

## Discharge Instructions after Drainage of a Peri-rectal Abscess

An abscess around the anus develops as a result of an infection in glands within the anal canal. Although this infection usually does not become serious, occasionally it may reach the deeper tissues surrounding the anus. This results in the formation of a painful collection of fluid and pus. An incision and drainage of the infected fluid can relieve this pain. The wound that is made is left open to allow any residual pus to drain. Sometimes a dressing is placed in the wound as well.

Following the drainage of an abscess, there is approximately a 50-50 chance for the further development of a fistula. A fistula is a tunnel beneath the skin that starts at the gland which caused the infection and runs to the area of the abscess and then out onto the anal skin. This causes persistent drainage. A fistula may result in the development of further abscesses in the future. It is therefore imperative that patients follow up with their surgeon following drainage of their abscess.

A dressing has been placed over the wound. This should be left in place until you take your first tub bath (sitz bath). This may be in the evening or next morning following your surgery. Your surgeon will tell you the timing. At whichever time you are directed, the outer dressing should be removed. There is usually a dressing in the wound and this should be soaked and then pulled out while sitting in a tub of very warm water. You should then continue to take tub baths with warm water three times a day for 10-15 minutes.

Your wound may continue to drain a large amount over the next several days as the infection slowly heals. Wear a gauze dressing to the wound to protect your clothing. You may also use a sanitary napkin for further protection of your clothing. You may notice bloody discharge for the next four to seven days.

Patients have much less pain after the surgery than they had prior to the surgery. However, depending on the size of the abscess there may be residual discomfort for a few days. Pain should slowly decrease. After a few days if there is a change in course and pain begins to intensify call the office.

## Home Care

### Pain Control:

Prescription e-prescribed/sent to your pharmacy, or;

Handwritten prescription(s); you must take to the pharmacy

- Medication(s) last given @ the surgical center: \_\_\_\_\_
- Next dose of medication(s) to be given @ home: \_\_\_\_\_

**Use the checked pain relievers below as directed by your doctor:**

- \_\_\_\_\_ 1-2 tablets every 4-6 hours **\*\*This medication is a narcotic and anyone taking a narcotic should not drive or operate any machinery. Narcotic medication may also constipate you. See below for recommendations to avoid constipation. Other side effects are possible-ask your pharmacist for more information.**
- Valium** 1 tablet (5mg) every 6-8 hours (for anal muscle spasm)
- Ibuprofen** (Advil, Motrin, or any generic): 3 tablets (600mg) every 6-8 hours
- Acetaminophen** (Tylenol or generic) 2 tablets (1000mg) every 6 hours (Max Dose in 24 hours = 8 tablets/4000mg)

- Topical Ointments:** Apply one or both to the affected area 3-4 times daily after warm water soaks
  - **Lidocaine 5% cream** (Recticare) for pain over the counter

**Constipation Care:**

- Stool Softener:** Docusate (Colace) 1-3 capsules (100 mg each) daily and/or 1 capful of **polyethylene glycol** (Miralax) daily
- Fiber Supplement:** Benefiber 2tsp-1TBSP 2 times per day OR Metamucil 1-2tsp 2 times per day mixed in a lot of water or other non-caffeinated drink (approx.8ozs.)
  - If you have not had a bowel movement by the morning of the fourth day following surgery, take 2 fleet enemas, 1 hour apart (lubricate the tip of the enema well with Vaseline and insert gently). If no result, drink one bottle of citrate of magnesium, which can be purchased at any pharmacy. Following the first bowel movement, you should have a bowel movement at least every other day. If this does not occur and/or two days pass after your initial bowel movement, take an ounce of milk of magnesia. Repeat in 6 hours if no result.
  - Eat a regular diet including plenty of fresh fruit and vegetables. Drink 6-8 glasses of water a day.

**Urinating:** Patient urinated in pre-op \_\_\_\_ Yes \_\_\_\_ No

- **You should urinate** within about 8 hours of procedure. Time of last void \_\_\_\_\_
- **The same muscles need to relax** to urinate and to have a bowel movement. If you are having trouble urinating, take pain medication and/or valium, and sit in a warm tub. While soaking, attempt to relax the bladder and urinate into the water.

**If you are unable to urinate in the first eight hours after your surgery, notify the doctor's office. After hours, go to the nearest emergency room or urgent care center. A bladder catheter will be placed and remain in place for 2 days, you may call the office to have the catheter removed. Once you have started to urinate, drink plenty of water and fruit juices (such as prune juice) after your surgery.**

- **Activity:** Avoid strenuous activity for 1-2 weeks. Pain is the main thing that limits activity.
- **Driving:** No sooner than 24 hours after stopping **all** narcotics
- **Tub soaks:** 15-20 minutes in warm water several times a day and after all bowel movements.
- **Wound Care:** Keep clean and cover with gauze or use panty liner to catch drainage as needed.
- **Bleeding:** Some bleeding is to be expected; however, if it is saturating a pad per hour, please apply pressure and contact the office.
- **Cleaning:** Warm water on tissue, cotton pad, shower, warm tub soak or unscented flushable wipes.
- **Eating/Drinking:** progress to regular diet upon discharge.
- **Call if fevers over 101, increasing pain, or pain is not controlled with trying all the above recommendations.**

- **Post Op Appointment: approximately 3-4 weeks after surgery.**
  - Call to schedule 1-2 days after surgery.

**You will get called by one of the nurses 1 business day after your surgery to answer any questions you might have.**

**After 4:30pm for emergency issues contact (703) 280-2841 to reach the on-call physician.**

**Your procedure was performed by: Dr. \_\_\_\_\_**

My post procedure instructions have been explained to me. I fully understand their content and a copy has been given to me. I will follow-up with my physician if I have any questions.

\_\_\_\_\_  
Nurse Signature & Date

\_\_\_\_\_  
Signature of Designated Responsible Person & Date