After Your Vaginal Procedure: What you need to know



What are vaginal procedures?

Vaginal procedures include, but are not limited to:

- Vulvar mass removal
- · Bartholin's cyst removal
- Revision of a perineal scar (scar between the vagina and anus)
- Colpocleisis (vaginal prolapse repair)
- Colcoscopy
- · Labial procedures
- Hymen procedures
- Vaginoplasty repairs
- · Cautery of the vagina
- Pelvic floor Botox injections

For these procedures, you might have light sedation, local numbing, or general anesthesia.

After your procedure

If you have sedation medications, you may feel drowsy for the rest of the day.

If you have a general anesthetic:

- You may have an oxygen mask over your nose and mouth when you wake up.
- You may have a sore throat for a few days. This
 is normal and usually goes away on its own.

What can I do?

- You may not feel like yourself for the first day.
 Rest in bed until you feel better. DO NOT plan other activities for the rest of the day.
- If you feel nauseous, try sips of ginger ale and eat some dry crackers. If you feel like eating, try small amounts of easily digested foods, like soups or cereals. Drink lots of fluids for 2-3 days, when you can.

How can I keep myself safe?

- You MUST have a responsible person who knows you well take you home.
- For 24 hours after the procedure:
 - Someone MUST stay with you.
 - DO NOT drive, operate heavy machinery, or make important decisions.
 - DO NOT drink alcohol or use recreational drugs. The effects will add to those of the procedure medications.

Caring for yourself at home

- Activity: On the day of your procedure, rest. You
 may then return to your normal activities over the
 next 1 to 2 days.
- Hygiene: You can shower any time, unless your doctor or nurse tells you not to. Do not go in a bathtub, hot tub, or swimming pool until your doctor says it is okay.
- Wound care: You may have sutures (stitches).
 They will dissolve over 4 weeks.
 - While you pee, you can use a squeeze bottle to gently spray the vulva with warm tap water. This will dilute the urine and make peeing more comfortable.
 - Starting on day 3, you can soak the area to feel more comfortable. Use a sitz bath or sit in a bathtub with shallow warm tap water. Repeat 3 or 4 times a day, for 10 minutes at a time.
 - Keep incisions dry. Use a clean cloth to gently pat the area dry after each bath or shower. Do not rub.
- Sexual activity: Do not insert anything in your vagina until your doctor says it is safe.
- **Dilating**: No vaginal dilating for one week after your procedure.
- Douching: No douching for one week after your procedure.

- Bleeding: If there is ongoing external bleeding, apply firm pressure (e.g. sit on a rolled towel). Do this for 10 minutes, or until the bleeding stops.
- Bowel function: Constipation is common after surgery. You can take Polyethylene Glycol (PEG) or Metamucil as needed, with lots of water.
- Pain: Take pain medicine if you need it. (Please read the next section). You can also use cold compresses.
 - To make a cold compress, put a moist towel or menstrual pad in the freezer. Before using it, put Vaseline or another small towel on the frozen compress. This will stop it from sticking to your sutures or wound. Use every 2 – 4 hours as needed, for 10 minutes at a time.

Pain medication

- · Take pain medication if you need it.
- If you have a prescription, follow the instructions from your doctor and pharmacist.
- If you do not have a prescription, you can take the following medications:

Acetaminophen (Tylenol) 1000 mg every 6 hours

Next dose at:____am/pm

AND / OR

Ibuprofen (Advil/Motrin): 400 mg every 6 hours

Next dose at:____am/pm

OR

Naproxen 440 to 500 mg every 12 hours

Next dose at: _____am/pm

NOTE: Naproxen is available without a prescription as 220 mg tablet (take 2 tablets). Prescription Naproxen comes in 500 mg tablets (take 1 tablet).

Do NOT take Naproxen with Ibuprofen (Advil/Motrin) or Diclofenac (Voltaren).

Gynecologist

Doctor's Sticker Here

Follow-Up Visit

 Contact your gynecologist's office and book a follow up visit. Ensure that you go to this visit. It is important to see your doctor after procedure.



Contact your Gynecologist or go to Emergency if you:

- Have bleeding that is increasing, heavy (soaks 1 full pad in 1 hour), or lasts longer than 3 to 4 weeks.
- Have bleeding on an incision that does not improve with firm steady pressure.
- Have bad smelling vaginal discharge.
- Have a fever or chills.
- Have severe pain, and pain medication does not help.
- Have nausea or vomiting for more than 24 hours, and you cannot keep fluids down.
- Cannot pee for 8 hours after you leave the hospital.

DO NOT go to the Urgent Care Centre at BC Women's as it is ONLY for pregnant patients.