



BRIGHAM UROGYNECOLOGY GROUP  
**Suburethral Sling Post-Operative Instructions**

To heal properly and to make sure you do not damage the sling before it can heal, please follow these instructions:

1. Although many women have little or no pain after the procedure, your doctor may prescribe pain medication for you if needed. Most patients do well with two 500mg Tylenol or 600mg Ibuprofen every 6 hours. Please remember to take it easy and rest.
2. Important restrictions:
  - You will have an incision inside the vagina that needs to heal. Therefore, it is important to have pelvic rest until after your post-op visit. This means nothing in the vagina - no tampons, sex, etc. for up to 6 weeks.
  - We want to make sure the sling heals in its proper location. Therefore, no lifting of more than 10 pounds for 2 weeks after surgery. No lifting greater than 20 pounds until 6 weeks after surgery.
  - You may end up going home with a Foley catheter with a plug or attached to a bag. If so, make sure the tube is not pulling tight on the urethra. If you have a bag, drain it when full. You may strap the bag around your thigh when on your feet, or let it dangle by the side when lying down. If you have a plug, drain the catheter every 2-3 hours during the day or earlier if you feel like you have to go, and at night, attach the tube to the night bag.
3. Things you can do:
  - It is ok to drive 24-48 hours after having surgery if you are not taking pain medication and are not in any significant pain.
  - You can return to work (as long as it does not involve lifting or straining) as soon as you feel ready-usually within two weeks.
4. Questions you may have:
  - Are vaginal spotting and discharge normal and how long will they last?  
-Spotting and vaginal discharge are normal and may last for about 6 weeks.
  - Can I still experience occasional incontinence?  
-Yes, you may still have occasional incontinence. The sling is intended to correct stress incontinence (urine loss with laughing, coughing, sneezing, exercise, and physical activity). Urge incontinence (urine loss with a sudden urge to urinate) may or may not improve with the sling. If urge incontinence persists after surgery, medication, pelvic floor physical therapy, or additional procedures may be recommended.
5. What things should I report to my physicians and nurses?

- You should report any excessive bleeding or pain, redness over puncture sites, and inability to pass your urine over 6 hours.
6. How do I reach the physicians and nurses?
- During the week day from 8-4:30 please call the office (617) 732-4838 and press #2 to leave a message for the nurses on the voice mail. Please leave your medical record number, name and phone number where you can be reached. Even if you were operated on at South Shore Hospital or Newton Wellesley or Faulkner Hospital, ALL calls go to the Brigham office.
  - Before or after hours, or on the weekends or holidays, please call the office (617) 732-4838 and press #0 to reach the paging operator at the Brigham and Women's Hospital. The page operator will page the clinician on call. Even if you were operated on at South Shore Hospital or Newton Wellesley or Faulkner Hospital, ALL calls go to the Brigham office.
  - If you have any trouble reaching us through the methods described above, call the Brigham Page Operator at 617-732-5500 and ask him/her to page the **urogynecologist on call**. (Do not ask for a specific doctor as he/she may not be the person on call and may not be able to receive your page.)