

Hemorrhoidectomy

Getting Ready to Learn About a hemorrhoidectomy

Learning something new can be hard. It is even harder if you are not feeling well. The purpose of this education plan is for you and the staff to review this information together. Here are some good things to tell the staff:

- Who you want to learn with you. We would like to have someone who will be helping you at home learn with you.
- The best way for you to learn. Do you learn best by reading a book or pamphlet, or by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus on learning right now.

Because this teaching is about your health, the staff may explain something more than once and give you information in “bite size” pieces over several days. If there is something you don’t understand it’s okay to ask us to explain.

What I Need to Learn About a Hemorrhoidectomy

By the time I leave the hospital I will be able to tell the staff how I will:

1. Be active.
2. Care for my incision(s).
3. Eat to help me to heal from the surgery.
4. Manage my pain.
5. Contact the doctor’s office with questions and/or problems.

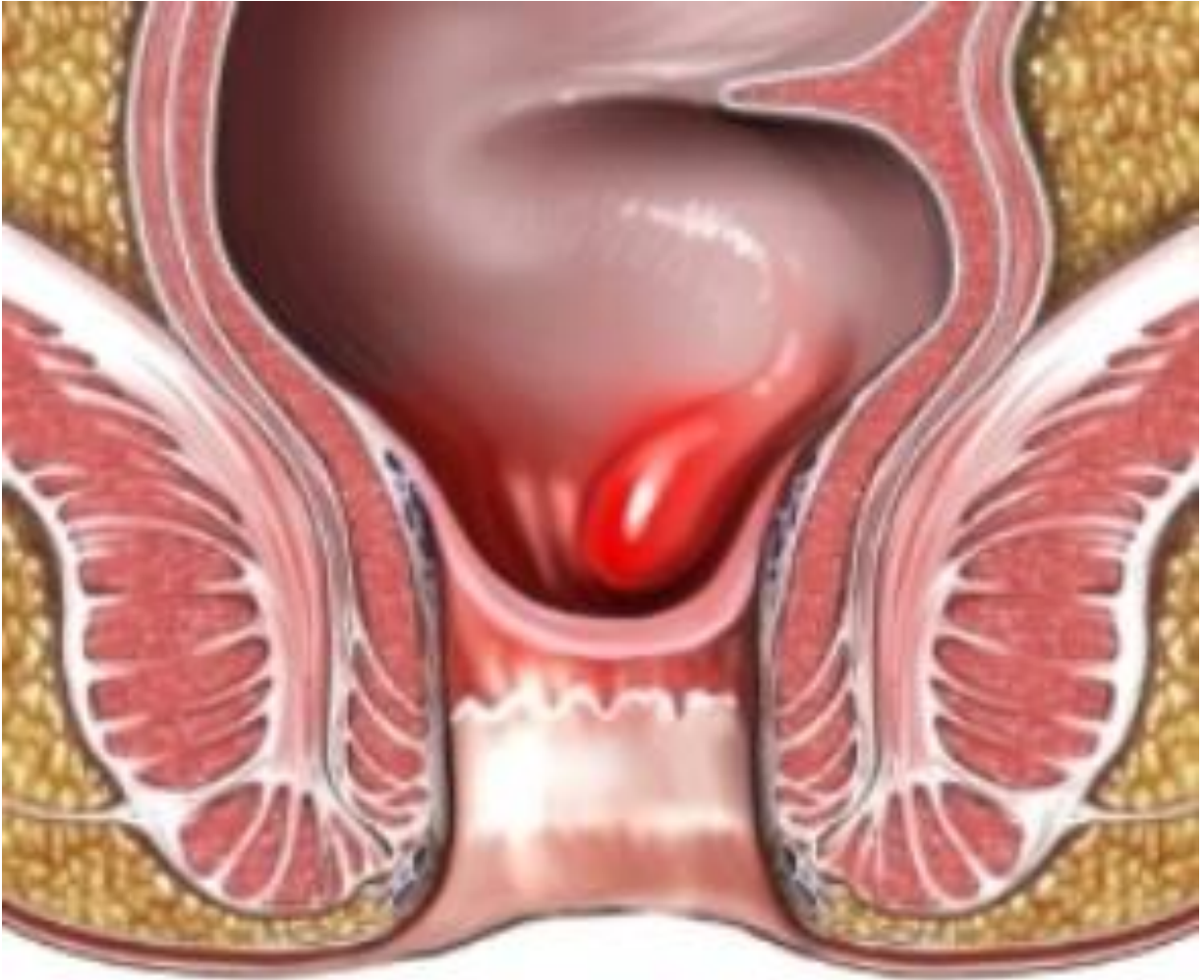
The staff will use three questions to teach me about a Hemorrhoidectomy:

1. What is my main problem?
2. What do I need to do?
3. Why is this important to me?

The staff will ask me to repeat back important points in my own words, or ask me to show what I have learned. They want to make sure that I know about my surgery and how to take care of myself.

