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Instructions after Anal Procedures Performed in the Office

Activity

- Do not drink alcohol, drive a car, or make legal decisions while taking prescription narcotic pain medication.
- Rest quietly for the remainder of the day.
- After the first 24 hours, you may resume full activity. Use common sense; let pain be your guide and moderate accordingly. No lifting of a weight greater than 20 lbs (9kg) for 1 week.
- Exercise should be started cautiously after this time with the realization that anything that hurts probably should be avoided. Avoid squatting and lunging.
- Vaginal sex is allowed unless otherwise specified. Do NOT have anal sex for 2 weeks.

Diet

- You may resume your regular diet. Be sure to drink plenty of fluids.
- You may resume your medications (except aspirin unless directed by your physician).
- Avoid straining and constipation. Typically, a fiber supplement or stool softener may be taken.
- If you do not have a bowel movement within 48 hours, you may use Milk of Magnesia or Miralax. If you have no results, repeat the process daily. Do NOT give yourself an enema or let anyone else give you an enema unless instructed by your physician.

Pain Medication

- Use the Dibucaine (Nupercaine) ointment topically as needed for local discomfort.
- A prescription pain medication will be given to you; take the medicine before the pain is too severe.
- Ibuprofen may be helpful for pain control in addition to the narcotic. As your pain subsides, you may use Tylenol or ibuprofen alone.
- Many prescription pain medications contain Tylenol (acetaminophen). Do not take additional Tylenol if your prescription already contains it.
- All pain medication should be taken with food to prevent nausea and stomach irritation, which are common side effects.
- We will **only refill medications during office hours**; please plan accordingly.

Urinary Difficulty

- This is common after anorectal procedures.
- If you are unable to pass urine, sit in a warm tub of water to relax your muscles. You may urinate in the bathtub if you feel the urge. This process can be repeated again as needed.
- If you are still unable to urinate 8 hours after discharge from the hospital, you **MUST GO** to your local emergency room for catheterization.

Wound Care

- Remove the outer dressings the next day (unless otherwise directed). Usually, it is easier to soak in a warm tub of water to peel the tape and dressings off gently. Soak for 10 minutes and then blot your wounds dry.
- Keep the wound as clean as possible. Keep a dry dressing (maxipad or gauze) in place to protect your wound and clothes.
- You may take sitz baths (sitting in a warm tub of water) 2-3 times per day for up to 10 minutes each time, if needed. Perform a sitz bath after every bowel movement and more often as needed for comfort.
- Letting shower water run over the wound for cleaning is also effective. If a detachable shower head is available, gentle direct cleansing may best be facilitated with warm water, under low pressure.
- Drainage is expected. It will decrease over time. Pink staining and a few spots of blood may also be seen with your bowel movements. This is normal.



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When to call a physician

- Persistent trickling blood that does not stop with direct pressure.
- Urinary retention.
- Temperatures greater than 101 degrees F.
- Severe redness or copious drainage of pus from the incision site.
- Nausea or vomiting that persists more than 12 hours.
- Worsening abdominal pain.
- Severe leg pain or swelling.
- No bowel movement after 72 hours despite taking Milk of Magnesia.

Be sure to visit our website www.atlcrs.com to check our Frequently Asked Questions (FAQs) section.