumonia. Continue these for another few days once you go home.

<u>Exercise</u>: Getting up and walking after surgery aids recovery in many ways. Much of the pain after major surgery is from muscle spasms. Getting out of bed, sitting and walking help you loosen up and actually reduce your pain. This also helps your breathing and quickens the recovery of your bowel function. Exercise will not damage your wound or the surgical area in any way.

<u>Bowel activity:</u> Surgery tends to paralyze the bowel for a variable period of time. This period is minimized by getting active after surgery and using the set of pain pills we have ordered. Standing and walking promote return of bowel function; lying in bed does not. Minimizing your use of intravenous pain medications also tends to help your bowel recover.

<u>Day of discharge:</u> Expect to go home on the first or second postoperative day. Make provisional arrangements in advance unless instructed otherwise.

Going home: When you go home, expect to be able to drink and eat freely. You will be on oral pain medications for any residual pain or discomfort. You will be passing flatus and may have moved your bowels. If you live alone, you may wish to make arrangements with family or friends in advance to stay with them for a few days. If you live a long distance away from USC, you may wish to make arrangements with a local hotel to stay nearby for a few days before going home.

Upon discharge please call our office to make a follow-up appointment in 2-3 weeks.

Should any questions or concerns arise, please call our office: 310-829-8751

Monday - Friday: 8am -5pm

Weekends, Holidays or after-hours, you may call 310-829-8751

If you are not able to reach a live person, please call the hospital operator at and ask for **Dr Goldfarb or the Surgical Oncology Resident on-call.**