

# **Bladder and Urethral Surgery:**TVT and TOT Procedures — discharge instructions

Taking care of yourself after surgery can speed your recovery, prevent follow-up visits to the doctor, and help you feel better as you heal.

This handout explains how to care for yourself when you get home. If your healthcare providers tell you something different, follow what they say. There's space at the end of this handout to write in additional instructions.

### What is it?

**TVT (tension-free vaginal tape)** and **TOT (transobturator tape)** procedures are used to lift a woman's sagging bladder or urethra into normal position. The procedures require small incisions (cuts) in the groin, lower abdomen, and vagina. The surgeon passes a narrow band of tape through the incisions and under the urethra. The tape supports the urethra and bladder like a hammock.

After the surgery, the tape stays in place. The tape is held in place by friction between the tape and the surrounding tissues. The small stitches that close the incisions slowly dissolve in the days after the procedure.

# What happens AFTER the procedure?

After a TVT or TOT procedure, you'll need to rest at the clinic or hospital for a few hours before you go home.

(If your procedure was late in the day, you may need to spend the night.) Here's what to expect:

- Your nurses will encourage you to walk around as soon as possible. This helps prevent blood clots.
- You'll have some pain. Your doctor will prescribe medication to help control the pain.
- You'll have vaginal bleeding and discharge. Gauze and sanitary pads may be used to absorb this.
- You'll learn how to care for yourself at home during your recovery period. Your nurse will go over the instructions in the next section of this fact sheet.

# How do I care for myself at home?

Recovery is different for every woman. It can last anywhere from 1 to 4 weeks. This section gives information to help you know what to expect — and what to do — as you recover at home. (Be sure to follow the specific instructions of your own care team if they're different from what you see here.)

#### In the first 24 hours...

- Don't drive or use machinery have someone drive you home after your procedure.
- Have someone stay with you for the first 24 hours after your procedure. If you have any problems or side effects from the anesthesia, you may need help.
- Don't drink alcohol for the first 24 hours or at any time while taking narcotic medication.

## Bleeding

After a TVT or TOT procedure it's normal to have a small amount of blood in your urine for the first day or so. (A small amount of blood will make your urine slightly pink.) Gradually, it should go away. Here's what to do to take care of yourself:

- Do NOT douche or use tampons. Ask your doctor when it's okay to do so.
- Wipe front to back after going to the bathroom. This helps prevent infection.
- CALL YOUR DOCTOR if you continue to have blood in your urine, or if the amount of blood seems to be increasing, rather than decreasing.

#### Pain

Pain and soreness should gradually go away as the days pass. To help ease and monitor your pain:

- Take any medication as prescribed. Often your doctor will prescribe medication to treat pain. Follow your doctor's instructions carefully.
- CALL YOUR DOCTOR if you have:
  - Any increase in your pain, or if pain medication isn't working
  - A lot of bloating or swelling in your abdomen
  - Pain, redness, or swelling in one leg, or in your groin
- **GET EMERGENCY CARE** if you have chest pain, a cough (not from a cold), or trouble breathing.

#### **Fatique**

It's normal to feel tired for a few days after your procedure. Try these tips to slowly rebuild energy:

- Try to get at least 8 hours of sleep each night.
- Take rest periods throughout the day.
- CALL YOUR DOCTOR if you become more tired (rather than less) each day, or if you're dizzy for more than a few seconds at a time.

#### **Incisions**

The incisions in your abdomen or groin will be covered with special tape called steri strips. Here's how to care for your incisions at home:

- You may take a shower after the first 48 hours, but do NOT soak in a bath, hot tub, or swimming pool. Wait until your steri strips are off and your incision is well healed.
- **CALL YOUR DOCTOR** if you have any of these signs of infection:
  - Ongoing red bleeding from your incision. (It's normal to have a small amount of bloody discharge — but not red bleeding at home.)
  - Redness, swelling, separation, odor, or yellowish drainage from your incision.
  - Fever of 100.4°F (38.0°C) or greater.
  - Flu-like symptoms (for example, chills, body ache, fatigue, or headache).
  - Increase in pain, or pain medication that isn't working.

## Work, physical activity, and sexual activity

- Here are some guidelines to help you slowly ease back into your normal activities:
- You can go back to work as soon as you feel able to. Unless your job is physically demanding, you will probably be ready to go back within the first week.
- Take it easy for the first 2 weeks. This means:
  - Don't push, pull, or strain.
  - Don't lift anything heavier than 5 pounds.
- ASK YOUR DOCTOR when it's okay to do more strenuous exercise, or resume sexual activity.

#### Constipation

Constipation after your procedure can add to your discomfort. Here's what to do to prevent and relieve constipation:

- Drink at least 6 to 8 glasses of water each day.
- Eat high-fiber foods. Fresh fruit, vegetables, and whole grain bread are good options.
- Don't strain with bowel movements, and don't use an enema.
- Take a stool softener or laxative if your doctor recommends it.
- CALL YOUR DOCTOR if you can't relieve constipation with the measures listed above.

#### Urination

After surgery, you might have trouble urinating. This might be due to your procedure. But it may also come from pain medication, discomfort, or anxiety. Here's what to do:

- Don't strain or bear down while going to the bathroom. This can
  damage the area of your recent procedure. Also, realize that your
  urine stream may be different that it was before it may not flow
  out as forcefully. This is normal after surgery. It's also normal to
  feel urgency (a strong need to urinate), but this should go away
  as you heal.
- Urinate while sitting in a few inches of warm water. Remember to avoid getting your incision wet if it hasn't healed yet.
- Don't let your bladder get too full. Believe it or not, it's easier if you urinate more often.
- Do Kegel exercises to strengthen the muscles around your vagina, bowel, and bladder. To start, tighten the muscles you use to stop the flow of urine. Hold for a count of ten, then relax the muscles slowly. Repeat several times a day, working up to 100 Kegels a day.
- If you can't urinate on your own before you leave the hospital, you may need to go home with a **urinary catheter** (a small tube to drain urine from the bladder). Until you can urinate on your own, follow these instructions:
  - If you go home with a catheter in place, follow the nurse's instructions for caring for the catheter and drainage bag. Do any exercises you've been taught. And make sure you know when and how the catheter will be removed.
  - If you need to self-catheterize, a nurse will teach you how before you leave the hospital. Be sure to self-catheterize as often as your nurse has told you to — usually every 3 to 4 hours during the day.
- CALL YOUR DOCTOR if you:
  - Can't urinate, or have ongoing difficulty urinating
  - Have problems with your catheter, or with self-catheterizing
  - Have bloody, cloudy, or foul-smelling urine
  - Have burning, painful, or frequent urination

Additional	instructions:			