

Discharge advice following diagnostic and operative laparoscopy



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Laparoscopy is a key-hole operation. A diagnostic laparoscopy is when we look inside your tummy as an investigation and is performed as a daycase. An operative laparoscopy is when something more is done inside your tummy, such as operations on your ovaries, removal of endometriosis or hysterectomy. These are also performed as daycases for many women, but sometimes you will have stayed in hospital.

This information leaflet explains what to expect when you get home.

Going home

You can go home once you are eating and drinking, have passed water, and are up and about without feeling unwell. Someone needs to accompany you home and stay with you overnight. If you have had an operative laparoscopy, we will give you information on what is best for your recovery, depending on the operation that was performed. If a follow-up visit is required, you will be sent an appointment date in the post.

What to expect

Pain

Wind-like pain in the tummy, underneath your ribs or around your shoulders, is very common after a laparoscopy. It happens because some of the gas gets trapped under your diaphragm. The pain usually settles within 24-48 hours as your body gets rid of the gas. You may need simple pain relief like paracetamol.

Bleeding

You may have some light vaginal bleeding. This should settle down within a few days.

Scars and stitches

You will have between 1 and 4 small cuts on your tummy, one of which is usually in your belly button. They will have been closed with stitches. Most stitches dissolve within 4 weeks. If they are uncomfortable you can see your GP to have them removed (5 days or more after the operation) rather than waiting for them to dissolve. Your cuts will be covered with a dressing, which you can remove after 48 hours.

Activities

Diagnostic laparoscopy: you should return to normal activities as soon as possible. You will most likely need a couple of days of rest. Most women are able to return to work within a week of the operation.

Operative laparoscopy: your surgeon will give you advice specific to the operation which has been performed. Most women are able to return to work within 4 weeks of the operation.

When should I seek medical help?

For Laparoscopy all operations carry some risk of complications. The more common ones are:

Infection of the wounds: 2 to 5 in every 100 women develop this. If you notice any redness, soreness, or swelling around the wound, see your GP or contact the ward. This can be treated with antibiotics.

Urine infection: 2 to 5 in every 100 women develop a urine infection after laparoscopy. Try to ensure that your bladder is completely empty when you go to the toilet and drink plenty of fluids. This will reduce the risk of infection. If your urine smells offensive or you experience burning or stinging when you empty

your bladder, see your GP. Your urine will need to be tested for infection and you may need antibiotics.

Injury to the bowel: This risk is around 1-3 in every 1000 women undergoing laparoscopy. It is not always diagnosed at the time of the laparoscopy. Symptoms include increasing tummy pain, a swollen tummy, nausea and vomiting and a fever. If you are worried about symptoms such as these, contact the ward as soon as possible as you may need to return for further tests.

Injury to the bladder: This risk is around 1-3 in every 1000 women undergoing laparoscopy. It is not always diagnosed at the time of the laparoscopy. Symptoms include a swollen tummy, passing only small volumes of urine or fluid leaking from the wound sites on your tummy. If you are worried about symptoms such as these, contact the ward as soon as possible as you may need to return for further tests.

Blood clots in the legs or lungs: Operations carry a small risk of blood clots developing in the legs (deep vein thrombosis). These blood clots can travel to the lungs (pulmonary embolus) and can be serious. To reduce the risk of this, make sure that you are mobile as soon as possible after the operation and drink plenty of fluid. Seek medical help immediately if you develop any swelling, redness or pain in the legs, or shortness of breath or chest pain.

General advice

A general anaesthetic can make you feel sleepy and impair your judgement. Therefore, for at least 24 hours after the operation, you should not:

- Drive a car (or any other vehicle)
- Cook
- Operate machinery
- Drink alcohol or take sleeping tablets
- Take sole charge of children

References

The Royal College of Obstetricians and Gynaecologists

More Patient Information is available on our website

www.rcog.org.uk/womens-health/patient-information

Laparoscopic Injuries (Green-top 49) Royal College of Obstetrics and Gynaecologists

www.nhs.uk/conditions/Laparoscopy

Contact details for further advice

If you have questions or worries at home, you should contact your GP or the gynaecology (Cotswold) ward on 0117 414 6785.

**PATIENT
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How to contact us:

If you have questions or worries
at home, you should contact
your GP or:



Cotswold ward
0117 414 6785



www.nbt.nhs.uk/epac

If you or the individual you are caring for need support reading
this leaflet please ask a member of staff for advice.

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