

Looking after yourself after minor / day case gynaecological surgery

Information for patients



Leeds Centre for
Women's Health

Welcome to J24, Gynaecology day care ward.

This leaflet gives you advice on what to expect after your procedure and how to look after yourself as you recover.

How to contact us

- Please see page 11 for contact details.

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Before you leave hospital

Observations on the gynaecology ward

Immediately after your surgery you may have an oxygen mask on your face. The nurse will frequently monitor your blood pressure, pulse, breathing, and temperature. The nurse will check any wound dressings and for any vaginal bleeding and make sure that you are comfortable. You may have a wound drain or gauze pack in your wound, which is usually taken out the next day by the nurse.

Pain control

It is important that you are comfortable, as the sooner you can move and walk about, the quicker and more straight-forward your recovery will be. If you have any discomfort or pain, let the nurse know. We can give you injections, suppositories or oral tablets to make you more comfortable.

Following some operations (especially laparoscopy or key-hole surgery) women can experience pain that they feel in their shoulders. This is normal and is caused by 'trapped' gas, which has been put into the belly during the operation. This should not last long and can be relieved by medicines, sitting upright and walking about. If the pain continues, is severe, or affects your breathing, please inform your nurse, or if you have gone home, contact your GP.

Eating and drinking

The anaesthetic may make you feel nauseous (sick). If this happens we can give you tablets or injections that will help. Drinking straight after your operation may make you feel sick. A mouthwash or small sips of water may help.

You may have a drip going into one of your veins to make sure you get enough fluid while you are not able to drink normally. When you are drinking enough fluids and no longer feel sick, we will remove the drip. We will tell you when you can start to eat.

Passing urine

A nurse will help you to walk to the toilet, or help you out of bed to use a commode (a portable toilet) until you are able to walk to the toilet yourself. If you have any pain when you pass urine, or if you are unable to pass urine, please tell the nurse looking after you.

During some operations the doctor may put a catheter into your bladder. A catheter is a thin flexible tube that drains urine into a bag by the side of your bed. The nurse will empty this. The catheter is usually removed during the operation or the next day by a nurse.

Bowels

Your bowel habit should not be affected, but if you are having difficulty you can have some medicine to help you open your bowels. You will also find it helps if you:

- Drink lots of fluid.
- Eat a high fibre diet (e.g. wholemeal or granary bread, fruit, vegetables, cereals).
- Keep having short walks and staying mobile.



Mobility

We will encourage you to take it easy after your operation but it is important to start getting up and walking around as soon as you can. This will relieve pressure on your heels and bottom and help prevent blood clots forming in the veins in your legs.

When getting out of bed it may help if you bend your knees, turn onto your side, let your legs drop off the edge of the bed and use your arms to push yourself up into a sitting position on the side of the bed. Sit on the side of the bed for a few minutes before standing up.

Hygiene

On the morning after your operation you can have a wash, shower or bath, but you may prefer to wait until the afternoon. After you go home we suggest that you do not lock the bathroom door so that the person looking after you can help you if needed.

We advise you not to use talcum powder around any wound area, and not to use highly perfumed products when washing. We also recommend that you do not douche (wash inside the vagina).

Wounds on your tummy

If you have had minor keyhole surgery you will probably have 2 - 4 small cuts on your tummy which will have small dressings covering them. The nurse will check your wounds. These wounds usually heal very quickly and may have small stitches that will need to be removed about 5-7 days after your operation. You will be advised if you need to make an appointment with your practice nurse at your local surgery to have your stitches taken out.

Before you leave the ward we will give you a letter to give to the practice nurse explaining your operation and if / when the stitches need to be removed.

Some patients will have stitches that dissolve and usually do not need to be removed. However, sometimes the stitch does not dissolve and remains in the skin. If you can still see the stitch after 10 days you could make an appointment with your practice nurse to have it removed.

Once you are at home it is important to keep the wounds clean and dry. After a bath or shower, rinse away any soap from your wounds and dry them carefully. You may find it more comfortable to cover the wounds with a small plaster. If you do, the plasters will need to be changed at least daily. However, exposing the wounds to the air is helpful. If you have any concerns about your wounds (for example, if they start to leak fluid, or if the edges of the wounds come apart), please see your GP or the practice nurse at your surgery.

