

Procedure Information Sheet - Herniorrhaphy (Adult)

Introduction

Hernia is a protrusion of a sac or part of the bowel through a weak part of the abdominal wall. It may result from physical or coughing. It can be inguinal, femoral, and umbilical or through incision wound.

Indications

Hernia site with severe and continue pain, redness and tenderness are signs that the hernia may be entrapped or strangulated.

Procedure

1. The operation is performed under regional or general anaesthesia.
2. Surgical option can be open or laparoscopic repair.
 - **Open repair**
 - ◇ Incision usually made over the hernia site.
 - **Laparoscopic repair**
 - ◇ 2-3 small incision wounds are made and insertion of laparoscope and other instruments through small ports into the abdomen.
 - ◇ Open repair may be required if the laparoscopic repair is not feasible.
3. Separate the sac and the hernia.
4. A synthetic material (mesh) is placed onto the abdominal wall.
5. Abdominal wound closed.

Pre-operative preparation

1. You will need to sign a consent form and your doctor will explain to you the reason, procedure and possible complications.
2. Take shower before the day of surgery. Pubic hair may require shaving off if necessary as instructed by your doctor. Abdomen and the umbilicus are cleansing with antiseptic before laparoscopic surgery.
3. Fast for 6 to 8 hours before operation.

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Possible risks & complications

1. Injury to neighboring organs such as the bladder, ureters, bowels and blood vessels may require repairing.
2. Scrotal edema.
3. Wound infection.
4. Hematoma.
5. Difficulty in urination.
6. Recurrence of hernia.
7. Sore and numbing wound.

Post-operative information

➤ *In general*

1. You may experience tired, dizzy, nausea or vomiting after general anaesthesia. Please inform nurse if severe symptoms occur.
2. Medication: you may take analgesics as prescribed by your doctor if necessary.
3. Contact your doctor if excessive bleeding, severe pain, tenderness with redness, abdominal pain, or fever (body temperature above 38°C or 100°F) occurs.
4. Follow up on scheduled as instructed by your doctor.

➤ *Wound care*

1. Don't remove the dressing and keep the wound clean and dry.
2. Absorbable stitches are used and removal of stitches is not necessary.
3. Follow up as scheduled if the stitches have to be off.
4. You may take a shower after surgery if the wound is covered by water-resistant dressing; keep the dressing clean and dry.

➤ *Activity*

1. You may resume light, normal activity as tolerated over the first 48 hours.
2. Use your hand to protect the wound when coughing or sneezing to prevent wound disruption and pain.

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3. Restrict lifting and heavy weight and avoid strenuous exercise for 6 weeks after operation. Lifting will put pressure on your wound which takes time to heal properly.
4. Sexual intercourse must be avoided until wound pain subsided.

➤ **Diet**

1. You may resume normal diet after surgery. High fiber diet is highly recommended for preventing constipation.

Remark

The above mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or different individual. Please contact your physician for further enquiry.

Reference: http://www21.ha.org.hk/smartpatient/en/operationstests_procedures.html

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. _____. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Name: _____

Pt No.: _____ Case No.: _____

Sex/Age: _____ Unit Bed No: _____

Case Reg Date & Time: _____

Attn Dr: _____

Patient / Relative Signature: _____

Patient / Relative Name: _____

Relationship (if any): _____

Date: _____