What is my main problem?

I am having or have had a hemorrhoidectomy. Hemorrhoids are swollen veins in or around the anus and rectum. A hemorrhoidectomy is surgical removal of hemorrhoids.



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What do I need to do?

I will be able to tell the staff how I will be active after surgery.

After surgery I will:

- Take it easy the night of surgery.
- Return to normal activities as tolerated the day after surgery or as directed by my doctor.
- Not drive until my doctor says I can.
- Not drive if I am taking pain pills that make me drowsy.
- Follow my doctor's instructions on how much I can lift. My doctor will tell me when I can lift more.
- Keep active to help prevent constipation.
- Not insert anything into the rectum unless directed by my doctor.

I will be able to tell the staff how I will care for my incision after surgery.

- Wash my hands before touching my incision.
- Keep the incision clean and dry.
- Take Sitz baths as ordered by my doctor. This is sitting in warm water for 10-15 minutes (bath tub or device to place on top of the toilet). Sitz baths will help the discomfort and keep the area clean. Pat the area dry.
- Apply ointments or creams as ordered by my doctor. I will check with my doctor before using ointments or creams previously used.
- Prevent constipation and straining during bowel movements by drinking plenty of fluids and eat plenty of high –fiber foods (fruits, vegetables, beans, and whole grains).
- Take the stool softener my doctor has ordered.
- Have a bowel movement as soon as I feel the urge.
- Not strain, bear down, or hold my breath during a bowel movement.
- Not sit on the toilet for long periods of time.
- Not sleep with my pets.
- Look for signs of infection:
 - Increasing tenderness or pain in rectal area
 - Increasing swelling in rectal area
 - Increasing drainage from the rectal area
 - Fever (temperature greater than 100.0° F.)

I will be able to tell the staff what I will eat to help me to heal from the surgery.

To help my incision heal, I can:

- Eat at least 2 servings of food rich in protein each day. Foods rich in protein include meats, chicken, turkey, fish, eggs, beans, peas, and peanut butter.
- Eat 3 servings of dairy foods rich in protein each day. Dairy foods that are rich in protein include yogurt, cheese and milk.
- Eat 5 servings of fruits or vegetables each day. These foods are rich in vitamins that will help my incision heal.

To help keep my bowels working normally (prevent constipation and straining) while I recover from surgery, I can:

- Eat whole grain breads and cereals. Eat brown or wild rice instead of white rice.
- Add beans, peas, or lentils to soups and casseroles.
- Eat fresh fruits and vegetables.
- Drink plenty of fluids. Set a goal of 6 to 8 cups a day.

I will be able to tell the staff how I will manage the pain from my surgery.

- I will take the medicine my doctor ordered to manage my pain.
- I will take the medicine before the pain gets too bad. The medicine works best if I take it before the pain is too bad.
- Call my doctor if I think my medicine is not helping or if I feel I am having side effects.
- Check with my doctor or pharmacist if I have questions about my medicine.
- I will talk with the staff about other ways I can manage pain.
 - Warm showers, baths (not until okayed by my doctor), hot water bottles, or warm washcloths
 - “Donut” pillow for sitting
 - Positioning with pillows
 - Relaxation techniques
 - _____

- I will take my pain medicine with crackers or food. This may keep me from having an upset stomach which may cause nausea and vomiting.
- I will not drive if I am taking pain medicine that makes me drowsy.
- Let my doctor know if I am taking aspirin or another blood thinner medicine.
- Let my doctor know if I have bruising or a lot of bleeding.

I will be able to tell the staff when I will call my doctor.

- Increasing tenderness or pain in rectal area
- Fever greater than 100.0° F
- Increasing swelling in the rectal area
- Large amounts of blood from the rectal area
- An aching feeling that develops in the area between my rectum and my genital area
- Pain that is not relieved by pain medicine
- Constipation or trouble urinating

Why is this important to me?

Following these directions will help me heal and keep me safe after surgery.

As part of my care I have received this education plan.

Hemorrhoidectomy Education Plan

Resources for Staff

- [Hemorrhoidectomy](#)- Nursing Reference Center Plus
- [Discharge Instructions for Hemorrhoidectomy](#)- Nursing Reference Center Plus
- [Hemorrhoid Surgery](#)- Medline Plus
- [Lexicomp](#) (search for Hemorrhoidectomy)

Teaching Tools (Items given to the patient)

- Hemorrhoidectomy Education Plan

References:

- Lexicomp
- [Hemorrhoidectomy](#)- Nursing Reference Center Plus
- [Discharge Instructions for Hemorrhoidectomy](#)- Nursing Reference Center Plus
- [Hemorrhoid Surgery](#)- Medline Plus

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Always close each teaching session with the question, “What questions do you have for me?”

***This page is intended for staff use only. Do not give to the patient. This document is not a part of the permanent medical record.**