

## *Greenwich Hospital*

### **What is a Laparoscopic Cholecystectomy?**

#### **PATIENT/FAMILY INFORMATION SHEET**

#### **What is a laparoscopic cholecystectomy?**

A laparoscopic cholecystectomy (“lap-are-oh-skop-ick co-lee-sist-eck-toe-mee”) is the removal of the gallbladder using a small thin tube with a camera on the tip of it that is used to see the inside of your body.

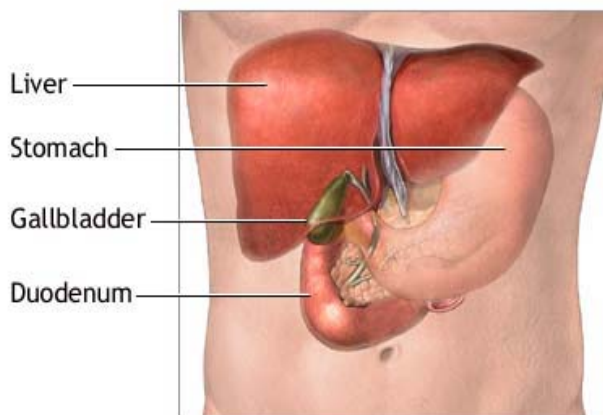
The gallbladder is a small, pear-shaped organ beneath the liver in the right upper part of your abdomen. Its main purpose is to store bile, which is one of the digestive juices. You do not need your gallbladder to maintain good health.

#### **How is a laparoscopic cholecystectomy performed?**

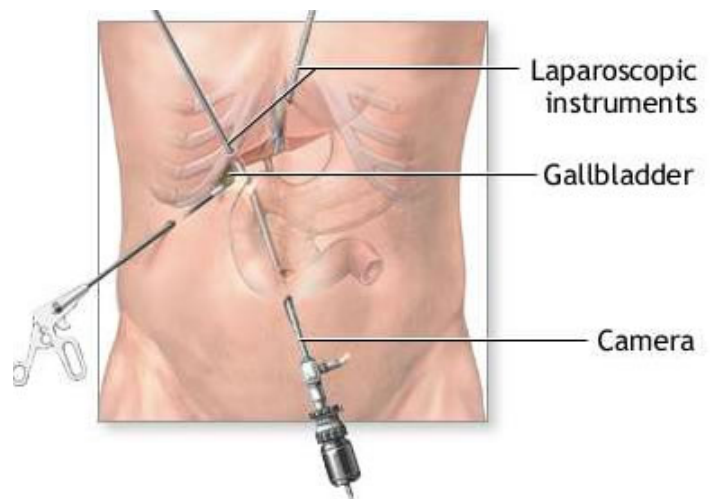
The scope is put into your body through a small cut, or incision, made just below the umbilicus (belly button). Three other small incisions are made in the right upper part of your abdomen to insert the other surgical tools. Your abdomen will be filled with a special harmless gas, carbon dioxide, for easier viewing and to provide room for the surgery to be performed. The gallbladder is clipped with the surgical instruments and is taken out through the small incision by the belly button. The procedure usually takes 30 to 60 minutes.

In a small percentage of the cases, the gallbladder cannot be removed by laparoscopy. The standard open cholecystectomy through a larger incision in the abdomen is then immediately performed.

#### **Anatomy**



#### **Procedure**



## **Are there any complications during surgery?**

Though rare, injury to the bile duct, blood vessels, or intestine can occur.

## **Are there any symptoms to report to my doctor after surgery?**

It is important to report any of the following symptoms to your surgeon:

- Persistent nausea and vomiting
- Bleeding at the incision site.
- Infection at the surgical site. Symptoms include:
  - Fever of 100 degrees F or more
  - Drainage, redness, swelling at incision site
  - Increased pain
  - Skin around the incision is warm to touch

## **Is there any special care after the surgery?**

- You may have shoulder pain after the surgery. This is normal and is caused by the gas used during the surgery. When you get home, it is important to get up and walk around to help get rid of the gas.
- You will usually have abdominal discomfort after the surgery. Your doctor will prescribe pain medicine for you to take. It is important to take this medication as directed so that you are able to get out of bed and care for yourself at home.
- Your incisions may be open to air or covered by a clear dressing.
- You may shower, but do not take a tub bath until advised by your surgeon.
- It is very important to get out of bed and walk. This improves the circulation in your legs, aids in getting rid of the abdominal gas, keeps your lungs clear from congestion, and assists in preventing constipation.
- You may slowly increase your diet within one to two days after surgery from clear liquids (tea, broth, jello, clear juices, water) to your usual diet. If you have nausea and/or vomiting, report this to your doctor.
- Your surgeon or nurse will review with you when you can return to normal activities.
- When you get home, call your surgeon to make a follow up postoperative appointment to check your surgical site. It is very important to keep this appointment.

Source: • familydoctor.org Retrieved May 2005. • Jackson Gastroenterology @ www.gicare.com Retrieved May 2005.

*For more Patient Fact Sheets, see the Greenwich Hospital web site at [www.greenhosp.org](http://www.greenhosp.org) and Click on Patients & Visitors, then Patient Education* 5/05