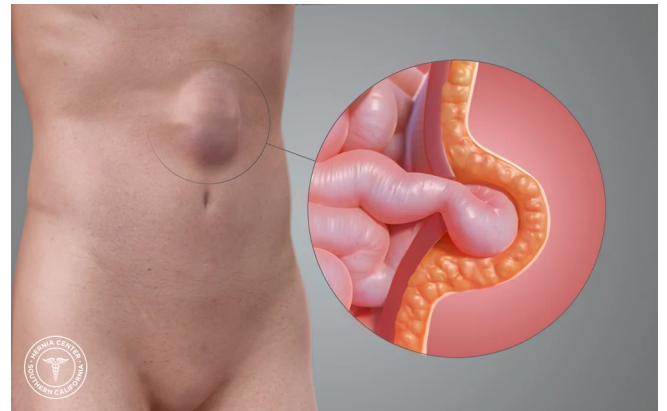




Robotic Assisted Ventral Hernia Repair (Umbilical, ventral or incisional hernia)

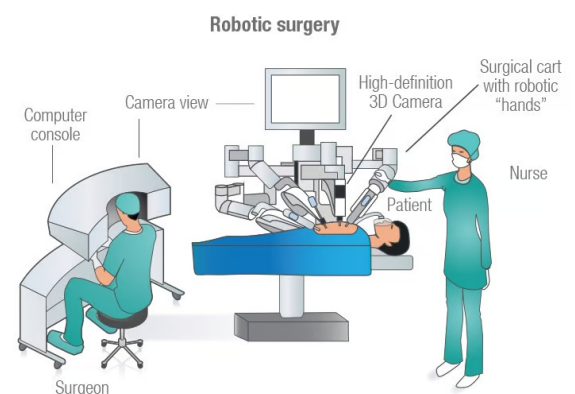
Understanding your Hernia and the Risks

- A hernia is a hole in the abdominal wall. The bulge you feel protruding is something that belongs inside your abdomen but is passing through this hernia.
- The contents can be intestine, or adipose tissue
- This can become trapped (incarcerated) or even lose its blood supply (strangulated). Either case can be a medical emergency.
- The purpose of a hernia repair is to close this 'opening' so your intestines can not get stuck or strangulated through this opening.
- Hernias typically enlarge over time. Incisional hernias (those that are a result of a previous operation) are most likely to enlarge over time.



What Is a Robotic Operation?

- Robotic surgery is a type of laparoscopic operation (small incisions). Every movement by the robot is controlled by the surgeon at the console. The robot does not operate or even move independently.
- The surgeon is present in the room and within a few feet from the patient
- The robotic console provides better



visualization, 3D HD cameras, and better instrument stability.

Before Your Surgery

- No food or drink after midnight unless otherwise instructed
- The following medications usually need to be held before the operation.
 - Anticoagulation (Aspirin, Brilinta, Eliquis, Coumadin, Plavix, Xarelto, ect). Discuss specifics with your surgeon and staff.
- Shower the night before or morning of surgery
- Wear loose-fitting clothing
- Arrange transportation home. Someone will need to stay with you the night of the operation.

After Your Surgery

- Walk frequently beginning the day of surgery
- Advance diet as tolerated; initially choose lighter meals
- Do Not lift objects heavier than 10–15 pounds for SIX weeks (or as directed)
- Keep incisions clean and dry.
 - You may shower the day after surgery
 - Do NOT soak the incision in water (pools, tubs, baths, ect) for 3 weeks
- Most patients return to desk work within several days and more strenuous activity in 5–6 weeks, depending on recovery

Diet

- You have no dietary restrictions after the operation. Your appetite may take a day or two to return to normal
- Stay hydrated.

Normal After Surgery

- Mild shoulder discomfort from the gas used during surgery. Resolves after 48h
- Mild bloating that can last for 1-2 weeks
- Mild fever up to 100.5°F. Fever Greater than 101.5°F (38.6°C) should be reported to your surgeon.

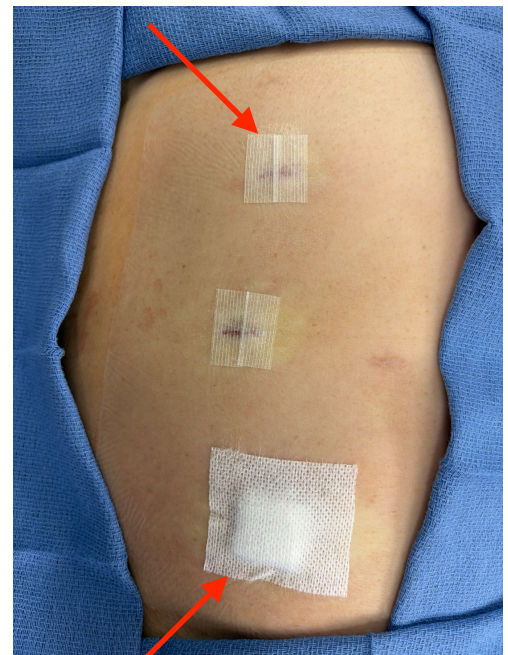
Incisions

- Bruising around the incisions is normal
- One incision hurts more than the other incisions, this is normal. This is the incision where the gallbladder is removed from the body and often is sutured closed at the muscle. This pain generally resolves by 6 weeks
- You will feel a bump under each of the incisions. This is scar tissue and will soften and flatten after 1-2 months

Bandages

- STERI-STRIPS:
 - The top layer of bandages can be removed after 24 hours. This is a large square of tape. Underneath this bandage are smaller bandages called stern-strips
 - Steri-strips will usually fall off after 10 days. If they have not fallen off after 14 days, peel them off yourself.
 - You can shower with stern-strips in place.
- DERMABOND
 - This is a thin layer of glue over the incision. It will flake off after 7-10 days but it can also require gentle removal with your fingernail after 14 days.

Steri-Strips



Top layer - bandage/gauze

Constipation

- Constipation is common after general anesthetic and during the use of pain medication.
- If you do not have a bowel movement within 48h after your operation, take laxatives
- Mirilax 17mg powder twice daily until constipation has resolved

Physical Restrictions

- Do not lift anything over 10 pounds for SIX weeks after your operation

- Do not exercise within FOUR weeks of your operation
- After FOUR weeks, you can begin light cardiovascular exercise such as walking or an elliptical machine
- In many cases, patients feel discomfort with activity for up to 12 weeks. Please be patient with your post-op pain. It resolves in all cases.

Call JRK Surgical If You Experience

- Fever greater than 101.5°F (38.6°C)
- Increasing redness, swelling, or drainage from an incision
- Persistent nausea or vomiting
- Worsening abdominal pain

Seek Emergency Care Immediately For

- Chest pain
- Shortness of breath
- Heavy bleeding
- Loss of consciousness

Youtube Videos of Similar Operations:

- Simple Ventral Hernia Repair with Mesh
 - <https://www.youtube.com/watch?v=Jd4Mw7u6B84>
- Complex Ventral Hernia Repair with Mesh
 - <https://www.youtube.com/watch?v=-NJo7fDrboM>