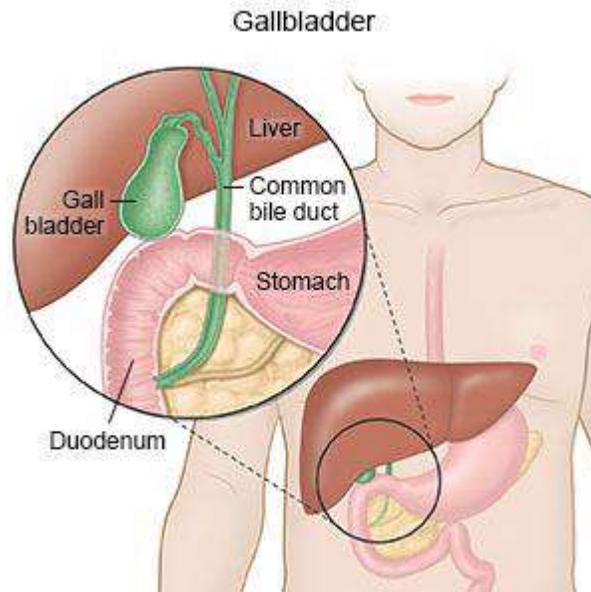


Laparoscopic Cholecystectomy

AMBULATORY CARE:

What you need to know about a laparoscopic cholecystectomy: Laparoscopic cholecystectomy is surgery to remove gallstones and your gallbladder.



How to prepare for surgery:

- Your surgeon will tell you how to prepare. Tell him or her about all the medicines you currently take. He or she will tell you if you need to stop any medicine before surgery, and when to stop. He or she will tell you which medicines to take or not take on the day of surgery. You may be told not to eat or drink anything after midnight on the day of surgery.
- You may need blood or urine tests. You may also need x-rays, an ultrasound, or a CT scan. Tell your surgeon if you had an allergic reaction to contrast liquid. Tell your surgeon about any allergies you have, including medicines and anesthesia.

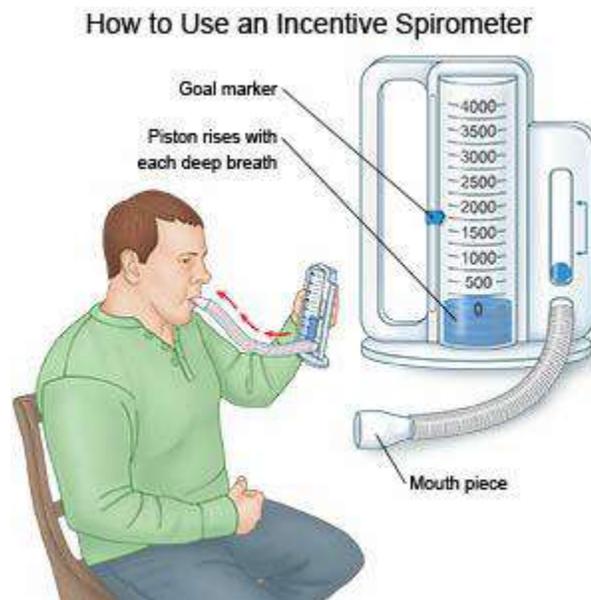
What will happen during surgery:

- Your surgeon will make between 1 and 4 small incisions in your abdomen or belly button. He or she will insert small tools into the incisions. Your abdomen will be filled with carbon dioxide gas to make it swell. This helps your surgeon see your organs better and gives more room to move the tools around.
- Your surgeon will look for and remove gallstones in and around your gallbladder. X-rays or an ultrasound may be used. Your surgeon will remove your gallbladder through one of the incisions. The carbon dioxide will be released from your abdomen. The incisions will be closed with stitches, medical glue, or adhesive strips, then covered with bandages.

What to expect after surgery: You will be taken to a recovery room until you are fully awake. Healthcare providers will monitor you closely for any problems. Tell your healthcare provider if you are in pain or feel like you might vomit. Nausea and vomiting are common after this surgery. Hold a pillow tightly against your incisions when you cough to help decrease pain. Do **not** get out of bed until your

healthcare provider says it is okay. You may be able to go home later the same day, or you may stay in the hospital overnight.

