

Discharge Instructions for Pilonidal Surgery

You have had a pilonidal cyst removed. Depending on the surgeon's preference, the incision may be down the middle of the buttock crease or off to the side an inch or so. There may be some stitches placed as well. In most cases the majority of the wound is left open to heal in gradually. Caring for this open wound properly is essential for wound healing and to decrease recurrence of the cyst. Because of the difficulty seeing the wound, it is best to have assistance from a spouse, parent or sympathetic friend in changing the dressing.

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.**
- 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 or 4000mg)

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.
- **Activity:** Avoid strenuous activity for 1week. Pain is the main thing that limits activity.
- **Driving:** No sooner than 24 hours after stopping all narcotics
- **Shower:** Please avoid tub soaking and utilize a shower with spray handle.

- **Bleeding:** Don't worry if you have some bleeding, discharge, or itching during your recovery. This is normal. However, if you have prolonged or profuse bleeding or experience passing of clots call the office at once.
- **Cleaning:** Warm water on tissue, cotton pad, shower, or unscented flushable wipes.
- **Eating/Drinking:** progress to regular diet upon discharge.

Wound Care:

- Leave the dressing from surgery in place until the day after surgery.
 - For comfort take pain medication prior to dressing change.
 - The morning after surgery, remove the tape and outer dressing from the wound, get in the shower, and allow the rest of the dressing that is packed in the wound to be soaked with water. Once it is fully soaked pull it out. Unfortunately, this does hurt a bit. When the dressing is removed, you may see a small amount of bleeding. This is normal.
 - Shower the wound twice a day, starting the day after surgery, by vigorously irrigating your wound in the shower for 5-10 minutes. Using a hand-held shower head, if you have one, aim showerhead directly at the wound while bending forward to open the wound. Let the water clean the area thoroughly.
 - Wrap a thin, clean wash cloth or plain 4x4 cotton gauze, around your finger and clean gently, but thoroughly, the inner surface of the wound, removing any surface covering to expose clean, healthy pink tissue. Don't scrub.
 - After shower, pat the skin around the wound edges dry.
 - The repacking of the wound is what usually requires help from another person. Wash hands. You may use gloves, but this is not necessary.
 - Moisten afresh 4x4 inch plain cotton gauze with tap water. Squeeze out excess water. (The dressing should be damp, not wet).
 - Pack the wound gently but not tightly with the moist gauze. Use a Q-tip or your finger to ensure that the gauze reaches the bottom of the wound and place it so that all inner wound surfaces are in contact with the moist gauze.
 - Cover with a dry outer dressing and secure with tape or elastic bandage.
 - Dispose of the old dressing in plastic trash bag with twist tie.
 - As your wound heals, it will close from the bottom and sides, and you will need less and less gauze to pack it.
 - Shave the skin at least 2 inches around the wound at least once weekly. Use adhesive tape to pick up loose hair.
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- **Post Op Appointment: approximately 1 week after surgery.**
 - Call to schedule 1-2 days after surgery.

- **Call the office if you have any of the following:**
 - Fevers over 101, increasing pain, or pain is not controlled with trying all the above recommendations.

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