

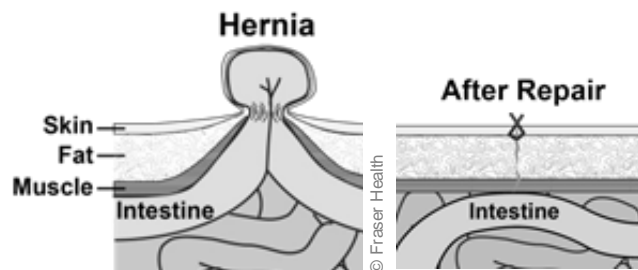
# Minor (Open) Hernia Repair

## Your Surgery and Recovery at Home

### I am having:

- A groin (inguinal or femoral) hernia repair
- A belly button (umbilical) hernia repair
- An incisional hernia repair

A hernia happens when there is a weak spot in the muscles or tissues. Underlying tissue or an organ (such as the intestine pictured here) can squeeze through the weak spot. You might see a bulge in your skin and feel a lump.



### The surgery

The surgeon makes a small cut (incision) near the hernia. Any tissue or organ bulging through the hernia is pushed back into place or removed. Sometimes a synthetic patch or mesh is placed over the hernia site and sewn to the surrounding tissue. If mesh is not used, the tissue is sewn together (as pictured above). The surgery usually takes about 1 hour.

You usually go home the same day or the next day. This depends on your health before surgery and your recovery.

### Appointments after surgery

See your family practitioner 7 to 10 days after surgery

**My appointment is on:** \_\_\_\_\_

Call your surgeon's office for an appointment.

**My appointment is on:** \_\_\_\_\_

### Going home checklist

- You have a ride home and someone to stay with you for 24 hours, or longer if needed.
- You know what medicine(s) to take, as well as when and how to take them.
- You know what you cannot do for 24 hours (because of anesthetic) including:
  - ✗ **No** driving or operating hazardous machinery
  - ✗ **No** drinking alcohol or using any substance or street drug
  - ✗ **No** making important decisions or signing legal documents

Family practitioner – Refer to family doctor or nurse practitioner

## Caring for Yourself at Home

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### Drinking and Eating

Return to your normal diet. You might feel sick to your stomach (nausea) or throw up (vomit). This should not last long. It is important to stay hydrated.

If you feel sick or throw up:

- Drink 'flat' ginger ale, clear soups, and clear fluids, and eat mild foods until you feel better. Other good choices include dry toast, crackers, popsicles, and gelatin dessert (such as Jell-O). Stay away from caffeine, carbonated soft drinks, and acidic fruit juices while feeling sick.
- Drink and eat small amounts often.
- Rest in bed until you feel better. Place a cool, damp cloth on your face and neck.
- Try not to smoke or be around smoking. It can make your nausea worse.

You might get constipated if you are less active, eating less fibre, or taking opioid pain medication. It is important to prevent constipation so you don't strain to have a bowel movement.

To prevent constipation:

- Drink at least 6 to 8 glasses of liquid each day (unless you have been told differently because of a medical condition).
- Eat high fibre foods such as bran, prunes, whole grains, vegetables, and fruit.
- Walk and move around as much as you can.

If you continue to be constipated, talk with a pharmacist or family practitioner about taking a laxative.

### Your incision

**Always** wash your hands before and after touching around your incision site(s).

You can shower 2 days after your surgery. If you have white skin tapes (steri-strips) over your incisions, do not remove them. They should fall off within 1 week. If they don't, then remove them. If you have a bandage covering your incision, a nurse will explain when to remove the bandage.

For at least 2 weeks until the incisions are healed:

- × **No** soaking in a bathtub or hot tub.
- × **No** swimming.
- × **No** creams, lotions, or ointments on your incision, unless directed by your surgeon.

### Activity and Rest

Balance your activity and rest for the first few days.

**Do not** lift, push, or pull anything over 5 kilograms (10 pounds) for 4 weeks. This includes carrying children and groceries.

Try to get 8 hours of sleep each day. Take rest breaks during the day, as needed.

You can usually return to driving 1 week after surgery, when you can shoulder check and do emergency braking. If you are not sure about driving, check with your surgeon. **Do not drive or drink alcohol** if you are taking an opioid medication.