Vulval wounds

It is important to keep the area clean and dry. Wash, bath or shower at least daily and dry carefully with a clean towel. If you had a drain or gauze pack put into the wound during your operation, this will be removed before you go home. If your wound needs to have daily dressings, the hospital nurse will organize the district nurse or practice nurse to do this for you.

If you have any concerns about the wound, or if the discharge from the wound is smelly, please see your GP or practice nurse so that they can check that everything is ok.

Vaginal bleeding

You may experience some vaginal bleeding after your operation. This may last up to a week or two. You are advised to use sanitary towels and not tampons at this time, and not to have sexual intercourse. This will help to reduce the chance of infection, and to aid the healing process. Please talk to your nurse or doctor about how long this needs to continue. Once you are at home, if you have new pain, fresh or heavy bleeding, or if you notice a smelly discharge, you should see your GP for a check up.

As you leave hospital

- Make sure that you fully understand the operation that you have had. Your hospital doctor will write a letter to your GP about your operation. This will be sent in the post. You will be given a copy for your own records.
- You will be advised which painkillers are most suitable for you. These will usually be paracetamol, codeine and ibuprofen or combinations of these. Make sure you have a supply of your usual choice ready at home.
- Ask if you need to attend the Outpatient Department again or where your follow up will be.
- If you have any questions or concerns, please speak to one of the nurses.

Going home

You will be discharged from hospital once you are medically fit. This may be the same day as your operation or in the next couple of days.

Try not to compare your recovery with other women on the ward, as everyone is different. If you take medicines regularly for other conditions please carry on as normal unless you are specifically asked to change anything.

You will need to arrange for someone to collect you to take you home.

Help at home

Arrange to have someone at home with you for the first night following your operation. It will help you if you can arrange to have someone at home to help you for the first few days / week with shopping and housework.

For 24 hours after your operation

- Do not operate machinery or appliances i.e. a cooker or a kettle, because you may feel suddenly dizzy, lightheaded or forgetful.
- Do not lock the bathroom door, or make yourself inaccessible to the person looking after you.
- Drink plenty of fluids and eat a light diet, avoiding heavy or greasy foods.
- Avoid alcohol.
- You will need to arrange some time off work. You can sign yourself off for 7 days without a doctor's note. If necessary, the hospital or your GP will sign you off for longer.
- Do not make any important decisions or sign legal/ important documents.

From day two onwards

- Build up your strength and gradually get back to normal.
- Ease off pain killers if they are making you drowsy. This is a sign that you do not need as much anymore.
- Take regular walks for 5-10 minutes every couple of hours during the daytime, and build up day after day to normal.
- If you have any concerns about your wounds (for example, if they start to leak fluid, or if the edges of the wounds come apart), please see your GP or the practice nurse at your surgery.
- Once you are at home, if you have new pain, fresh or heavy bleeding, or if you notice a smelly discharge, you should see your GP for a check up.

Resuming sexual relations

This is an important question to discuss with your consultant or one of their team before you leave the hospital as every individual is different. In general, you should wait until any bleeding or discharge has stopped. Some procedures will take longer than others to heal enough for intercourse to be comfortable. We recommend that you wait at least the length of time that you have been advised by your doctor / surgeon. Once you do start having sex again, if you experience any problems you could discuss them first with your GP.

Driving

From a surgical viewpoint we advise that your insurance is not valid within 24 hours of a general anaesthetic. Before you start driving again it may be helpful to first sit in the car while it is parked and see if you could do an emergency stop if needed.

Remember, you need to think of yourself and other people's safety. Please take advice from your surgeon or GP for your specific case and consider contacting your insurance company.

Contact us

Please note that after you have left hospital, most problems should be managed by your GP.

However, for urgent advice within 24 hours of your procedure, you may contact:

Gynaecology Day Care Ward J24

- **Level 2 Chancellor Wing (above A & E),
St James's University Hospital,
Beckett Street,
Leeds, LS9 7TF**
- **Telephone: 0113 206 9124**
- **Hours: 07.30 - 20.00**

Gynaecology Acute Treatment Unit J24

- **Level 2 Chancellor Wing (above A & E),
St James's University Hospital,
Beckett Street,
Leeds, LS9 7TF**
- **Telephone: 0113 206 5724**
- **Hours: 24 hours a day**



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LN004748
Publication date
03/2025
Review date
03/2028