NHS
Royal Berkshire
NHS Foundation Trust

# Advice following laparoscopic (keyhole) cholecystectomy (gallbladder removal)

Adult Day Surgery Unit

**This leaflet gives advice to aid your recovery following your procedure on the Adult Day Surgery Unit.**

## What is a laparoscopic cholecystectomy?

This operation consists of the removal of the gallbladder, which is a small organ, shaped like a pear that is attached underneath the liver. The gallbladder stores bile, a yellow fluid that helps to digest your food.

The removal of the gallbladder will not affect the digestion process, as it only stores bile. Without a gallbladder, the bile passes directly from the liver (where it is made) into the gut. The most common cause for removal is the formation of gallstones.

The operation involves the insertion of small tubes through the abdominal wall. A camera and surgical instruments are passed through these tubes to view the inside of your abdomen and perform the operation. When you wake up, you will see three or four plasters over the insertion sites. These sites will have been stitched or glued.

## After the operation

- Please try to gently mobilise (walk about) when you get home, to minimise the risk of developing blood clots in your legs. You will probably not feel able to do your usual activities straight away, but within 2-3 days, your discomfort should have improved and you can resume your normal activity gradually, as you feel able.
- It is a good idea to take regular simple analgesia (paracetamol or ibuprofen unless you are allergic or advised not to by your team) for the first few days after your operation. Thereafter, you can take these tablets as required.

- Your wound will usually be closed with either skin glue or a waterproof dressing. You can have a shower but avoid soaking the dressing or baths for 4 days post-operatively. If a dressing is present, you can then remove this, leaving the wounds uncovered to help with the healing process.
- Your nurse will let you know if stitches were used instead of glue. These are dissolvable stitches that take 4-6 weeks to disappear.
- You may experience some pain and discomfort during the first week, but this should improve day after day. This is mainly due to the use of carbon dioxide gas to inflate your abdomen, and the pain can radiate up into your shoulders. This is completely normal. You should take regular painkillers (such as Paracetomol or Ibuprofen) to help relieve your pain.
- If the pain worsens during the first few days, or becomes unbearable, please seek urgent medical attention at the hospital.
- You should stay off work for _____ (please ask nursing staff for a fit note if required).
- You may need to refrain from work for longer than this, depending on the healing process. Please make an appointment with your GP if this needs to be reviewed.
- Avoid heavy lifting for four to six weeks.
- Do not drive for three to five days as the operation may have affected your reflexes. Check with your motor insurance company before driving a vehicle.
- For any problems regarding wound discomfort or weeping, please telephone the Adult Day Surgery Unit for advice. Out of hours, contact NHS 111.

**If there is anything you do not understand or if you have any questions or concerns, please feel free to discuss them with your nurse.**

## During the first 24 hours following your discharge

If you have any further concerns about your surgery, please telephone the ADSU: 0118 322 7622.

Opening hours are 7.30am to 10.00pm Monday-Friday. If you need help/advice outside these hours, please telephone the Royal Berkshire Hospital switchboard on 0118 322 5111 and ask for the on-call surgery doctor. Please note that this should be for emergencies only.

After 24 hours, please seek advice from your GP or call NHS 111.

To find out more about our Trust visit www.royalberkshire.nhs.uk

**Please ask if you need this information in another language or format.**

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Next review due: November 2028