



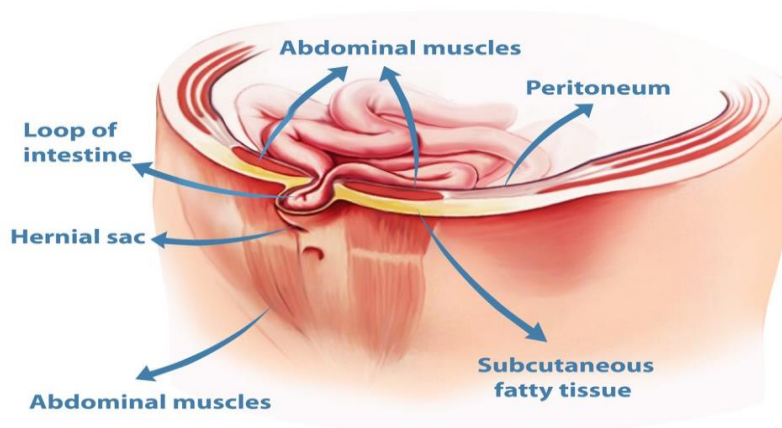
## ISFAHAN MILAD HOSPITAL

### Hernia Surgery: Overview and Instructions

#### What is a Hernia?

A hernia occurs when an internal organ or tissue (usually the intestines) pushes through a weak spot in the abdominal wall. This appears as a bulge under the skin, which becomes more prominent when standing, coughing, or straining, and may reduce when lying down.

Hernias may cause discomfort or pain, and if untreated, can lead to complications like bowel obstruction or strangulation. Surgery is typically required for a permanent solution.



## Types of Hernias

### Inguinal Hernia

The most common type, especially in men. It appears in the groin area and may extend into the scrotum. If untreated, it may trap intestinal contents, requiring emergency surgery.

### Umbilical Hernia

Occurs around the belly button (navel). It is common in infants and may close on its own by age 4. In adults, surgical repair is usually needed.

### Incisional Hernia

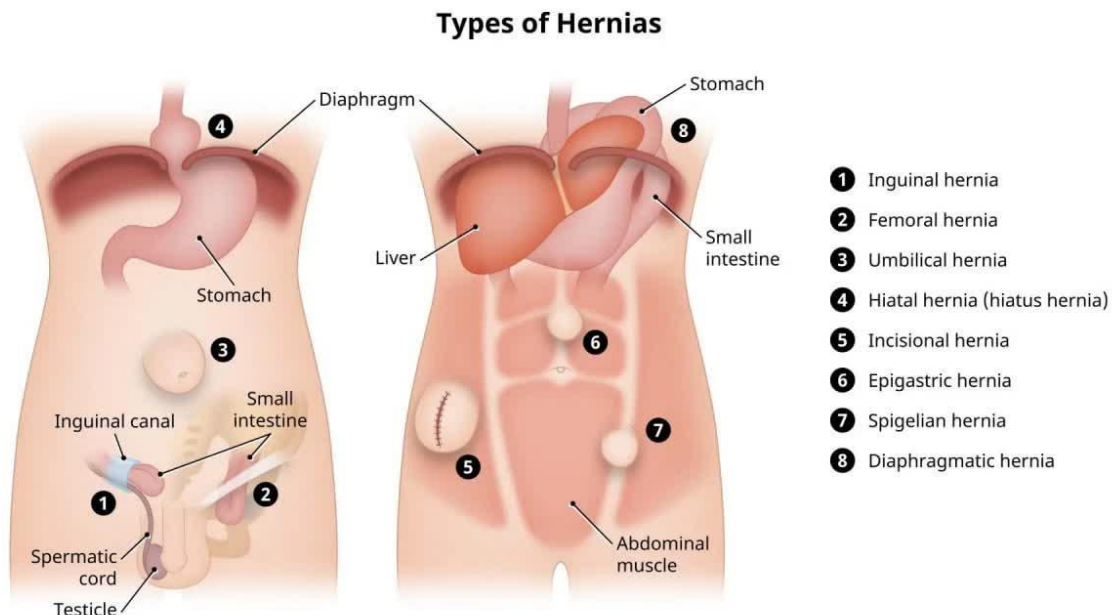
Develops at the site of previous abdominal surgery where the muscles didn't heal properly. The abdominal contents protrude through the weakened area.

