

## **DISCHARGE INSTRUCTIONS FOR TRANSANAL ENDOSCOPIC MICROSURGERY**

You had surgery to remove a mass (usually a large polyp or small cancer) in the rectum. TEM (Transanal Endoscopic Microsurgery) is a minimally invasive procedure performed through the anus to move rectal masses. Following your TEM, you may experience pain or discomfort in your rectal and anal area. You may also experience difficulty controlling your stool, difficulty urinating, and possibly some rectal bleeding. The following are some general guidelines for proper care after your procedure.

### **Home Care**

- A small amount of bleeding is common following rectal surgery. A sanitary napkin or gauze may be worn over the anal opening to keep the underclothing clean. If there is prolonged or profuse bleeding with passage of clots, call the office at once.
- Difficulty controlling your stool is common in the first couple of weeks after TEM surgery. Do not worry. This will improve over time. The temporary difficulty with stool control is due to the instrument (proctoscope) used to perform the surgery, which stretches the anal muscles.
- Low grade fevers (up to 100 or 101 degrees F) are very common for the first few days after TEM surgery. It does not mean there is a complication. As long as you are not having increasing pain or increasing rectal bleeding, this is normal.
- Difficulty urinating after TEM is usually due to spasm of the urinary sphincter resulting from the instrument (proctoscope) used to perform the surgery. Take the pain medication you were prescribed if needed and do warm sitz baths – either in a bath tub or sitz basin. While soaking, attempt to relax the bladder and urinate into the water. If you are unable to urinate in the first twelve hours after your discharge from the hospital, 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.
- You will be given a prescription for pain medication. Follow the directions given by your doctor for taking this medication. To avoid upset stomach, take your pain medication as prescribed with food in your stomach. Take these drugs exactly as directed. Never take more than the recommended dose, and do not take the drugs more often than directed. If the drugs do not seem to be working, call the office for advice. Do not share these or any other prescription drugs with others because the drug may have a completely different effect on the person for whom it was not prescribed. Some people experience drowsiness, dizziness, lightheadedness, or a false sense of wellbeing after taking opioid analgesics. Anyone who takes these drugs should not drive,

use machines, or do anything else that might be dangerous until they know how the drug affects them. Nausea and vomiting are common side effects, especially when first beginning to take the medicine. If these symptoms do not go away after the first few doses, check with the physician who prescribed the medicine. Side effects may include: dizziness, lightheadedness, nausea, sedation, vomiting, if these side effects occur, it may help if you lie down after taking the medication.

- Avoid strenuous activity for 1 week after your procedure.
- Take sitz baths (sit for 15-20 minutes in warm water) 2 times a day and after each bowel movement if you have any discomfort.
  
- Don't worry if you have some bleeding, discharge, or itching during your recovery. This is normal.
  
- Avoid constipation.
  - Take Benefiber or other psyllium product (Metamucil, Citrucel, Konsyl, etc) one teaspoon twice a day. Take a stool softener such as Colace or Surfak twice a day as well.
  
  - 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 2 days pass without a bowel movement, take an ounce of milk of magnesia. Repeat in 6 hours if no result.
  
  - The use of dry toilet tissue should be avoided. After bowel movements use a wet Kleenex, cotton or Tuck's pads to clean yourself, or if possible, take a warm bath.
  
  - Eat a regular diet including plenty of fresh fruit and vegetables. Drink 6--8 glasses of water a day.

### **Follow--Up**

- Make a follow-up appointment as directed by our staff. The first follow up is usually 3 weeks following surgery.