If you have received general anesthetic:

- Rest at home following discharge today and resume activity as tolerated tomorrow or as per surgeon's instructions.
- You may have a sore throat for the first 24 hours due to the use of a breathing tube while you were asleep.
- Drink plenty of fluids and use throat lozenges or ice cubes for relieving throat pain.

For 24 hours Do Not:

- Drive any type of motorized vehicle
- Ride as a passenger on a motorcycle
- Operate power tools
- Sign legal documents for 24 hours
- Look after dependent persons
- Drink alcohol

We hope your recovery will be comfortable.

The information in this document is intended solely for the person to whom it was given by the health care team

Follow-up Instructions/ Appointment:

If questions or concerns call BC Nurse Line: 1 866 215-4700 (604) 215-4700 Hearing Impaired: 1 866 889-4700

Or contact your physician

In Emergency: Call 911 or go to the hospital.

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Excision of Pilonidal Sinus (and/or Abscess)

Post-operative Discharge Instructions

Abbotsford Regional Hospital & MMH



Better health.

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Excision of Pilonidal Sinus (and/or Abscess)

General Information

A Pilonidal (abscess, sinus, or cyst) is an infected area with pus in the natal cleft (crease) between your buttocks. It tends to become infected and cause intense pain and drainage. A Pilonidal sinus may or may not contain hair.

The operation involves excising the sinus and surrounding tissue. The clean wound is usually packed with gauze and a dressing is applied. Packing the wound allows healing to take place from the base of the wound upwards, which reduces the risk of the sinus redeveloping.

Wound and Dressing Care

You will have a dressing/pad covering the wound, which will need to be changed regularly as the operation site may bleed slightly and you will have drainage. The nurse will instruct you which dressings/pads to buy at the community pharmacy.

If you have stitches, they may be dissolvable. The dressing will have to be changed daily by the Homecare Nurse. This will be arranged by your surgeon before you are discharged home. Check with your nurse.

You may or may not have a V.A.C. (Vacuum Assisted Closure) dressing. The nurse will discuss with you as needed. Ask the homecare nurse about having a shower (getting washed) if you have this device.

What activity can I do?

Restrict your activity for the next week including:

- No long drives
- No long walks
- No heavy lifting
- No sports
- No sexual intercourse

You recover from surgery by being active. The sooner you mobilize, the sooner you will recover to pre-surgery activity. Gradually increase your daily walking.

Mild activities help you get your strength back and prevent the problems caused by inactivity.

and prevent the problems caused by inactivity Check with your doctor regarding return to work, daily activities, and participation in sports.

Do not drive unless you are sure you can brake safely in an emergency.

When can I shower/or bathe?

It is important to keep the wound and dressing clean and dry.

Ask your doctor or (homecare) nurse when you are allowed to shower (or bathe).

What foods can I eat?

A well balanced diet is important for wound healing and to prevent constipation. Include high fibre foods in your diet such whole grain bread, bran cereals, fruits, and vegetables. Drink 8 glasses of fluids without caffeine per day.

What if I have pain?

Your pain should improve daily even though you may need to take a pain reliever. If you start to have pain, take pain medication regularly for the first 1-2 days as ordered by your surgeon/doctor. Continue to take it as needed. *Take the pain medication early and regularly as pain comes on to prevent severe pain.*

DO NOT DRINK ALCOHOL or DRIVE-

when taking narcotics, or other strong pain medication.

What if I am nauseated?

If you feel sick to your stomach, you may take anti-nausea medication as directed by your medication/bottle instructions, pharmacist or doctor.

Seek Medical Attention immediately if:

- You experience blood loss requiring frequent change of the dressing/pad.
- Persistent fever over 38° C (100.4°F)
- Pain unresolved by your pain medicine
- Continued nausea and vomiting
- Chills or shivering
- Cough or shortness of breath that does not go away or stop
- Inability to urinate for more than 8 hours