



# Laparotomy

Gynaecology department



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[yeovilhospital.nhs.uk](http://yeovilhospital.nhs.uk)





A laparotomy is a surgical procedure that involves opening the abdomen by making an incision through any part of the abdominal wall. It is a surgical exploration of the abdomen to aid diagnosis and treatment.

Gynaecological operations which can be performed through a laparotomy include removal of ovaries, womb, division of adhesions, treatment of ovarian cysts and tubal surgery. It is usually performed under general anaesthetic.

### Pre-operatively

Before your operation, you will be asked to come to clinic for a pre-assessment. This is where we check that you are fit enough to have your agreed surgery. We will go through your past medical history and medications with you, explain the operation you are about to undergo, and what you should expect, and answer any questions you may have. You will have blood tests taken.

If you are over the age of 65 or your medical history dictates, you may need an ECG (echocardiogram) this is a tracing of your heart. You may also need to have an x-ray of your chest or other investigations, if the doctor thinks they are necessary.

There will be a period of time just before your operation when you won't be able to eat or drink - you will be informed of this with your admission letter.

You are advised to refrain from smoking for a few days before and after your operation.

You will also be assessed for the likelihood of developing a blood clot and will be fitted with surgical stockings during your stay, to help prevent blood clotting in your legs when you are less mobile following your surgery. In addition, blood thinning injections (Enoxaparin) may be given.

## On the day

On arrival to the ward you will be shown to your bed. The staff will check your details and take a routine set of observations. This will include your temperature, blood pressure and pulse. You will be seen by the surgeon and an anaesthetist performing your procedure. You will then be asked to put on a theatre gown, and await your turn for surgery. The staff looking after you will be able to advise you of an approximate time you will go to theatre.

## After your operation

You will wake up in the recovery area or in your bed on the ward. You may have a drip (a tube going into your vein to provide you with fluids), a catheter (a tube going into your bladder to drain urine) and a drain near your incision to remove excess fluid. All of these are usually removed within 24-48 hours, but you will be kept informed of this by the doctor.

Your blood pressure, heart rate, pain level and wound will be checked regularly and you will be given medication for pain relief as required. Fluid intake and output will be recorded. The doctor will inform you when you can eat and drink.

The day after your operation, a doctor will see you to explain what has been done. You may feel stiff and windy, this is quite normal, as your gut starts to be active again after the anaesthetic.

We encourage walking as this helps get rid of the wind and it is important in achieving a good recovery. You will be advised about bathing/showering. You will also be told when your sutures are due to be removed. This may mean you booking an appointment with the practice nurse at your GP surgery.

The hospital stay is normally between two to five days.

Your discharge letter, follow-up appointment and any necessary medication will be dispensed and ready for you to take home on your day of discharge (the pharmacy can sometimes take a while dispensing medication, so please be patient).

## Exercise

When you wake up from anaesthetic, start with taking some nice deep breaths to exercise your lungs and also some leg exercises by moving and rotating them around. Repeat these two to three times every hour until you are mobile - up and walking.

You will be encouraged to move while in your bed and encouraged to breathe deeply every hour and to cough if necessary.

We will encourage you to get as mobile as you can as quickly as possible. This will improve/speed up your recovery. We advise you to pace yourself - so little and often. Building yourself up gradually.

When you need to cough, sit up straight, support your wound, take in a deep breath and cough. It might be easier if you hold a pillow over the incision/wound site.

## Going home

You may find you have some vaginal bleeding and discharge for up to two to three weeks after going home. This is quite normal as long as it does not have a bad smell, is too excessive or too painful.

When you first go home, you should rest, gradually increasing the amount that you do. Do not lift anything heavy (anything more than a full kettle).

Walking is good exercise, but remember to rest when you feel tired. You should be back to full activity approximately four to eight weeks after your operation.

Six weeks rest from work is the minimum recommendation. However, return to work will depend on your condition and type of work. You can discuss this with your GP.

You are advised to refrain from sexual intercourse until after your post-operative check-up, about six weeks after your operation.

Your doctor will advise you when you can drive again; this would usually be after four to six weeks depending on your comfort. Also check with your car insurance company.

Maintaining an active lifestyle with a healthy diet will help to ensure you feel fit and make a good recovery.

Please use this space for any notes or questions.

**Gynae Fast Track Clinic**  
Tuesday to Friday  
01935 384 454  
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**Colposcopy team**  
Monday to Thursday  
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**Jasmine Ward**  
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