

**SYDNEY CBD**

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**RANDWICK**

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## **INSTRUCTIONS BEFORE AND AFTER SURGERY - OUTPATIENT (LIGHT DIET)**

### ***BEFORE SURGERY***

#### **Pre-Surgery Diet**

It is essential for the safety of your surgery that you adhere to the following low residue diet

PLEASE NOTE: if you do not adhere to this diet your surgery may be cancelled.

#### **1 Day Before Surgery**

Light meals only  
No milk products - water, fruit juice,  
herbal tea, soft drinks  
Soups, salads, sandwiches allowed

#### **Day Before Surgery**

If you are having **morning** surgery: have nothing to eat or drink from midnight (this includes water) unless instructed by your doctor.  
If you are having **afternoon** surgery: Do NOT eat any solids from midnight.  
Clear fluids such as Gatorade, tea, coffee (without milk) and water are allowed until 6am only.

#### **Medication**

Hormones to be continued.

Pain medications: Paracetamol and/or codeine preferred

**It is very important that you advise your doctor if you are taking Aspirin or anti-inflammatory drugs (such as Voltaren or Nurofen)**

Continue other medication (heart, diabetes) with a small amount of water.

#### **Exercise**

There is no restriction on daily activities before your operation, however, if you engage in strenuous exercise, please make sure to drink adequate amounts of fluid.

### ***AFTER SURGERY***

#### **Diet**

Gradually increase your fluid intake, i.e. from water to clear fluids to full fluids/milk products

Intravenous drip will be discontinued if managing adequate fluids

Light diet (soup, sandwiches) if desired, gradually building up to a normal diet

Small frequent meals rather than occasional large ones

A high fibre diet with plenty of fluid should avoid the need for prolonged use of a laxative.

Constipation and straining should be avoided at all times. If you do become constipated, please call our rooms on 9251 6555, or see your GP.

#### **Medication**

Pain medication will be provided via intravenous drip or injection initially. As requirement falls, this will be changed to suppositories or tablets

Medication for nausea is given at the time of surgery; further injections can be administered if required.

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**DISCHARGE FROM HOSPITAL**

You will be discharged from hospital when the nursing staff considers that you are able to function on your own, which means:

- You are mobile
- You can eat and drink without nausea
- You empty your bladder properly
- You are comfortable, pain under control.

Make sure:

- You are accompanied by someone on your way home
- Someone stays with you at least for the next few days
- You have access to pain medication in addition to your regular medication
- Arrangements are made to facilitate your movement around the house (going up and down several flights of stairs several times a day may be difficult).

**Pain Management**

Take prescribed pain medication (Tramadol, Voltaren, Digesic etc) liberally in the first few days  
Heat packs and/or warm baths are excellent ways to manage pain.

**General Advice following Surgery**

The following is general advice for a range of surgical procedures. Certain instructions may not apply to your individual case

Short baths can be taken (10-15 minutes)

Showers may be taken as soon as you are able to walk around

Wounds may get wet but should be dried thoroughly. Use a hairdryer if necessary and leave Steristrips on wounds for 5 days

Sports: start gradually and build up (walking, swimming, jogging), no exertion, avoid high impact exercises for 1 week and stop if it hurts

Sexual intercourse can resume when vaginal bleeding/discharge stops

Recommence driving when pain medication is no longer required (check with your insurance company regarding cover following surgery)

Recovery from surgery is dependant on the individual and may take several days or weeks.

**POST OPERATIVE VISITS**

First visit 2-6 weeks

Second visit 3 months (if needed)

**CONTACTS**

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