## Managing pain

If you have been living with pain before surgery, be sure to tell your surgeon how you manage this pain, such as with medicines, herbs, supplements, cannabis products, other substances, massage, yoga, meditation, etc. This helps your surgeon create the best plan with you for managing pain after surgery.

Your surgeon gives you instructions to take pain medicine. This could include both prescription and non-prescription (over the counter) pain medicine. Follow the instructions given by your surgeon.

Your pain should be at a comfortable level that allows you to move, take deep breaths, cough, and to do every day activities. Take your pain medicine regularly for the first day or so, even if you have just a little pain. Also, do other things to help ease your pain or distract you from the pain, such as slow breathing, listening to music, watching T.V.

Often, there is some bruising and swelling near the incision and surrounding area. The bruising goes away in a few weeks. To reduce the swelling and help ease the pain, put a gel pack or ice in a cloth (such as a pillow case) and place over your incision area for 10 to 20 minutes, 4 to 6 times a day, for the first 2 days.

### Non-prescription pain medicines:

- acetaminophen (Tyleno®)
- non-steroidal anti-inflammatory drugs (NSAIDs)  
Examples: ibuprofen (Advil®, Motrin®)  
naproxen (Naprosyn, Aleve®)

**NSAIDs are not for everyone after surgery.** If you have (or have had) health problems such as stomach ulcers, kidney disease, or a heart condition, speak with your surgeon or family practitioner before using NSAIDs.

### Prescription pain medicines with opioids (narcotics):

- Tylenol #3® (codeine and acetaminophen)
- Tramacet® (tramadol and acetaminophen)
- Oxycocet®/Percocet® (oxycodone and acetaminophen)

**Note:** These medications also have 300 to 325mg acetaminophen in each tablet. In total, **do not** take more than 4000mg of acetaminophen in 24 hours (too much can harm your liver).

## Safe use of opioid pain medicines

If you are using any medicines that have opioids (narcotics) in them, take note of the following safety information.

- Tell your surgeon if you have sleep apnea. Opioids can make your sleep apnea worse.
- Your pain should lessen over the first week. You should not need to take opioid pain medicine for more than 1 week.
- Always use the least amount possible for the shortest amount of time.
- Common side effects include constipation, feeling sick to your stomach (nausea), a dry mouth, sweating, dizziness, and feeling drowsy.
- **Do not** crush, cut, break, chew, or dissolve opioids before taking. Doing this could cause serious harm, even death.
- While taking opioid pain medicines, **do not** drive, drink alcohol, or start taking any new sleeping pills.
- Store opioid medicines in a secure place. Keep out of sight and out of reach of children, teens, and pets.
- Never share your opioid medicine with anyone else.
- Take any unused opioid medicines back to your pharmacy to be safely disposed.  
**Do not** keep unused medicines at home.

Always read the label and/or information from the pharmacist about how to take medication safely.

**Questions about medications?** Speak to your local pharmacist. After-hours, call 8-1-1 and ask to speak to a pharmacist.

[www.fraserhealth.ca](http://www.fraserhealth.ca)

This information does not replace the advice given to you by your healthcare provider.

## When to get help

**Call your surgeon or family practitioner** if you have any of the following:

- not urinated (gone pee) within 8 hours of surgery
- nausea or throwing up not going away
- a dry mouth, only passing a little dark urine, and feeling thirsty
- a fever over 38°C (101°F)
- warm, red, swollen incision, or blood or pus (yellow/green fluid) draining from the area
- pain does not ease with pain medicine, or stops you from moving or recovering
- redness, tenderness, or pain in your calf or lower leg
- feel increasingly tired or dizzy

Can't contact your surgeon or family practitioner?  
Have any questions about your recovery?

• **Call Fraser Health Virtual Care**

10:00 a.m. to 10:00 p.m., daily  
**1-800-314-0999**

[fraserhealth.ca/virtualcare](http://fraserhealth.ca/virtualcare)

• **Call 8-1-1** (HealthLinkBC) to speak to a registered nurse any time - day or night.

HealthLinkBC is available in 130 languages.

For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

• **Call 9-1-1** if you have any:

- trouble breathing or shortness of breath
- chest pain
- sudden severe pain

My Notes

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Questions I Have

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