



Rapides Regional Physician Group

BELT LIPECTOMY POST OPERATIVE INSTRUCTIONS

CARE OF SURGICAL SITE

When you wake from surgery you will be in the recovery room where the nurses will be taking good care of you. You will have a large clear plastic dressing (Opsite) over your lower abdominal incision and another over your back incision. There will be four to six drains, two to three on each side of the incision in the lower abdomen. The bulbs will resemble a large, opaque egg. When you are discharged from the hospital, you will need to empty each bulb several times a day and keep a record of the drainage. When you return for your post-operative visit with Dr. Maguire, you will need to bring your drainage records with you. When the drainage reaches 30 cc's in a 24 hour period, Dr. Maguire will remove the drain in clinic. It is not uncommon to keep the drains in from 7 days to 3 weeks depending on the amount of drainage you have. You will also need to "milk" the drain several times a day to keep clots from closing off the drainage holes. Instructions on how to do this can be found later in the post-operative care instructions.

In the recovery room, you will be positioned with the head of the bed at 45 degrees and your knees bent to keep excess tension off your abdominal incision. When you go home, continue to sleep with the head of the bed elevated and your knees bent for the first 24 hours. You can elevate your head by using 4-5 pillows under your upper body. You will need to continue to sleep with your upper body at a 45 degree angle for a minimum of 4 weeks after your surgery. You may get up to use the bathroom, but stay in a bent position as you walk for the first 24 hours after surgery. After 24 hours, you may start standing straighter as your body allows.

You will keep the dressing to your lower abdomen and back on for two days after surgery. Once you remove the clear dressing you may shower. We recommend that you let the water run over your incisions, but do not scrub the incisions. Be careful when drying and "pat" your incisions dry. Please refrain from putting any ointments, lotions, or powders on the incisions. You may start wearing your surgical garment for comfort and contouring at this time. The surgical garment should be worn 24 hours a day for 2-4 weeks.

You may begin placing a thin layer of Neosporin over the incisions to help the final appearance of the scars. Do not submerge yourself in a bath, pool, or hot tub until the incision is completely healed. This will take 6-8 weeks.

The incision sites will drain dark red fluid to clear yellow fluid for several weeks after surgery, so you may want to keep a bandage over the incision sites for several weeks until the incisions are completely healed and most of the sutures have dissolved.

Once the drains are removed you may want to place gauze over the drainage sites to keep clothing from getting stained by draining fluid as well. After the drains have been removed, it is not unusual to have an accumulation of fluid in the lower abdomen. The fluid may cause your tummy to extend and feel "slushy". Do not be alarmed, call our office, and we will schedule a time for you to come in and have excess fluid removed. This fluid can be removed using a syringe and is not a painful process. You may continue to develop fluid in your lower abdomen for several weeks after surgery, but this will subside as your incision heals.

HOW TO STRIP YOUR DRAINS

When you go home from your surgery, you will keep a record of the amount of drainage coming out of each drain. You will release the suction on the bulb attached to the drain. Record the amount of fluid in the bulb. Then empty the drainage from the bulb into the toilet. Squeeze the bulb flat and replace the cap, this will re-create the suction on the drain in your incision. Carefully hold the tube in place at the incision site with your thumb and first finger. Open alcohol prep and wrap it around the tubing and hold it in place with the other thumb and first finger. Slowly work your way down the tubing, holding constant pressure, little by little until you have gone the link of the tubing. This will milk the drain and keep a clot from obstructing the drain. Record the drainage from each drain 3 times a day. A good way to remember that is to record the drainage when you wake up, mid-day, and before you go to bed at night. Bring this record with you when you go to your post-operative visit.

PAIN AND DISCOMFORT

At your pre-op appointment you will be given three prescriptions. The first prescription will be a non-steroidal anti-inflammatory drug (Mobic). This medication will help reduce post op swelling and edema. The second prescription is for pain. We recommend that you take the pain medicine as directed. The third prescription is an antibiotic. You may start the antibiotic on the evening after your surgery. Be sure to take the antibiotic as directed until the bottle is empty to prevent postoperative infection. If you opt to have a pain pump, then when you wake up from surgery you have a small round bulb taped to your abdomen attached to two very small catheters. The catheters are placed into the subcutaneous space of your abdomen. This bulb is filled with Marcaine, a numbing medication. The bulb slowly dispenses the Marcaine throughout the surgical site for 3-4 days to numb the area and minimize the pain. Once the bulb is empty, simply pull the two catheters out and discard into the trash.

NAUSEA AND VOMITING

A few patients react to the anesthetic after surgery with nausea and vomiting. This usually lasts less than 24 hours and should be treated with lots of fluids and rest. If you have a history of severe post operative nausea and vomiting, please request a Phenergan prescription.

SUTURES

The suture selected by your surgeon is absorbable and does not require removal. Some patients experience discomfort where the suture is tied off. If you experience this then knots can be removed 2 weeks after surgery in clinic.

THE APPEARANCE OF YOUR INCISION

When you remove the dressings and look at your incision for the first time after surgery, do not be alarmed. The incision will be quite wrinkled and puckered, and will look quite ugly. This is exactly what they are supposed to look like. It takes 2-4 months for the incision to heal (inside and outside). The puckering of the incisions will smooth out over several months, but the scar will remain wide and red anywhere from six months to one year after surgery. Once the scar has matured, the redness will go away.

ACTIVITY/EXERCISE

You will need to be off work for a minimum of 4-6 weeks following belt lipectomy surgery. Do not lift anything over 10 pounds for at least 6 weeks after your surgery. If you have small children, do not lift them up, or hold them in your lap for at least 3-4 weeks after your surgery. Take it easy for the first 3-4 weeks following surgery. We want you to drink plenty of fluids and rest. We do want you up and walking around after surgery, but no exercising. You may start brisk walking around week 4, but absolutely no running. Dr. Maguire will let you know when we can resume a full exercise regimen. This is a big surgery and it takes a minimum of 6-8 weeks for the incision to heal.

IMPORTANT

The outcome of your surgery may be compromised if you fail to return for any scheduled post-op visit, or fail to follow the pre-and post-operative instructions.

If you have any questions or concerns please contact the office 318-442-5800 during business hours (8AM-5PM) and ask to speak with Dr. Maguire. We look forward to making this journey with you!

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