Bladder Repair Surgery
(Anterior/Posterior Repair or Burch Repair)

Patient Information
How long will I be in the hospital?
You will be in the hospital for three days.

Let us know, when you arrive at the hospital, if you will need help when you go home. We can ask a hospital social worker to help make arrangements for you.

What should I bring to the hospital?
- any medication you are told to bring by the Pre-Operative Care Unit nurse;
- personal care items such as a pair of non-skid slippers or shoes; a housecoat or robe that opens all the way in the front, toothbrush and paste, etc.
- a bag large enough to put your clothes into after changing into your hospital gown.

Leave any valuables, such as jewelry, bank and credit cards at home.

What if I smoke?
If you are a smoker, we urge you to take this opportunity to stop smoking. Smoking may lengthen the time you take to recover from surgery. We understand how difficult this may be for you. Ask your nurse for information to help you stop smoking.

What happens before surgery?
The Pre-Operative Care Unit nurse will telephone you a few days before your surgery to find out about your health and to tell you about the surgical procedure. Tell the nurse at that time if you ever had problems with anaesthetics in the past. Also tell the anaesthetist about any problems when you come to the hospital.

A few days before surgery, you may have to come to the hospital to have a blood test.

The day before your surgery, do not eat any solid food (including chewing gum) after midnight. Your surgeon or the Pre-op Care Unit nurse will give you instructions about the fluid you may drink before your surgery. Follow the instructions carefully.

Have a bath or shower the evening before surgery and another one the next morning.

You may be required to trim your pubic hair using clippers and/or give yourself an enema the evening before your surgery. Your doctor or the Pre-op Care Unit nurse will tell you if this is necessary.

At the hospital, a nurse will review your health history with you. Tell the nurse if you have taken aspirin, a blood thinner or anti-inflammatory medication in the past seven days.

The nurse will explain how your pain will be managed after surgery and how to use a pain scale. You may receive pain medication by injection or with a pump called Patient Controlled Analgesia (PCA). Before surgery, you will receive a brochure and/or watch a video that explains the PCA method of pain control.

What happens during surgery?
An intravenous (IV) will be started in your arm for an anaesthetic to provide you with fluids and to give you medications during surgery.

Once you are asleep, a catheter (tube) will be inserted to drain urine from your bladder. The catheter will remain in place overnight, attached to a drainage bag hooked to the side of your bed.

The surgery takes approximately one hour.
What can I expect after surgery?

After surgery, you will be moved from the operating room to the recovery room next door. The length of stay in the recovery room varies with each person.

In the recovery room, the nurse will frequently check your vital signs (pulse, blood pressure and breathing). You may receive oxygen through a small face mask to help you breathe easier. Once your condition is stable, you will be moved to the ward.

On the ward, nurses will continue to check your vital signs as well as vaginal bleeding and the IV. As the days pass, the frequency of these checks will decrease.

The nurse will help you sit on the edge of your bed on the day or evening of your surgery. You will also be encouraged to turn from side to side and to take deep breaths and exercise your legs.

The first day after surgery you can expect to sit up in a chair and go for a short walk in your room.

Physical activity is an important part of your recovery. It helps clear your lungs and starts your bowels moving. You should increase the amount of your activity every day to enhance the blood flow throughout your body and prevent complications.

Starting with sips of water on the day of surgery, your diet will be gradually increased to a normal diet. If you feel sick to your stomach (nausea) tell the nurse who will give you medication for the nausea.

Once you are drinking fluids well, your IV will be removed.

Some people have difficulty passing urine after the catheter comes out. Tell the nurse if this happens to you. Your sanitary pads will be checked and changed frequently, if necessary.

You may shower the second day after your surgery.

It is important that you pass gas and have a bowel movement after surgery. If necessary, the nurse will give you a laxative to get your bowel function back to normal.

How will I manage the pain?

Pain management is important. Incisional pain can prevent you from moving, deep breathing, coughing or sleeping, which could slow your recovery.

Do not hesitate to tell the nurse when you have pain. Some patients are afraid to bother the nurse or fear becoming addicted to the pain medication. For most patients there is no chance of addiction to medication after surgery. Preventing severe to moderate pain in the early stages after surgery will also prevent pain from persisting later on.

The nurse will teach you how to cope with the pain. In addition to pain medication, simple relaxation methods or listening to music will also help with pain relief. Your family and/or friends are welcome to bring you a walkman and soothing tapes.

Gas trapped in your bowels may also cause pain and abdominal cramping. Walking, suppositories or an enema are some of the methods used to relieve gas pain.
What can I expect when I go home?
Hospital check-out time is between 9 and 10 a.m.

You may tire easily once you are at home. Rest when you are tired and slowly increase your activities. Alternate periods of activity with periods of rest. Walking is a good way to exercise. Avoid any activity that causes discomfort or fatigue.

What should I watch for once I am at home?
The nurse will review your condition with you before you leave the hospital and explain what to watch for. Notify your doctor if you notice any of the following changes:

- high temperature (above 38.5° C);
- increased or bright red vaginal bleeding;
- burning or difficulty when passing urine;
- having to pass small amounts of urine frequently;
- pain or swelling in your leg(s);
- sudden, severe shortness of breath or chest pain.

What can I do to heal more quickly?
One of the best things is to eat a healthy diet. Good nutrition can promote healing and reduce the risk of infection. If you need more information about a healthy diet, ask your nurse while you are in the hospital. We can provide this information or arrange for the hospital dietitian to see you.

Will I have problems with bowel regularity?
Constipation should be avoided. Drinking plenty of fluids, such as fruit juices or eating fruit or bran will help. Also, increasing your activities will promote good bowel habits. Try to avoid forceful straining during bowel movements as this places undue stress on the surgical area. If you feel you need a laxative, a mild laxative such as Magnolax may be taken, or talk to your family doctor about other treatment.

What medications should I take at home?
If you have any questions about your medications, check with your doctor or one of the nurses before leaving the hospital.

If you continue to have pain as you increase your activity, a Tylenol may be helpful. Please check with your pharmacist if you need help selecting a pain medication when you return home.

Are there any special precautions I should take?
Avoid using tampons or douching until your doctor tells you it is safe to do so. Also, ask your doctor when it would be safe for you to resume sexual intercourse.

You should avoid lifting objects that weigh more than five pounds (2 kilograms). Some objects may be heavier than you think. For example, a basket of wet laundry weights about 20 pounds (9 kilograms)

You should also avoid lifting a small child. Instead, sit in a chair with a pillow at your side. The child can sit on the pillow beside you to cuddle.

Do I need to see my doctor once I go home?
Yes. Make an appointment with your doctor for a check-up.
Dr. ___________________________ Phone: ________________

If you have any concerns or questions, please don’t hesitate to ask your nurse or doctor. We wish you a speedy recovery.