



## Post-Operative Instructions

### Cryptoscopic procedures

1. Drink plenty of water (up to 6 glasses per day).
2. Have light meals until your stomach is settled.
3. Rest and take it easy. Light activity is okay. Avoid heavy lifting (over 20 pounds) for one week.
4. You may drive if you are not using pain medications with narcotics (ex: Percocet or Vicodin).
5. You may see blood in your urine for up to one week.
6. You may experience urinary frequency or burning for up to one week.

### If you had prostate surgery (TURP or Laser):

1. You may see blood in your urine for up to six or eight weeks.
2. You may experience urinary urgency, frequency or burning for up to eight weeks.
3. Rest and take it easy. Light activity is ok. Avoid lifting (over 20 pounds) for three weeks.
4. Please use common sense, do not go home and paint your bedroom.

### If you have a catheter:

1. Drain the leg bag as the bag fills and before bedtime.
2. It is okay to shower. Dry the bag and tubing.
3. Wear comfortable clothes, such as sweatpants.
4. If the catheter is causing irritation, apply Neosporin ointment three times per day to the end of the urethra (insertion site).
5. You may experience urinary urgency or leaking around the tubing. A bladder spasm will cause this to happen. Usually it will pass within a few minutes. Lay down for a few minutes or take one of the prescribed pain medications.
6. Unless changing the bag, never disconnect the tubing.

### If you have a stent:

1. Stents can cause a variety of symptoms such as urinary frequency, urgency, visible blood in the urine, bladder spasms and back discomfort, especially when urinating.
2. Limit your activity. The more you do, the worse the stent will feel.
3. See the instructions listed above.

### Constipation:

1. This may occur as a side effect of the pain medications or prolonged catheter use.
2. Purchase Colace from the local pharmacy. This is an over-the-counter stool softener. Take this for about one week while you are using pain medication
3. If constipation persists, try Milk of Magnesia, Dulcolax, or a Fleet enema

### Resources:

[Robert Wood Johnson University Hospital](#)  
[Somerset Ambulatory Surgical Center](#)