

MONARC SUBURETHRAL SLING
PATIENT DISCHARGE INFORMATION

ABOUT THE PROCEDURE:

- The Monarc Suburethral Sling is a minimally invasive operation performed to correct stress urinary incontinence.
- The procedure is performed under a general anaesthetic and takes approximately 30 minutes.
- A small incision is made on the vaginal wall under the urethra and another two small incisions outside the labia for placement of the needles and tube.

FOLLOWING THIS PROCEDURE:

It is Normal to Expect:

- To stay in hospital for between 1 and 2 days.
- Urinary frequency for up to 72 hours.
- Dysuria – burning and stinging when you pass urine for up to 72 hours.
- Haematuria (slight blood stained urine) for up to 72 hours.
- Spotting and vaginal discharge are normal and may last for 4 to 6 weeks.
- You should be able to return to non-physical employment within 10 to 14 days.

MANAGING PAIN POST OPERATIVELY:

- It is recommended that you use Panadol/Panadeine and/or Ibuprofen as prescribed or directed.
- In addition to the above medications, you may be discharged home from hospital with stronger pain relief. Please take as directed by your specialist or the hospital staff.

HYGIENE:

- Shower as normal. Do not swim in pools, use baths or spas until you have been reviewed by your specialist post-operatively.
- Sanitary pads/liners should be used and changed regularly. Do not use tampons.
- Abstain from sexual intercourse until your review appointment with your specialist.

PHYSICAL ACTIVITY:

- You must rest and allow healing after surgery.
- You will be seen by a physiotherapist during your hospital stay to revise your post-operative activity.
- Do not drive until two weeks post surgery unless you are advised otherwise.
- Do not lift anything heavy for six weeks. This includes shopping bags, washing baskets, children and anything more than 2kgs.
- Do not play sport, exercise or do heavy housework for six weeks.
- Do walk regularly. Start gently and gradually increase your speed and distance.

BLADDER AND BOWEL FUNCTION:

- Drink 6-8 glasses of fluid each day.
- Eat a high fibre diet that includes fruit and vegetables.
- Ensure your bowels are regular. Please avoid constipation. If you are taking pain relievers that contain narcotic (Panadeine or Endone) you may become constipated. You can take bowel medications such as Movicol or Lactulose if needed. You can buy these from the chemist without a prescription.

IF YOU HAVE ANY OF THE FOLLOWING PROBLEMS:

- Increasing abdominal or pelvic pain that is not eased by mild pain relief medication.
- You are concerned about the amount or duration of bleeding or you are passing clots.
- Your vaginal discharge is offensive.
- You have problems voiding, eg. pain or burning on passing urine, the need to pass it frequently, or increasing difficulty emptying the bladder.
- Nausea/vomiting that does not settle.
- You have a fever or chills.
- You have calf pain, tenderness or swelling/ any shortness of breath or chest pain.

Please seek immediate help as follows:

1. During office hours of 9am to 5pm Monday to Thursday and 9am to 4pm Fridays, contact Care Gynaecology: Phone (02) 6058 6188 and dial 2 to speak to the Practice Nurse.
2. Contact the hospital you attended for your surgery:
Albury Wodonga Private Hospital: Phone (02) 6041 1411
3. Contact your normal GP or
4. If you have further concerns, present to the Albury Wodonga Health (Wodonga Hospital) Accident and Emergency Department.

Note: Albury Wodonga Health (Albury Hospital) Accident and Emergency Department does not have gynaecology services.

POST OPERATIVE FOLLOW UP:

- You will receive a follow up phone call from our Practice Nurse at approximately seven days following your procedure to check on your progress and discuss your pathology results (if applicable).
- You will have a post-operative appointment with your specialist to check on your recovery (usually at six weeks post surgery).