OUTPATIENT SURGERY POST OPERATIVE INSTRUCTIONS

When your child goes home: They may feel some dizziness & sleepiness for several hours following the surgery/procedure. Most children do not experience any nausea/upset stomachs after the anesthesia.

Parents: Either you or a responsible relative will need to take the child home and stay with them. Make sure your child takes their post operative medications (if any were ordered). Encourage the child to eat a light meal after the procedure, a special or favorite meal should be saved for later in the day or the next day. Contact your child's surgeon if they develop excessive bleeding, pain or a temperature above 101 degrees.

Your surgeon's office telephone # is (909) 558-7787.
The hospital operator's # is (909) 558-4000, ask for the Pediatric Surgery Resident on call.

Port-a-catheter removal

Wound and dressing care: Some discoloration & a feeling of thickness at the incision site are common. Leave the clear dressing/dermabond in place. Please do not apply Neosporin or other petroleum base ointments as it will dissolve the dermabond.

Bathing: Wound closure with Derma Bond: May bathe the day after surgery.
Wound closure with clear dressing/steri-strips: Do not immerse the incision site in water for 3 days. Clean the site daily with soap and water.

Activity: Unless specified all ages may resume all therapies such as OT/PT.
Unless specified all pre-school/school age children/adolescents may return to school on Monday following a Friday surgery or Thursday following a Monday surgery.
Infants: no restrictions on activity.
Pre-school children: avoid rough-housing, otherwise play as usual.
School age: No playground or club sports until the child is seen in clinic.
High school age: No team sports/club sports until the child is seen in clinic.
Swimming: May swim once the dermabond is off or 2 weeks from the day of surgery.

Diet: Regular diet/formula

Follow up: Routine follow up is not needed unless there is a question/concern. We recommend follow up with the physician/team who was managing the Port-a-catheter.