- **You may need to wear pressure stockings or inflatable boots after surgery.** The stockings are tight and put pressure on your legs. The boots have an air pump that tightens and loosens different areas of the boots. Both of these improve blood flow and help prevent clots.
- **Take deep breaths and cough 10 times each hour.** This will decrease your risk for a lung infection. Take a deep breath and hold it for as long as you can. Let the air out and then cough strongly. Deep breaths help open your airway. You may be given an incentive spirometer to help you take deep breaths. Put the plastic piece in your mouth and take a slow, deep breath. Then let the air out and cough. Repeat these steps 10 times every hour.



- **You may be helped out of bed to walk around the same day of surgery.** Movement will help prevent blood clots. You may also be given exercises to do in bed. Do not get out of bed on your own until your healthcare provider says you can. Talk to healthcare providers before you get up the first time. They may need to help you stand up safely. When you are able to get up on your own, sit or lie down right away if you feel weak or dizzy.
- **You will be able to eat and drink gradually after surgery.** You will begin with ice chips or clear liquids such as water, broth, juice, and clear soft drinks. Most people are able to eat normally the day after surgery.
- **Medicines** may be given to relieve pain or nausea. Medicines may also be given to prevent blood clots. You may be bleed or bruise more while you are taking blood thinners.

Risks of a laparoscopic cholecystectomy:

- You could bleed more than expected or get an infection. Any carbon dioxide gas still in your

body can cause neck and shoulder pain. Your gallbladder may leak bile into your abdomen during or after surgery. This can cause a severe infection or an abscess.

- You may still have gallstones after surgery. You may need a different procedure to remove them. Your surgeon may need to make a larger incision than expected during surgery. Your bile duct, bowel, or other organs could be damaged during surgery. This can be life-threatening.

Call your local emergency number (911 in the US) if:

- You feel lightheaded, short of breath, and have chest pain.
- You cough up blood.

Call your doctor or surgeon if:

- Your arm or leg feels warm, tender, and painful. It may look swollen and red.
- You cannot stop vomiting.
- Your bowel movements are black or bloody.
- You have pain in your abdomen and it is swollen or hard.
- You have a fever over 101°F (38°C) or chills.
- You have pain or nausea that is not relieved by medicine.
- You have redness and swelling around your incision sites.
- You have blood or pus leaking from your incision sites.
- You are constipated, have diarrhea, or your bowel movements are pale.
- Your skin or eyes are yellow.
- You have questions or concerns about your surgery, condition, or care.

Medicines: You **may** need any of the following:

- **Prescription pain medicine** may be given. Ask your healthcare provider how to take this

medicine safely. Some prescription pain medicines contain acetaminophen. Do not take other medicines that contain acetaminophen without talking to your healthcare provider. Too much acetaminophen may cause liver damage. Prescription pain medicine may cause constipation. Ask your healthcare provider how to prevent or treat constipation.

- **NSAIDs** help decrease swelling and pain or fever. This medicine is available with or without a doctor's order. NSAIDs can cause stomach bleeding or kidney problems in certain people. If you take blood thinner medicine, **always** ask your healthcare provider if NSAIDs are safe for you. Always read the medicine label and follow directions.
- **Take your medicine as directed.** Contact your healthcare provider if you think your medicine is not helping or if you have side effects. Tell him or her if you are allergic to any medicine. Keep a list of the medicines, vitamins, and herbs you take. Include the amounts, and when and why you take them. Bring the list or the pill bottles to follow-up visits. Carry your medicine list with you in case of an emergency.

Care for the surgery area: Keep the area clean and dry. You may take a shower the day after your surgery.

What to eat after surgery:

- **Eat low-fat foods for 4 to 6 weeks** while your body learns to digest fat without a gallbladder. Slowly increase the amount of fat that you eat.
- **Drink more liquids.** Ask how much liquid to drink and which liquids are best for you.

When to return to work and other activities: You may return to work or other activities as soon as your pain is controlled and you feel comfortable. This is usually 5 to 7 days after surgery.

Follow up with your doctor or surgeon as directed: Write down your questions so you remember to ask them during your visits.

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