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If you've had an attack of painful gallbladder symptoms, you're not alone. Gallbladder disease is very common. To treat the problem, surgery to remove the gallbladder is recommended. This relieves pain and prevents further attacks. Know that you can live a full healthy life without a gallbladder. You will still be able to digest normally.

SYMPTOMS OF GALLBLADDER DISEASE

Gallbladder problems can cause painful attacks, often after a high-fat meal. Some people have only one attack, other have many. Common symptoms include:

- Severe pain or aching in the upper abdomen. Pain may come and go or be consistent
- A dull ache beneath the ribs or breastbone
- Pain in the back or right shoulder blade
- · Nausea, upset stomach, heartburn, or vomiting
- Loss of appetite

Q&A About Laparoscopy

What is laparoscopy?

It is a method of performing surgery which requires only small incisions in the skin. A device called a laparoscope is used. The laparoscope is a thin tube that contains a small light and camera. It is put into the abdomen through one small incision. The scope sends live video from inside the body to a monitor. This lets the doctor see and work. Surgical tools are put through other small incisions in order for the surgery to be completed.

Why not just remove the gallstones?

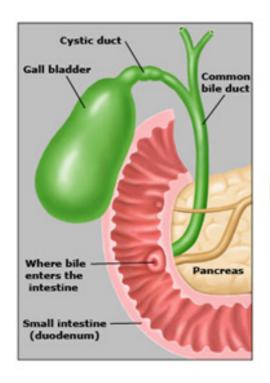
Unless the gallbladder is removed, more stones will likely form. The gallbladder may also need to be removed for reasons other than stones.

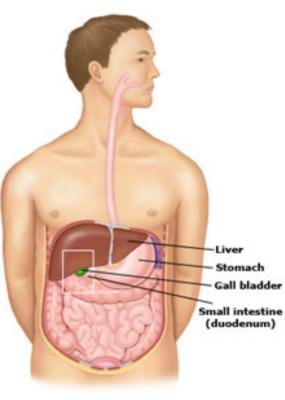
Is the surgery always done with laparoscopy?

Not always, but laparoscopy has certain advantages. Scarring from past surgeries or other factors may mean open surgery is safer for you.

Can surgery be performed during pregnancy?

If symptoms are severe enough, your doctor may advise having surgery during your pregnancy. This helps protect your health and the health of your baby.





UNDERSTANDING THE GALLBLADDER

The gallbladder sits just beneath the liver in the right upper side of the abdomen. Its job is to store and release bile, a fluid made by the liver. Bile helps break down fats in the food you eat. Normally, bile moves smoothly through the digestive system. But if stones form in the gallbladder, they can block the flow of bile. This can cause pain and lead to serious problems.

WHEN GALLSTONES FORM

Most gallbladder problems are caused by gallstones. These form when substances in the bile crystallize and become solid. In some cases, the stones do not cause any symptoms. In others, they irritate the wall of the gallbladder. The stones may also move into and block nearby ducts which stops the flow of bile and can lead to pain, nausea, and infection. Jaundice, a buildup of bile chemicals in the blood, can also occur. Jaundice symptoms include yellowed skin and eyes, dark urine, and itching.

PROBLEMS IN THE COMMON BILE DUCT

The common bile duct is formed by the junction of ducts leading from the liver and gallbladder. It is a common place for blockages to occur. This most often happens when a stone moves from the gallbladder into the duct. Bile may back up into the liver, causing jaundice. If a gallstone blocks the junction with the pancreatic duct, it can cause pancreatitis. This is a serious and painful condition that can require emergency treatment.

YOUR TREATMENT OPTIONS

You will have a thorough medical evaluation. This includes certain tests. Your surgeon will then talk with you about surgery and other treatments, together you will decide on the best option. Be sure to ask any questions you have, if you think of questions once you are at home, always feel free to call the office. Learn the benefits and risks of all your options. By being informed, you can help your doctor ensure that your needs are met.

TESTS YOU MAY HAVE

To learn more about your gallbladder problem, your doctor may order one or more of the following tests:

Imaging Tests

If your doctor suspects you have gallstones, you may be scheduled for an ultrasound. This test uses painless sound waves to check for gallstones. A CT scan may also be done. This test uses a series of x-rays to show detailed images of your body. This can help your doctor rule out other causes of abdominal pain.

HIDA (Hepatobiliary) Scan

A HIDA scan uses a marker (radioactive fluid) to check gallbladder function. It shows filling and emptying of the gallbladder. It can also show whether any bile ducts are blocked. After the test, the fluid passes safely from the body.

ERCP (Endoscopic Retrograde Cholangiopancreatography)

This procedure uses a thin, flexible scope. The scope is guided from the mouth down into the stomach to the common bile duct. The scope helps find stones in the duct. It can also help remove stones that have traveled into the duct. ERCP may be done before surgery, after surgery, or both.

