



GYNAECOLOGY PLUS
FERTILITY + BODY + WELLNESS

Laparoscopy / Prolapse / Hysterectomy Surgery

Patient Pre & Post-Operative Handout

Our goal: A smooth, safe recovery. You should feel better each day after surgery. If you are not improving or have concerns, contact FBW immediately.

BEFORE SURGERY (PRE-OP)

Admission Time

- You will receive your admission time the day before surgery. FBW Gynaecology Plus staff will call to confirm.

Fasting

- No food for 6 hours before given admission time
- Small sips of water are allowed until given admission time

Bowel Preparation (if required)

- You may need 2 enemas after your last meal. You will be advised if needed.

Misoprostol (if required)

- If advised, insert tablets into the vagina as close to your given admission time as possible.

Hospital Admission Forms (complete a minimum of 76 hours before surgery)

- Ashford: <https://acha.eadmissions.org.au>
 - North Eastern Community Hospital: <https://app.personifycare.com/register/NECH-Admission>
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WHAT TO PACK

You are more than likely booked for an overnight procedure. Please pack accordingly including toiletries, comfortable clothing, phone charger etc.

If you are having a Mirena insertion, please ensure you have a script. You will need to fill the script and bring the Mirena on the day of your procedure.

AFTER SURGERY (POST-OP)

Our nursing team will contact you for a 1 week post operative check-in via phone call. You should also have a 6 week post operative appt booked with your surgeon in our rooms.

Time Off Work: 6 weeks (unless advised or discussed otherwise)

Activity & Movement

- Start gentle walking as soon as possible



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- Increase activity slowly
- Listen to your body—avoid pain and fatigue

Bowel Care

- Use a stool softener (e.g., Laxatone, Movicol) for 2–4 weeks
- Avoid constipation and straining

LIFTING & EXERCISE RESTRICTIONS

Prolapse or Hysterectomy (first 6 weeks)

DO NOT:

- Lift more than 1 kg
- Lift arms above shoulders (including hanging washing)
- Stand longer than 1-2 hours without a break
- Vacuum, squat, push/pull heavy objects
- Do any gym or weights

Long-term (Prolapse patients only)

- Avoid lifting more than 10kg for life (except in sporadic cases)
- If returning to gym, use lighter weights and more repetitions, while lying or semi-sitting.

OTHER IMPORTANT GUIDELINES

Intercourse/Tampons: after your 6-week doctor review

Bathing & Swimming

- Shower as normal
- No baths or swimming for 4–6 weeks

Driving

- Usually safe after ~10 days (check with insurer)
- Test braking, steering, and gears safely before driving

Pelvic Floor Exercises

- Restart 1 week after surgery

Oestrogen Cream/Pessaries (Ovestin/Vagifem)

- Restart 3 weeks after surgery

LED Light Therapy is recommended post op to promote healing and reduce inflammation. You can book this treatment via Eve on 21 by calling 8490 3997. Fees apply.

WHAT TO EXPECT

Bleeding/Discharge

- Light bleeding/discharge is normal
- Contact the clinic if heavy bleeding, clots, bad smell, or severe pain occurs
- If you have had an ablation, it is common to have a watery like discharge for 2-4 weeks after your procedure



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Stitches

- Dissolvable stitches take 3–6 weeks
- Keep dressings on for 7 days, then remove
- Keep wounds clean and dry

Pain

- Some pain is normal (pelvis, wounds, shoulder tip)
- Back/hip pain may be from positioning—heat packs and gentle massage can help
- Take pain medication as prescribed
- Calf pain, swelling, or redness is urgent—contact the clinic
- Following a Mirena insertion, irregular bleeding and cramping may occur and typically resolves within 4–8 weeks

Shoulder Tip Pain

- Common after laparoscopic surgery due to gas
- Usually settles within 48 hours
- Peppermint tea, de-gas tablets, lying down can all help

WHEN TO CONTACT US

- You are not improving each day
- Fever, severe pain, heavy bleeding, wound problems
- Calf pain or swelling

FBW (Business Hours): 8297 2822

After Hours: GP or Ashford Emergency Department 8375 5205

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