

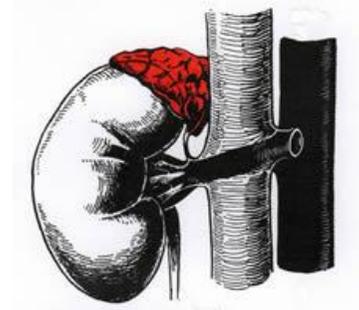
Mr Simon Grodski

Postoperative Instructions

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PRA / LAPAROSCOPIC ADRENALECTOMY



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Wound Care:

Your wounds will be covered with waterproof dressings, which should be left in place for about 2 weeks. The dressings will be removed at your first postoperative visit. You may notice some dried blood under the dressing but that is of no concern. You can wash and shower with the dressing in place and even get it wet. Once removed, you can shower with the wound exposed.

Activities:

You should generally restrict vigorous activities for 1-2 weeks after surgery. There are no particular restrictions on lifting or general activities, common sense should guide you on returning to regular activities. Swimming should be avoided for at least 2 weeks after surgery. You can return to work and driving a car when you are moving freely and not requiring any pain medication.

Medications:

Depending on the indication for surgery, you may have changes to your blood pressure medications and may need cortisone tablets after surgery. This will be discussed with you before leaving hospital.

Local symptoms:

A variety of local symptoms are common for several weeks after surgery including tightness, swelling and tenderness of the local area around the wounds. You may also get some bloating, reduced appetite and reduced bowel movements. Aperients (laxatives) may be needed if your bowels are not moving. You may also notice some bloating / swelling on the abdomen on the side of the surgery and some numbness around the hip and groin on that side; this may take several months to resolve. General tiredness is also common after any surgery and should gradually improve as you return to full activities.

Complications:

Major complications are uncommon after adrenalectomy. If you notice increasing pain or are requiring increasing strong pain medication after the first 2-3 days this may indicate things are not right. If you develop fever, pain or redness in the wound or notice an offensive discharge from the dressings this may indicate infection and you should notify your surgeon or GP.

Follow-up:

Generally, your follow-up will consist of

- A post-operative visit at 2-3 weeks to check your wounds, review the pathology and check your overall progress. If an appointment was not provided on discharge, please contact our rooms.
- You may or may not require further surgical review depending on your situation.
- You may also require ongoing follow up with your endocrinologist depending on the indication for surgery

Country patients:

If you are unable to return to Melbourne for follow-up, it may be possible for the wounds to be checked and for your follow-up to be undertaken by your local doctor. We would need to confirm these arrangements before you leave hospital.

If you have any questions or concerns, please contact Mr Grodski as listed overleaf.