

Appendicitis

POSTOPERATIVE INSTRUCTIONS

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WHAT HAPPENS DURING AND AFTER SURGERY?

The operation may be performed either through a small incision in the right lower part of the abdomen, or laparoscopically, through three tiny incisions in the umbilicus and the lower abdomen. Both techniques achieve the same goal, removal of the appendix, and both produce similar results in terms of recovery. If there has been a lot of infection and pus, the surgeon may find it safer to leave the skin open, to prevent more severe complications afterward. In that case, the wound will close by itself, over several days to weeks.

Complications are not infrequent with appendicitis, and their risk increases with more advanced disease stages: while unlikely if the appendix is only mildly inflamed, the risk of a postoperative wound infection or an abscess inside the abdomen or the pelvis after ruptured appendicitis is quite high, sometimes reaching 30%.

Your child will have received intravenous antibiotics during and shortly after the operation. If your child has recovered long before the antibiotics can be stopped, he/she may still be discharged home. In that case, an intravenous line will be left in, to receive antibiotics at home. This will be done by a visiting nurse, as arranged before your child goes home.

HOW DO I CARE FOR THE INCISION(S)?

If the wounds have been closed, they will require little care. The sutures used are absorbable, and will dissolve in a few weeks. You may feel a knot or even a piece of thread sticking out for several weeks, before it eventually disappears. The area is also covered with a plastic film (collodion), or steri-

strips. You should keep the incision(s) dry for at least 3-4 days (your child may be able to shower after 48 hours). After that, the glue or the strips will peel off, and your child can bathe again. If the incision has been left open, we will have arranged for a visiting nurse to help you care for it. Once you are home, care will be coordinated with you, the visiting nurse and the surgeon.

WHAT'S NORMAL... AND WHAT'S NOT?

WOUND PROBLEMS

There may be some mild redness at the wound, but this should improve within a day or two. There may also be a drop or two of clear fluid. If the redness gets worse, or the wound starts to drain more fluid (particularly if it is cloudy or bloody), you should call us.

PAIN

Your child will still be sore for a while, although he/she should not require a lot of pain medication beyond the first few days. If the pain seems to worsen, you should contact us.

NAUSEA/VOMITING

Although your child's intestinal tract may be disturbed somewhat for the first week, your child should not feel nauseous or vomit. If this happens (particularly if he/she vomits yellow-green liquid (bile), you should notify us.

DIARRHEA

Diarrhea, occasionally with a trace of blood, is not that unusual after severe appendicitis. It should only be temporary, however. If it lasts for more than a day or two, or if you are concerned, please contact us.

FEVER

A low-grade fever may still occur for a few days, particularly in the evening. Higher fevers (101° or more) are not normal, and could be the first indication that an abscess is forming, and you should contact us.

FATIGUE

It is extremely common to be tired (or tire easily) after an appendectomy, even if the appendix wasn't that inflamed. It's the body's way of recovering, and sleepiness, low endurance and fatigue may last as long as 4-6 weeks.

You will be expected to return to your surgeon's office within 2 to 3 weeks after discharge from the hospital. Please call us for an appointment.

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