# Do you want to know?

## Cholecystitis/Laparascopic Cholecystectomy

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## What is it?

Cholecystitis is an inflammation of the gall bladder. Factors associated with cholecystitis are use of oral contraceptives, sedentary life style, family history, and obesity. Cholecystectomy (excision of the gall bladder) is the procedure of choice for most patients with cholecystitis. It can be done through an incision in the abdomen or laparoscopy (endoscopy).

## What do you need to know?

**Post Cholecystectomy**

**Drugs**

Take medications as prescribed by your physician. Complete antibiotic course as ordered.

**Diet**

- Follow a light diet; avoid the intake of fatty and fried food for the first week after surgery until tolerance is established.
- Loose weight if overweight.

**Activity**

- Resume gradually normal activity over the next 2 to 3 days after surgery as tolerated.
- Avoid driving for one week after surgery.
- You may have a shower 3 days after surgery.

**Therapeutic Measures**

- If a drainage tube is kept, follow your physician/nurse instructions.
- Avoid kinking, clamping, or pulling the tube.
- Monitor the amount and the color of drainage frequently. Measure and record drainage daily.
- Keep the skin clean and protected from bile (secretion of the gall-bladder). Bile is extremely irritating to the skin.
- Empty the bag as needed.
- Keep a sterile dressing over the surgical site. Change dressing as ordered by physician.
- Monitor color of urine and stool. Stools will be grayish- whitish if bile is flowing out of the drainage tube. The normal color should gradually appear as the drainage amount decreases.

**Considerations**

Report to the physician any sign of infection such as redness, swelling, drainage from the site and high temperature.

## INSTRUCTIONS

**The content of this educational leaflet is of general information. Ask your physician or health care provider if this content applies to you.**

**Prepared by the Nursing Services in coordination with other health care disciplines.**

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