IF YOU WAIT TO HAVE SURGERY

Gallstones do not always cause problems right away. So you may choose to delay surgery. Be aware, that waiting to have surgery may make serious complications more likely. These include:

- Continued or worsened pain
- Blockage of the common bile duct, causing infection or jaundice
- Sudden severe inflammation of the gallbladder (acute cholecystitis)
- Sudden severe inflammation of the pancreas (acute pancreatitis)

RISKS AND COMPLICATIONS OF GALL BLADDER SURGERY

- Bleeding
- Blood Clots
- Inflamed pancreas (pancreatitis)
- Injury to the common bile duct, nearby organs, or blood vessels
- Prolonged diarrhea
- Bile leakage into the abdomen
- Retained gallstone blocking common bile duct
- · Hernia at an incision site
- Bowel obstruction

YOUR SURGERY

Prior to surgery, you will be placed in a room. You will be placed in a room prior to surgery. A nurse will get you checked in and ready for surgery. To make the check in process easier, it would be helpful to have a list of your current medications including the dosages, and your past medical history including a list of previous surgeries you have had. Follow the instructions given to you at your pre-op appointment on how to prepare for the procedure.

GETTING READY FOR SURGERY

You will be told how to prepare for surgery. Follow all the instructions you're given. Be sure to:

· Tell your doctor about any medications, supplements, or herbs you take. This includes prescription and

over-the-counter medications. You may need to stop taking some or all of them before surgery

- Ask your doctor what to do if you take blood thinners such as Coumadin (warfarin), Plavix (clopidogrel), or aspirin
- · Stop eating and drinking before surgery as directed; this includes water

The Day of Surgery

During preparations for surgery, you may be asked your name and procedure more than once. This is for your safety. You will be given an IV line to provide fluids and medications. To prevent pain, you will likely receive general anesthesia. This puts you into a deep sleep like state during surgery.

If Open Surgery Is Needed

During surgery, your doctor may switch from laparoscopy to an open procedure. This does NOT mean something has gone wrong. Instead, a larger incision is needed to complete the procedure safely. Having open surgery means a longer hospital stay and recovery.

YOUR RECOVERY

You will likely be sent home the same day as your surgery, after you've recovered from anesthesia. You will be taken from surgery recovery back up to the room you were in prior to surgery. Once you've returned to your room, your vitals will be taken every 15 minutes for the first hour and you will be closely monitored. You will be required to have your pain and nausea under control, be able to walk, and be able to urinate prior to being dismissed. You must have someone to drive you home. At home, follow instructions for managing pain. Ease back in to your routine as directed. Also, be sure to keep your follow-up appointment.

Right After Surgery

You may have some pain in your shoulder for a few hours to days. This is caused by the gas used during surgery. To help relieve discomfort, you will likely receive pain medications. Early walking can also help assist with quicker decrease in this gas pain.

Recovering at Home

You'll likely feel tired. You may have some bruising around incisions. You may also have some stomach cramping. This is normal and will go away in a few days. To help speed recovery:

- Get up and move around as much as you can.
- Care for your dressing as advised. If your surgery was laparoscopic, your surgeon most likely closed your incisions by using dermabond (a topical adhesive). You cannot get your incisions wet for 24 hours after surgery. After 24 hours, it is okay for you to shower but the incisions cannot be soaked under water. This means no bathing, sitting in hot tubs, or swimming in pools.
- Avoid lifting anything over 20 pounds until you have your follow up appointment and your surgeon releases you to do so.

GETTING BACK TO NORMAL

• Start getting back to your normal routine as soon as you feel able.

Do take it easy at first and follow your surgeon's advice on your discharge instructions from the hospital. Ask your doctor about driving and going back to work. Most people with office jobs can return to work within 5 to 10 days. Each person's recovery is unique so returning to work is determined on an individual basis. If you feel like you are able to return to work prior to your follow up appointment, call your surgeon's office and he will determine if that is safe. Most likely, you will be released back to work at your follow up appointment which is 2 weeks after your surgery. You can begin having sex again when you feel ready.

• Ease back into Normal Eating

It often takes a few weeks for your digestion to fully adjust. You may have an upset stomach, loose stools, or diarrhea. These will gradually get better. It might help to start with smaller meals and eat more often. If diarrhea or other problems do not go away in a few weeks, be sure to tell your doctor.

Keep Active

As you heal, be as active as you can. Regular exercise improves blood circulation. Even gentle exercise such as walking can make a big difference in how you feel.

Follow up with your Surgeon

Keep your scheduled follow up visit. These allow your doctor to check your progress and make sure you're healing well. Mention any questions or concerns you may have. Tell your doctor if you're having any symptoms such as diarrhea or pain.

WHEN TO CALL THE DOCTOR

Call your doctor if you notice any of the following during your recovery:

- Fever of 101 F or higher
- Pain that doesn't go away or gets worse
- Incision that is warm or has increasing bleeding, redness, or drainage
- Vomiting or nausea that lasts more than 12 hours
- Shortness of breath
- Pain or swelling in your calf
- Symptoms of jaundice light-colored stool, dark urine, or yellowish skin or whites of eyes
- Severe diarrhea

We are always here to help, please do not hesitate to call with any questions or concerns::

- Dr. Morrissey's office: 620.222.6270
- Dr. Bloedel's office: 620.221.8930
- If after 5:00 PM, call the hospital and ask them to page your surgeon, Dr. Morrissey or Dr. Bloedel