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## **POST BLADDER SUSPENSION INSTRUCTIONS**

### **CATHETER CARE:**

You may or may not go home with a catheter or tube in your bladder. If you are urinating normally, you probably will not need a tube. If you are not emptying normally, some form of drainage is needed. The options include a catheter from the urethra or a self catheterization routine at time intervals. These will be discussed with you before discharge. The type depends on your individual case and preferences. Separate instructions will be given to you depending on your status. Ask us if you have questions about the catheter management.

### **DIET:**

You may return to your normal diet immediately. However, because the bladder surface or lining may be irritable as a result of the surgery, alcohol, spicy foods, caffeine, and cranberry drinks may cause some irritation or sense of the need to void despite the fact that the catheter is emptying the bladder. If these foods don't bother you, however, there is no reason to avoid them in moderation. More importantly is to keep your urine flowing freely, drink plenty of fluids during the day (8 - 10 glasses). The type of fluids (except alcohol) is not as important as the amount. Water is best, but juices, coffee, tea, and soda are all acceptable.

### **ACTIVITY:**

Your physical activity is to be restricted, especially during the first two weeks home. During this time use the following guidelines:

- a. No lifting heavy objects (anything greater than 10 lbs).
- b. No driving a car and limit long car rides.
- c. No strenuous exercise, limit stair climbing to minimum.

You must restrict very strenuous activities for the next three months (including heavy lifting). Ask us for guidelines at your post-operative visit. Please do not have sexual relations after the surgery until specifically told it is ok.

### **BOWELS:**

Any very large and hard stools that require straining to pass can disrupt the surgery. A bowel movement every other day is reasonable. Use a mild laxative if needed and call if you are having problems. (Milk of Magnesia 2-3 Tablespoons, or 2 Dulcolax tablets as example)

### **MEDICATION:**

You should resume your pre-surgery medication unless told not to. You may be discharged with Iron tablets to build up your blood count and stool softeners to keep the stool soft. Pain pills will be given to help with wound and catheter discomfort. Tylenol (acetaminophen) or Advil (Ibuprofen) which have no narcotics are better if the pain is not too bad.

### **PROBLEMS YOU SHOULD REPORT TO US:**

- a. Fevers over 100.5 Fahrenheit.
- b. Heavy bleeding, or clots in the catheter or during voiding.
- c. Drug reactions (Hives, rash, nausea, vomiting, diarrhea).
- d. IF APPLICABLE, CALL IMMEDIATELY IF THE CATHETER STOPS DRAINING.

### **FOLLOW-UP:**

You will need a follow-up appointment to monitor your progress. Call for this appointment at the number above when you get home or from the phone in your hospital room before leaving. Your follow-up will be determined mainly by your success in urinating adequately and the type of urinary tube needed.