### Femoral Hernia

Occurs lower than the inguinal hernia, more common in women. Although usually small, it carries a high risk of trapping internal organs and often requires prompt surgical treatment.

### Epigastric Hernia

Appears in the midline of the upper abdomen, between the belly button and chest. Often small and painless but may need surgery if large or symptomatic.



## Pre- and Post-Surgery Care (Overview)

### Before Surgery

Medical evaluation: Includes physical exam, blood tests, possibly imaging (ultrasound, etc.)

Medication review: Blood thinners (like aspirin) should be stopped a few days prior with physician approval

Wash the night before or the morning of surgery with antiseptic soap

Do not eat or drink for 6–8 hours before surgery

A family member or friend should accompany the patient for support

### General Care After Surgery

Light rest is advised for the first few days

Walking is encouraged from the second day onward

Avoid heavy lifting: For 4 to 6 weeks to prevent recurrence

Medication adherence: Take prescribed painkillers, antibiotics, and anti-nausea meds as directed

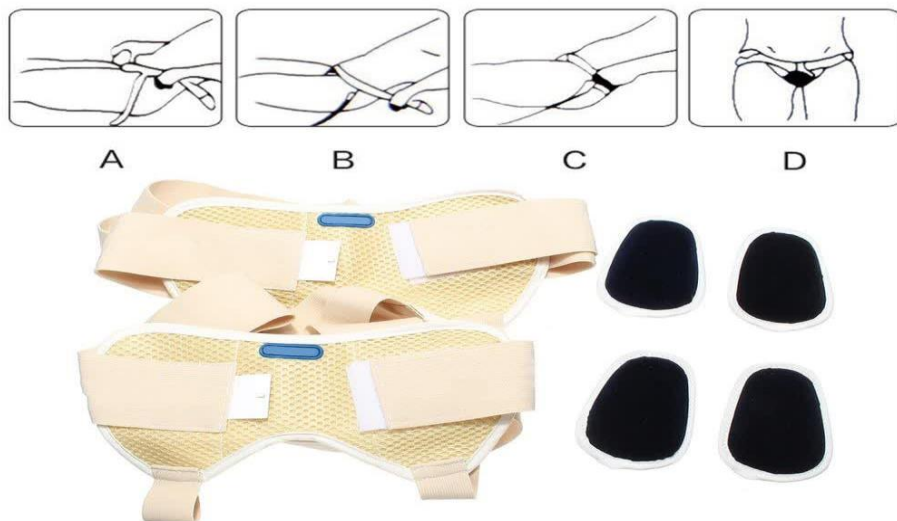
### Specific Postoperative Instructions

#### Walking

Gentle walking from the first day post-surgery is encouraged

Avoid prolonged sitting or lying, which can increase risk of blood clots and constipation

