



# PETER M. LOTZE, MD

FEMALE PELVIC MEDICINE & RECONSTRUCTIVE SURGERY

STRESS INCONTINENCE PROLAPSE OVERACTIVE BLADDER HORMONE REPLACEMENT THERAPY

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## **Patient Guidelines Following Sacral Neuromodulation** **(Axonics, Medtronics)**

*Please be aware that these generalized guidelines may not reflect recommendations for your recovery following surgery. If you have any questions, please contact my office at 713-512-7810.*

**1. Ice** – An ice pack can feel good on the buttocks after surgery. It is not necessary but use it if you like it. If you do not like it, you do not have to use it. When using ice, use it only up to 20 minutes per hour. **DO NOT USE HEAT.**

**2. Bathing** – Please proceed with just showers for right now (no tub baths). We will let you know when you can resume tub baths.

**3. Diet** – It is fine to immediately resume your normal diet after surgery. Please use your common sense and avoid foods that you know are constipating.

**4. Ambulation** – It is not recommended that you pursue bed rest after surgery. This can encourage blood clots. You are free to move around as you wish.

**5. Stairs** – It is okay to go up and down stairs when you get home.

**6. Driving** – You may resume driving as soon as the next day if you feel that you are capable of safely doing so. Driving will not necessarily have any negative effect on your surgery. The key thing to remember is you do not want to be so sore that it prevents you from quickly hitting the brakes if you need to. Again, please use your common sense on determining when you feel like you can safely drive. Most people report that they can drive within about 1 day after the surgery.

**7. Discharge Medications** – The following list includes the various discharge medications that may be provided. We have found that some pharmacies would not prescribe the over-the-counter medications that were prescribed to you. This list can be used as a reference for how to take your medications:

- **Acetaminophen 500 mg tablets (“Extra Strength Tylenol”)**: Use this as your main pain medication. Take 2 tablets (1000 mg) every 8 hours as needed for pain. **I would recommend that you take this around-the-clock for the first 1 to 2 days during your recovery process.** After that, you can start taking them on an as-needed basis. Do not exceed 4000 mg of acetaminophen in 24 hours. Doing so could possibly cause a fatal liver injury.
- **Toradol (Ketorolac) 10 mg tablets**: Take 1 tablet every 6 hours as needed for pain.
- **Tramadol 50 mg tablets**: This may occasionally be prescribed if you cannot tolerate Toradol (Ketorolac). Take 1 to 2 tablets every 6 hours as needed for breakthrough pain. **Consider taking it on a scheduled basis for the first 24 hours after surgery to help with pain control.** After the first 24 hours, change to taking it on an as-needed basis. Use this only as your backup pain medication and not your primary medication.
- **Macrobid (Nitrofurantoin) 100 mg tablets**: Take 1 tablet twice daily for approximately 7 days. This is to attempt to reduce the risk of a bladder infection following surgery.

**8. Restrictions** – Please review the restrictions that we have previously discussed during your recovery process. In general, restrictions include no heavy lifting greater than 10 pounds. You should also avoid unnecessary straining. You will strain getting in and out of a car, up off the floor, and and out of bed. That is okay. Straining examples that I am referring to would be more like moving a kitchen table by yourself or trying to hold back your dog from chasing the cat. Casual walking is fine immediately after surgery. However, do not power walk or get on a treadmill. Please do not get on a bicycle, including stationary bicycles. Do not get in a swimming pool or swim. If you are unsure of any other issues regarding restrictions, please contact my office.

- For **Stage I** (placement of a lead), the restrictions are for **2 weeks**.
- For **Stage II** or **any revision**, the restrictions are for **4 weeks** (begins at the time of Stage II/revision surgery).

**9. Follow-up** – At the time your surgery was scheduled, we typically schedule several follow-up visits. If you do not recall when these visits are scheduled for, please contact my office.

If you need to contact me, please call: 713-512-7810

Visit My Website: [PeterMLotzeMD.com](http://PeterMLotzeMD.com)

