



Cholecystectomy – post-operative instructions

- Driving:** When confident able to push hard on brakes. Recommend 4-5 days off driving.
Not when taking Endone, Tapentadol (Palexia), Tramadol, Targin, or other opioid (can cause sleepiness)
- Activity:** No heaving lifting for 2-4 weeks. Aim below 10kg.
Avoid major golf swings 3-4 weeks. Short game / putting is fine.
Light exercise is fine if comfortable, as long as you don't strain.
Swimming is ok after 2-3 weeks as long as wounds as healed and you take it easy.
Walking / non strenuous activity as much as possible.
You may climb stairs.
After 6 weeks you can return to normal activities including gym and heavy exercise, but use common sense and go slowly at first.
Sexual activity when you feel well enough and ready.
- Dressings:** Skin glue is waterproof – can shower and pat dry. Scratch off in shower in 7-10 days. If sensitive, can cover with another dressing / bandaid.
Dressings – usually waterproof but if becomes wet / soggy, remove and replace as necessary. Does not necessarily require a new surgical dressing. A bandaid can suffice.
Call rooms 07 5598 0644, hospital (registrar on call) or see GP if concerns regarding wound – red / sore / oozing

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Analgesia: Regular panadol 2 tablets up to 4 times a day (maximum 8 tablets per day, or if taking Panadol osteo, 2 tablets 3 times a day, maximum 6 per day).

Can also have neurofen 2 tablets up to 3 times a day for up to 3 to 5 days. Please note this can cause gastritis, reflux or ulcers. Sometimes you will be sent home on Meloxicam 15mg per day. Take one OR the other. NOT both please.

Endone 1-2 tablets 4 times a day as needed for pain, this may be substituted for tapentadol (palexia) or tramadol.

Avoid codeine (within panadeine, or panadeine forte) as this is very constipating.

Bowels: Avoiding constipation is important for comfort, and straining can also compromise sutures. Strategies for avoiding constipation include drinking more water, gentle mobilisation, and high fibre foods and drinks (pear and prune juice, high fibre cereals, fruits etc). Remember, don't go unless you need to, don't strain, and don't keep sitting on the toilet for long periods of time (can increase swelling and discomfort).

Movicol or clearlax, 1-2 satchets 2 times a day as needed for constipation (supermarkets / chemists).

Coloxyl and senna can also be used, preferably only for 1-2 weeks (limited time) only.

Other laxatives can also be used, again preferably only for several weeks only.

Diet: There is no specific restrictions, but a low fat diet is suggested. This is generally considered healthy, and a for a few months after a cholecystectomy a heavy meal can result in diarrhoea. This can occur especially in the first 3 months. It can even happen with low fat foods. If it occurs then please look up the 'GESA LOW FODMAP DIET' booklet as it can help (available online). Even if diarrhoea is significant, it should slowly settle over 6-12 weeks. If it is severe and intolerable please contact rooms for early review as there are medications which can help. Please note that this diarrhoea is not harmful, but can be quite uncomfortable.

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Lethargy:

It is common to feel tired and you may need to nap during the day for the first 2 weeks or so. If you had an emergency operation for acute cholecystitis (gallbladder infection) or gallstone pancreatitis, this can be quite severe and can last even longer (4-6 weeks even). This is normal and is expected to go back to normal with time and rest. Don't be surprised if it takes some weeks for your energy levels to return to normal. It takes 4-6 weeks for tissues to heal after an operation, and longer for more involved operations.

Any concerns please feel free to contact:

Dr Wong's Rooms – 07 5598 0644

Surgical Registrar at Tweed Hospital – 07 5536 1133

John Flynn Emergency Centre – 07 5598 9000

GP

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