

POSTOPERATIVE INSTRUCTIONS ANTIREFLUX SURGERY

- **Diet:** Limit your diet to a pureed diet for 2 weeks. If doing well with purees at that point, advance your diet according to the instructions in your pre-op packet. If food sticks or gives you problems, go back to a previous food stage.
 - o AVOID carbonated drinks.
 - o Call the office if liquids do not go down or you are vomiting. You are at risk for becoming dehydrated quickly.
- **Nausea:** Nausea can be common after this surgery. Vomiting can destroy the surgery, so if you feel nauseated, take your ***nausea medication*** right away. If this does not help, please call the office.
- **Medications:** AVOID taking whole pills, especially aspirin or ibuprofen, for the first 2 weeks. Many pills are acidic and if they become stuck in your esophagus, they can burn an ulcer at the location. CRUSH pills or take a liquid form if available.
- **Activity:** Do not lift > 10 pounds until you are seen back in the clinic by your surgeon.
 - o It is OK to shower. Do not scrub the wounds.
 - o Walking is good.
- **Pain:** Sometimes, people feel pain in their neck or shoulders after this surgery. This usually improves over 1-2 weeks. Antiinflammatory medications (liquid or crushed ibuprofen) usually help more than narcotics.
 - o If you have gas pains, take GasX or liquid simethicone as directed on package. Walk around to help gas pains pass as well.
 - o Pain pills are constipating. Take stool softeners (ie. Senna or colace) while you are taking narcotic pain medicines. If you do not have a bowel movement for 48 hours, try taking milk of magnesia.
- Call the office for fever >101.5° F, increased abdominal pain that does not resolve within 30 minutes or with taking pain medication, or your incisions become red and drain pus.