Day Surgery Unit

Advice for patients following a Laparoscopic Cholecystectomy

Definition
This is an operation to remove the gall bladder using keyhole surgical techniques.

Where is my Gall bladder?
Your gall bladder is a small pouch, which sits under the liver on the upper right part of the abdomen. Special juices called "bile" are stored here; they are made by the liver, and help digest food.

Why should I have my Gall Bladder removed?
This is usually because you are experiencing pain due to gallstones. Gall stones form in the gall bladder. These stones can move and block the cystic duct, causing severe pain. This pain is mainly experienced in the right side of the abdomen after eating fatty food. Stones can also cause nausea, vomiting and infection: If a stone moves to the common bile duct and gets stuck, it can cause pain and a yellowish, discoloration of the skin which is a symptom of jaundice.

Surgery
A Laparoscopic Cholecystectomy is performed under general anaesthetic, which means you will be asleep for the operation. Approximately four small holes (about one cm long) are made in the wall of the abdomen. Through these, we put special cameras, linked to a TV screen, and instruments which are used to remove the gallbladder.

Whilst you are asleep you will be given painkillers to make you comfortable. When you awake you will return to the ward where nurses will perform routine checks. You will be encouraged to sleep off the anaesthetic.

For further information on this procedure, including possible risks and complications please ask staff for a copy of:

Laparoscopic Cholecystectomy

Or call in at the Health Information Centre situated in the main entrance opposite reception.
Or telephone 024 7696 6051
Day of discharge

- Before you are discharged, your Consultant or his deputy will come and see you and agree your discharge.
- You must have another responsible adult to collect you from hospital and remain with you for at least 24 hours.
- You will be given medication (painkillers) to take home. Please start taking these medicines immediately, unless directed otherwise by the hospital, as they will help make you more comfortable following your operation. Please take these tablets regularly for the next few days. After these tablets are finished you may your normal painkillers (Paracetamol based over the counter tablets e.g. Paracetamol, Panadol, Paracodol, etc). It is advisable not to take Aspirin based products as these may increase the risk of bleeding/bruising. If however you take aspirin as routine medication it Is advisable to ask your GP about continuing to take it.

Always read the instructions on the medicines carefully

Possible side effects

You may experience:

- Swelling or bruising of wound sites
- Nausea
- Shoulder pain (due to this technical procedure)
- Abdominal pain

These are common side effects after abdominal surgery. Continue to take the painkillers to make yourself comfortable. However, if these symptoms become excessive or you experience any other problems contact your GP.

Constipation is also common and should be avoided as it can cause unnecessary pain and discomfort. You are advised to take plenty of fluids, eat a high fibre diet and if necessary take laxatives.

Eating and drinking

Initially, on returning to the ward, you may have a tube connected to your vein providing you with extra fluids. This will be removed when you can eat and drink normally again. After your operation you may, resume your normal dietary intake when you feel able. Please drink plenty of fluids for the first few days. A normal diet should be introduced gradually. However, a low fat diet is advisable for everyone to follow as a healthy option.

Mobility

- On the ward you will be encouraged to walk as soon as possible, to help the circulation of blood to your legs, reducing the risk of blood clots.
- We advise you to rest for a few days following your operation, and avoid heavy work for one week.
- Occasionally some slight dizziness is experienced after the operation; this is quite normal and should last for only a few days.
- Regular exercise and lifting must be introduced slowly, to avoid any discomfort. Remember listen to your own body, if it hurts don’t do it.
Patient Information

**Bathing**
You may shower or bath in two days after your operation and remove all the dressings. Please ensure your wound is dried thoroughly, as if wet, there may be an increased risk of wound infection. Also leave it open to the air. Do not use talcum powder on your wound. Dress in loose comfortable clothing.

**Wound care**
There are different types of sutures that can be used in your wounds, depending on your surgeon’s preference. Some will need to be removed whilst others are self dissolving so do not need removing.
The sutures you have are: …………………………………………………
And do/do not need removing
Please attend…………………………………………………………………
In……………..days to have your sutures removed/your wounds checked.

**Please note:** You will need to contact your GP surgery to make the above appointment, prior to the date stated

**Driving**
Due to discomfort from the seat belt we advise you not to resume driving until approximately ten days after your operation; however, you must be confident that you can perform emergency manoeuvres.

**If you require further information please contact:**
The Day Surgery Unit: Telephone 024 7696 6868 or 024 7696 6861, between the hours of 8.00am and 9.00pm

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 6868 and we will do our best to meet your needs.

The Trust operates a smoke free policy

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