#### Hernia Support Belt (If Advised)



Use only if prescribed by the doctor

Long-term use without medical indication is discouraged

Mostly used prior to surgery or for a short time post-op

### **Wound and Dressing Care**

Keep the surgical site clean and dry

Change dressing daily or as instructed by the healthcare provider

If the dressing becomes wet or soiled, replace it immediately

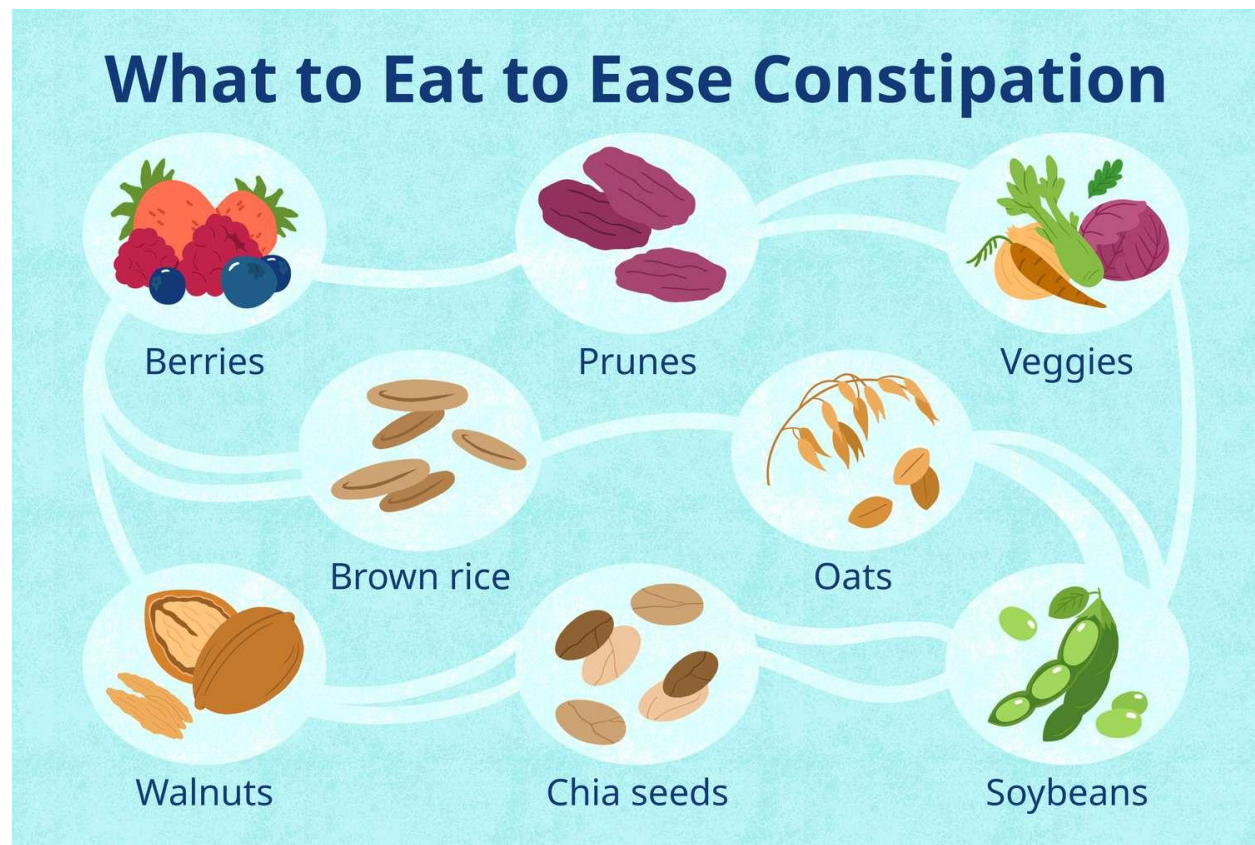
### **Dietary Guidelines**

Start with fluids and light foods in the first 24 hours

Eat high-fiber foods (fruits, vegetables, whole grains) to prevent constipation

Avoid gas-producing foods (beans, soda) and constipating foods (excessive white rice, unripe bananas)

Drink at least 8 glasses of water daily.



### **Warning Signs (Call your doctor)**

Seek medical attention immediately if any of the following occur:

Fever over 100.4°F (38°C)

Persistent or severe pain at the surgery site

Redness, swelling, or foul-smelling discharge from the wound

Open or gaping stitches

Repeated nausea or vomiting

No gas or bowel movement for more than 3 days

A hard, painful bulge that doesn't reduce (possible recurrence or strangulation)

Let me know if you'd like this in a formatted PDF, print-ready handout, or with illustrations/diagrams.

### **Contact Information:**

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